

Property Services
Adddress
Town/City MB Postal Code
manitoba.ca/housing

Name Title E-mail address

Tel: (204) 945-xxxx Toll Free: 1-800- if avail

Fax: (204) 945-xxxx

<<Date>>

<<Leaseholder name>>
<<Co-leaseholder name>>

<<Address>>

<<City/town, MB postal code>>

Application Reference: << AppRefNo>>

Client ID: <<Client ID>>
Client ID: <<Client ID>>

Interviewed and Approved

Dear << Leaseholder and Co-leaseholder >>:

A review of the information provided at the interview for the Social Housing Rental Program, on [[Date of interview]] has been completed and you have been approved for the program.

You will be contacted when a suitable unit becomes available in the location(s) you have selected.

Please report any changes to your contact information or housing situation immediately. It is important to keep your file current to assist Manitoba Housing in providing a unit that best suits your housing needs.

We will only make one unit offer. If we are unable to contact you at the telephone number or address you have provided, your application will be cancelled.

If you have any questions or concerns, please contact me.

Regards,

<Sender Name>> <Sender Title>> Tel:<<Sender Tel>>

