

Application for Coordinated Access Waiting List

Family / Senior Citizens / Single Adults

IMPORTANT ... PLEASE READ !!

Municipality of Chatham-Kent Housing Services / Health & Family Services

Instructions for completion of application:

1. Print all information in ink.
2. Fill in **every** question on the application. If it does not apply to you – mark a line through the space or mark it “n/a” (not applicable). This is important in determining whether or not you have missed a question.
3. Check the unit information on the pamphlet to see whether or not you qualify for the housing providers that you have checked (i.e. if you only qualify for a one bedroom unit, you don't want to apply for a place that has only family units - two, three and four bedrooms). Check the location to make sure that the housing provider that you have chosen is in the town, city or area that you want to live in.
4. Check **yes or no** when filling in the section asking whether or not you owe arrears to any geared-to-income housing providers, even if you've already indicated that you've never lived in subsidized housing.
5. In the Source of Income – check the definitions of income (page 6) and place the amounts that you are receiving in the appropriate boxes. Indicate your bank, your account number and the amount that you have in your bank accounts in the section showing Bank/Trust/ Credit Unions/ Savings accounts.
6. Ensure that all members of your household who are sixteen years of age or older have signed the declaration on the application. If you have chosen a co-operative housing provider, be sure to sign the co-op form at the back of your application.
7. NOTE THAT :
 - **ALL SECTIONS OF THE APPLICATION MUST BE COMPLETED.**
 - **THE APPLICATION MUST BE SIGNED BY ALL HOUSEHOLD MEMBERS (DEPENDENTS) 16 YEARS OF AGE OR OLDER, WHERE THE INCOME OF THE MEMBER (DEPENDENT) 16 YEARS OR OLDER IS TAKEN INTO CONSIDERATION IN DETERMINING THE AMOUNT OF RENT PAYABLE BY THE HOUSEHOLD.**
 - **COPIES OF BIRTH CERTIFICATES, LANDED IMMIGRANT/ REFUGEE STATUS PAPERS, INCOME/INVESTMENT STATEMENTS AND BANK BALANCES (STATEMENTS OR BOOKS) AND ANY REAL ESTATE INFORMATION MUST BE INCLUDED WITH THE APPLICATION.**
 - **IN ORDER TO AVOID DELAYS IN THE PROCESSING OF THIS APPLICATION, AND TO ENSURE ELIGIBILITY, YOU MUST REPORT ANY CHANGE IN A DOCUMENT OR INFORMATION THAT YOU HAVE PROVIDED (i.e. INCOME, ADDRESS, PHONE #, FAMILY COMPOSITION, INVESTMENTS, ETC.) TO THE CKHS OFFICE WITHIN 10 BUSINESS DAYS OF THAT CHANGE. FAILURE TO REPORT MAY RESULT IN CANCELLATION OF YOUR APPLICATION.**
8. If you have difficulty completing this application, please feel free to **contact our staff** at:

Chatham-Kent Housing Services (CKHS)
P.O Box 1296, 435 Grand Avenue West, 1st Floor
Chatham, Ontario N7M 5R9
Phone – (519) 351-8573 / Fax – (519) 351-6404
Email: ckhousingervices@chatham-kent.ca

In order to be considered for Rental Accommodation:

- You or someone in your household must be 16 years of age and older and must be capable of living independently.
- You must be a Canadian Citizen/Permanent Resident or have made an application for status as a Permanent Resident or have Refugee Claimant household under the Immigration and Refugee Protection Act (Canada) where no removal order has become enforceable against any member of the household.
- You must not owe arrears to any social housing provider or have been found by the *Landlord and Tenant Board* or a court of law to have misrepresented income in relation to the receipt of rent geared-to-income assistance.
- If you own a house, you must agree to put it up for sale upon offer to lease and sell within six months.

1. APPLICANT

| | | | | | |
|---|--------------|----------------------------|---|-----------------------------------|-------------------|
| Last Name _____ | | First Name & Initial _____ | | Mr./Mrs./Miss/Ms. (circle one) | |
| Social Insurance No. (optional) _____ / _____ / _____ | | | Date of Birth (M/D/Y) _____ / _____ / _____ | | |
| Address _____ | Unit # _____ | PO Box # _____ | City/Town _____ | Province _____ | Postal Code _____ |
| Home Telephone No. () _____ | | | | | |
| Place of Employment _____ | | | Length of Employment _____ | | |
| Address _____ | | | Telephone No. _____ | | |
| Can you accept personal calls at work? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | |
| Status in Canada - (check one): | | | | | |
| <input type="checkbox"/> Canadian Citizen <input type="checkbox"/> Landed Immigrant <input type="checkbox"/> Refugee Claimant <input type="checkbox"/> Deportation Order <input type="checkbox"/> Other Proof of status is required (i.e. birth certificate, landed immigrant/refugee claimant papers) | | | | | |
| Are you permanently residing in Canada? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | |
| Do you have a principal place of residence elsewhere? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | |
| Person to contact in your absence or to act as an interpreter: | | | | | |
| Name: _____ | | | Telephone No. _____ | | |

2. CO-APPLICANT

| | | | | | |
|---|--------------|----------------------------|---|-----------------------------------|-------------------|
| Last Name _____ | | First Name & Initial _____ | | Mr./Mrs./Miss/Ms. (circle one) | |
| Social Insurance No. (optional) _____ / _____ / _____ | | | Date of Birth (M/D/Y) _____ / _____ / _____ | | |
| - | | | | | |
| Address _____ | Unit # _____ | PO Box # _____ | City/Town _____ | Province _____ | Postal Code _____ |
| Home Telephone No. () _____ | | | Relationship to Applicant: _____ | | |
| Place of Employment _____ | | | Length of Employment _____ | | |
| Address _____ | | | Telephone No. _____ | | |
| Can you accept personal calls at work? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | |
| Status in Canada - (check one): | | | | | |
| <input type="checkbox"/> Canadian Citizen <input type="checkbox"/> Landed Immigrant <input type="checkbox"/> Refugee Claimant <input type="checkbox"/> Deportation Order <input type="checkbox"/> Other Proof of status is required (i.e. birth certificate, landed immigrant/refugee claimant papers) | | | | | |
| Are you permanently residing in Canada? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | |
| Do you have a permanent place of residence elsewhere? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | |

3. LIST ALL OTHER PERSONS TO LIVE IN ACCOMMODATION THAT YOU HAVE APPLIED FOR:

| <i>Last Name</i> | <i>First Name</i> | <i>Birthdate</i> | <i>Sex</i> | <i>Relationship</i> | <i>School and/or Place of Employment</i> |
|------------------|-------------------|------------------|------------|---------------------|--|
| | | | | | |
| | | | | | |
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| | | | | | |

Is baby expected? Yes No Due Date? _____ (If Yes, provide verification of pregnancy)

4. PRESENT LOCATION OF OTHER PERSONS

Does everyone who will be residing with you live in your present accommodation? Yes No
 If No, please list other address(es): _____

5. PREVIOUS TENANCY IN SUBSIDIZED RENTAL ACCOMMODATION IN ONTARIO

Have you or any other persons listed on this application lived in subsidized accommodation in Ontario? Yes No If Yes, please indicate:
 Name of Housing Provider _____
 Name at time of Occupancy _____
 Address of Subsidized Unit _____
 Occupancy dates (M/D/Y) ____/____/____ to ____/____/____
 Arrears owing to any rent-geared-to-income housing providers? Yes No
 If yes, what is the amount owing? \$ _____

6. PRESENT & PREVIOUS RENTAL HISTORY – *This section must be completed*

Current Landlord's Name _____
 Address _____ Telephone _____
Previous Residential History (please list most recent address first):

| <u>Address</u> | <u>Landlord's Name & Phone #</u> | <u>From</u> - <u>To</u> | <u>Reason for Leaving</u> |
|----------------|--------------------------------------|-------------------------|---------------------------|
| 1. _____ | _____ | _____ | _____ |
| 2. _____ | _____ | _____ | _____ |
| 3. _____ | _____ | _____ | _____ |

List arrears owing to previous landlords and/or utility companies:
 Landlord(s): 1. _____ 2. _____
 Amounts owing: Rent \$ _____ Damages \$ _____ Rent \$ _____ Damages \$ _____
 Overdue amounts owing to utility companies: Gas \$ _____ Hydro \$ _____ Water \$ _____

7. Housing Preferences - Please check as many preferences as you wish. I/We wish to apply for the following:

Apartment Townhouse House No Preference

I/We want to live in accommodations for:

Seniors only Families Mixed No Preference
 Co-Operative Non-Profit Social/Public No Preference

8. INCOME & ASSETS (See Definition of Income – Page 6)

IF YOU ARE A MARKET RENTER, YOU ARE NOT REQUIRED TO COMPLETE SECTION #8. PLEASE INDICATE THE AMOUNT OF YOUR TOTAL GROSS MONTHLY INCOME IN THE SECTION ABOVE.

Note: Income amount required is total gross (*before deductions*) per month. Please provide proof of all sources of income (e.g. last pay stub, bank record, etc.). **ONCE HOUSED**, any household receiving rent-geared-to-income assistance, must make reasonable effort to access certain sources of income, if eligible, as listed below:

1. Basic financial assistance under the Ontario Works Act, 1997
2. Support under the Divorce Act (Canada), the Family Law Act or the Reciprocal Enforcement of Support Orders Act.
3. Benefits under the Employment Insurance Act (Canada).
4. Any pension or other benefit that an individual who is 65 years of age and older is or may be entitled to receive.
5. Support or maintenance with respect to the member under the Immigration and Refugee Protection Act (Canada).

A household may cease to become eligible for RGI assistance if it is deemed that the household is not making reasonable effort to obtain income as specified.

SOURCE OF INCOME (PLEASE PROVIDE COPIES)

| | Applicant | Co-Applicant | Others |
|---|-----------|--------------|--------|
| Old Age Security (OAS) & Federal Supplement (GIS) | | | |
| Provincial Guaranteed Annual Income Supplement (GAINS) | | | |
| Canada Pension Plan (CPP) | | | |
| Worker's Compensation (WSIB) | | | |
| Private Company Pensions - Specify: | | | |
| Veteran's Affairs Allowance (DVA) | | | |
| Provincial Disability (ODSP) | | | |
| Social Assistance/Ontario Works (OW) | | | |
| Employment Insurance Benefits (EI) | | | |
| Employment Income Hourly Rate \$ _____ Avg.# hrs./wk. _____ | | | |
| Alimony / Support | | | |
| Other - Specify: | | | |

Please note that Child Tax Credit and GST are NOT reportable income.

BALANCE

MONTHLY INTEREST
(\$ OR %)

SOURCE (Provide copies of all sources below)

| | Applicant | Co-App. | Others | Applicant | Co-App. | Others |
|---|-----------|---------|--------|-----------|---------|--------|
| Bank / Trust Co./ Credit Unions / Savings Accts. Bank Name: _____ Account # _____ Bank Name: _____ Account # _____ | | | | | | |
| RRSP / Stocks / Bonds / GIC / Debentures /Others Specify: | | | | | | |
| Annuities / Rental Revenue | | | | | | |
| Business Assets (Partnership, Franchise, Self-employment) | | | | | | |
| Monies owed to you by others | | | | | | |
| Life Insurance Policies | | | | | | |
| Other Assets - Specify: | | | | | | |
| Assets transferred in last 3 yrs. (i.e. monies, property, real estate, etc. given to others) Date of Transfer: _____ | | | | | | |
| Net Value of Real Estate owned (e.g. house, farm, land, mobile home, etc.) \$ _____ Location: _____ Outstanding Mortgage amount: \$ _____ Any other liens or loans against the property? Amount: \$ _____ Are you willing to sell your property? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | |

Definition of Income

Income means all income, benefits and gains, of every kind and from every source, but not limited to the following:

- a) gross salaries, wages, overtime payments, commissions, bonuses, tips, gratuities;
- b) grants, scholarships or bursary payments;
- c) the greater of the net income from the business or the total withdrawals from the business or personal salary or other benefits of any member of the family or of the applicant who is self-employed in a business;
- d) the gross amount of employment insurance benefits;
- e) the gross amount of worker's insurance benefit payments or other industrial accident insurance payments or payments made because of illness or disability;
- f) the gross amount of any old age security, federal guaranteed income supplement and spouse's allowance and the Ontario Guaranteed Annual Income Supplement (GAINS);
- g) the gross amount of every kind of pension allowance, benefit and annuity whether from a federal, provincial or municipal government of Canada or any level of government of any other country or state from any other source;
- h) the gross amount of alimony, separation, maintenance or support payments made to the applicant;
- i) the gross amount of gains from investments including interest on dividends, stocks, shares and other securities and where the actual income cannot be determined, an imputed rate of return set by the landlord from time to time;
- j) the gross interest income from savings or chequing accounts in a bank, trust company or a credit union;
- k) the gross amount of interest earned or payable from bonds, debentures, term deposits or investments, certificates, mortgages, capital gains or lump sum payments or other assets;
- l) an imputed income amount equal to the total appraised value of all assets which do not produce interest income multiplied by a rate of return set by the landlord from time to time.

"Gross Family Income" means the aggregate income of the applicant and every person 16 years of age and older expected to reside in the accommodation applied for.

Examples of Possible Sources of Income (including but not limited to):

Employment

- Full-time
- Part-time
- Irregular
- Casual
- Seasonal
- Odd Jobs
- Shift Bonuses
- Yearly or Seasonal Bonuses
- Cost of Living Bonuses
- Overtime Earnings
- Commissions
- Tips and Gratuities
- Disability Pay
- Sickness Pay
- Long Term Income Protection Payments
- Separation/Vacation Pay

Self Employment

- Tutoring
- Music Teaching
- Child Care
- Babysitting
- Taxi
- Business

Pensions and Allowances

- Old Age Security (OAS)
- Guaranteed Income Supplement (GIS)
- Guaranteed Annual Income Supplement (GAINS)
- Canada Pension Plan (CPP)
- Quebec Pension Plan
- Social Security (other countries)
- Widow's Pension
- Company Pension
- Private Pension
- Public Service Pension
- Civilian War Pension
- Disability pension
- War Veteran's Allowance (DVA)
- War Veteran's Allowance (other Countries)
- Military or Militia or Civil Defence Allowances
- Training Allowances
- Retraining Allowances
- Ontario Disability Support Program (ODSP)

Other

- Ontario Works (OW)
- Worker's Compensation Payments
- Insurance Payments
- Student Grants
- Provincial or Municipal Payments
- Employment insurance Commission payments
- Payments under compensation for Victims of Crime Act
- Payments from Official Guardian or Public Trustee
- Payments from Children's Aid Society or Catholic Children's Aid
- Separation Payments
- Alimony Payments
- Support Payments (for spouse or child)
- Support from relatives or other sources
- One-time lump-sum payments (inheritances, court and out of court settlements)

Examples of Possible Assets (including but not limited to):

Income Producing Assets

- Farm property which produces income
- Real estate (residential, commercial, farmland, cottage, mobile home) which produces rental income
- Savings accounts at bank, trust company, credit union, annuities; Guaranteed Investment Certificates; stocks or shares, bonds, debentures, mortgages, loans, notes, term deposits
- Licence which produces income (e.g. taxi licence)
- Business interest which produces income

Non-income Producing Assets

- Life Insurance (with a cash surrender value)
- Registered Retirement Savings Plan
- Real Estate (house, condominium, summer cottage, farmland, commercial or vacant land) which does not produce income
- Collection of, or investments in, other valuable non-income producing assets
- Business asset which does not produce income

**MUNICIPALITY OF CHATHAM - KENT HOUSING SERVICES
APPLICATION FOR COORDINATED ACCESS WAITING LIST**

DECLARATION, RELEASE AND CONSENT OF INFORMATION

I/We _____ declare that all information given in this application is correct and complete. The application and any supporting documents become the property of the Municipality of Chatham-Kent Housing Services. Copies of, and information pertaining to the application, may be shared with housing providers that I/we have selected for the purpose of processing the application including, but not limited to, determining the eligibility of the household for rent-gear-to-income assistance, determining the size and type of unit in respect of which the household is eligible to receive rent-gear-to-income assistance, determining the placement of the household on waiting lists in locations where I/we wish to live and determining the amount of rent-gear-to-income payable by the household.

If information on this application is incorrect or not true, Chatham-Kent Housing Services or the housing providers I have applied to may request additional information, may cancel my application or both and I may be prohibited from re-applying for assistance for a minimum of two years under the Housing Services Act, 2011.

A written appraisal or verification, in a form specified by Housing Services or the housing provider may be requested and is to be obtained at the household's expense. The eligibility of the household shall be reviewed once in every 12 month period or more frequently as required in order to determine whether the household continues to be eligible for rent-gear-to-income assistance. The household subject to the review shall provide such information and documents as the service manager may require within the time period specified by the service manager.

I/We agree that I/we are legal residents of Canada.

I/We understand that if rent accommodation is provided to me/us, it will be occupied solely by me/us and those persons listed on the application.

I/We understand that this application does not constitute an agreement on the part of the Municipality of Chatham-Kent Housing Services to provide me/us with rental accommodation.

Personal information contained on this form or in attachments is collected by the Municipality of Chatham-Kent Housing Services pursuant to the Housing Services Act, 2011, and associated regulations.

Pursuant to the Municipal/Provincial Freedom of Information and Protection of Privacy Act (R.S.O. 1990 c.m.56) and the Federal Privacy Act, I /we give my/our consent and authorization to the Municipality of Chatham-Kent Housing Services:

- To make enquiries, to verify the information given on this application, including a landlord and/or credit check and I/we authorize the Minister, the Housing Services Corporation, the Municipality of Chatham-Kent Housing Services, each service manager, each administrator, each housing provider, each lead agency and each person or organization providing services by contract to any of them to share with any of the following persons personal information that is in their possession and was collected under the Housing Services Act, 2011, the Ontario Works Act, 1997, the Ontario Disability Support Program Act, 1997 or the Day Nurseries Act, if the information is necessary for the purposes of making decisions or verifying eligibility for assistance.
- To share the information on this form and any attachments to any government or body with whom the Municipality of Chatham-Kent Housing Services has made an agreement under the Housing Services Act, 2011, without further notice to me, for the purpose of conducting research related to a social benefit program, social housing/housing services or rent-gear-to-income assistance.

Questions regarding the collection, use or disclosure of the information provided can be directed to: Director, Housing Services, Municipality of Chatham-Kent , P.O. Box 1296, 435 Grand Avenue West, Chatham, ON N7M 5R9 Phone – (519) 351-8573 / Fax (519) 351-6404.

NOTE: ALL UNSIGNED APPLICATIONS WILL BE RETURNED TO THE APPLICANT. This application MUST be signed by ALL persons age 16 years of age and over.

Applicant _____ Date _____

Co-Applicant _____ Date _____

Other Household Members _____ Date _____

Other Household Members _____ Date _____

Other Household Members _____ Date _____

ADDITIONAL INFORMATION PERTAINING TO CO-OPERATIVES

TO BE COMPLETED BY THOSE APPLICANTS APPLYING TO LIVE IN A CO-OPERATIVE HOUSING COMMUNITY

As co-operative housing developments are run by the members who live in the co-op community, there are additional notifications applicants should be aware of when applying for a home in a housing co-op.

Therefore, in addition to the Declaration, Release and Consent of Information previously listed, we have read and understand the following which specifically apply to housing co-operatives:

- We understand that only members of a co-operative may live in a co-op housing unit and that we are required to apply for membership and occupancy rights.
- We understand that co-operative housing developments provide housing at cost to its members.
- We understand that co-ops expect members to share responsibility in running the co-op community and we agree to take part in this responsibility.
- We understand we must attend an Information Exchange Meeting with the co-op's "New Member Committee" and can become members only if the co-op accepts us. Applying does not guarantee that we will be accepted.
- We understand that co-ops are governed by the Co-operative Corporations Act of Ontario and their specific by-laws and not the *Residential Tenancies Act*
- We understand that each co-op sets its own pet policy which we agree to follow.
- We understand that there may be a fee associated with applying for a co-op

SIGNATURES: (of every person 16 years of age and over who are applying to live in a Co-op.):

Must be signed if you are applying for residency in Co-op Housing

Date _____ Applicant _____

Date _____ Applicant _____

Date _____ Applicant _____

Date _____ Applicant _____

General Information

How did you hear about non-profit, co-op and/or housing services?

- from a friend or relative
- from Housing Information Services
- from a support agency (social services, community service provider)
- from a sign at a development
- advertising - specify: _____
- other - specify: _____

Comments: _____
