Application for Subsidized Housing



SECTION 1 — ELIGIBILITY REQUIREMENTS

- 1: At least one member in your household must be 16 years or older. The application must be signed by all members of the household 16 years and older.
- 2: You must be a Canadian Citizen, Landed Immigrant, or have Refugee Claimant Status and have no deportation order under the Immigration Act (Canada) against any member of the household or no departure order or exclusion order under the Immigration Act (Canada) has become effective with respect to any member of the household.
- 3: You must not owe arrears to any social housing provider or have misrepresented your household income.
- 4: If you own a house, you must agree to sell it within six months of being housed.
- **5:** You may not have assets worth more than \$50,000. You can be placed on a waiting list for housing but you will be ineligible if you have more than \$50,000 at the time of being offered a unit.

SECTION 2 — COMPLETING THE APPLICATION

- 1: Please PRINT all information in ink.
- 2: Copies of Canadian Birth certificates, proof of Canadian Citizenship or Landed Immigrant status, for all members of the household MUST be provided with the application.
- **3.** Complete all sections of the application and mail it to the address below.
- 4. Before signing the form, please read and understand the "Declaration, Release and Consent to Information".
- **5.** It is the applicant's responsibility to notify our office within 30 business days of any changes in your circumstances.
- **6.** If we are unable to contact you at the telephone number and/or the address provided on the application your file will be cancelled.

COUNTY OF SIMCOE SOCIAL HOUSING DEPARTMENT 1110 HIGHWAY 26, MIDHURST, ONTARIO LOL 1X0 MAIN LINE: 705-725-7215

FAX: 705-725-7220

EMERGENCY HOUSING IS NOT AVAILABLE

SECTION 3 - QUESTIONS AND ANSWERS FOR SOCIAL HOUSING

How are people chosen for housing?

WHEN YOUR NAME GETS TO THE TOP OF THE LIST. The list is kept in order of the date we receive your completed application. Due to the large volume of applications, we cannot inform you of your status on the list.

How much rent can I expect to pay?

Rent-geared-to-income is based on 30% of your gross monthly income, or if you are receiving Ontario Works or the Ontario Disability Support Program, a social assistance rent scale. Additional charges may apply depending on the project.

Can I choose where I want to live?

Yes. When you apply for housing, you will be asked where you want to live. You can choose one or many locations. Your name will be added to the waiting list for each location where you are eligible. It is important to remember that you only have three refusals in total and after that you will no longer be eligible. (Your file is cancelled.) Therefore, select only the areas where you would like to live. You can request changes to your building selections at any time. Contact one of our Housing Clerks who will make the changes with your original application date.

Do I get to choose the unit size I want?

You can indicate what type of unit you want to live in. However your choice will be subject to occupancy standards that apply to households of your size.

How long will it take me to get a unit?

The length of time before a unit comes available will vary depending on the locations you choose. It may take some time because of the small number of vacancies.

How do I know that my application has been received?

Within 7 business days after your application is received, it will be reviewed to ensure that it is complete. You will receive written notice informing you whether it is complete or not.

We will send you an update at least once per year. Your name may be removed from the waiting list if we cannot contact you.

How will I be contacted for an offer?

Since units are rented promptly, housing providers require a daytime telephone number so that they can call you when a unit becomes available. If you do not have a telephone or cannot be reached during the day, it would be helpful for you to provide a contact number for someone who is available to pass a message to you during the day.

How do I update or make changes to my application?

Please contact the Centralized Waitlist at 705-725-7215 and select Option 3. A Housing Clerk will assist you with changes or updates to your housing application.

IN ORDER TO REMAIN ON THE WAITLIST, YOU MUST NOTIFY OUR OFFICE WITHIN 30 BUSINESS DAYS WITH ANY CHANGES IN THE INFORMATION PROVIDED ON YOUR APPLICATION SUCH AS CHANGES TO YOUR ADDRESS, TELEPHONE NUMBER, YOUR CONTACT PERSON OR THE NUMBER OF PERSONS IN YOUR HOUSEHOLD. FAILURE TO DO SO MAY RESULT IN OUR BEING UNABLE TO CONTACT YOU, THEREBY REMOVING YOU FROM THE WAITING LIST.

1. APPLICANT		
LAST NAME:		FIRST NAME:
DATE OF BIRTH:MM/DD/YY	GENDER: M 🗖 F 🗖	SOCIAL INSURANCE NO:
APT NO STREET NO	STREET NAME:	CITY/TOWN:
PROVINCE: POSTAL CODE:	HOME PHONE: _() MARITAL STATUS:
BUSINESS PHONE: ()	CITIZENSHIP: (attach birth ce	ertificate/ Canadian citizen Landed immigrant
PERSON TO CONTACT IN YOUR ABSE		RETER: (Must be completed) CITY/TOWN:
POSTAL CODE:	RELATIONSHIP:	PHONE NUMBER: ()
2. CO-APPLICANT		FIRST NAME:
		SOCIAL INSURANCE NO:
) MARITAL STATUS:
		ertificate/ Canadian citizen Landed immigrant
RELATIONSHIP TO APPLICANT:		
PERSON TO CONTACT IN YOUR ABSE		RETER: (Must be completed) CITY/TOWN:
		PHONE NUMBER: _()
3. LIST ALL OTHER PERSONS APPLIED FOR. THIS FIELD	S INCLUDING DEPENDENT WILL AFFECT THE UNIT	TS TO LIVE IN ACCOMMODATION SIZE YOU ARE ELIGIBLE FOR. IF YOU ARE DUE DATE IN ONE OF THE BOXES.
LAST NAME FIRST		H GENDER RELATIONSHIP
	MM/DD/YY MM/DD/YY MM/DD/YY MM/DD/YY	
4. DOES EVERYONE LISTED A	BOVE LIVE IN YOUR PRE	SENT ACCOMMODATION?
		OLIVI 7.000WWOD7TIOW.

5. Previous Applicat	tions for Subsidized	d Housing			
Have you or any other persons	s listed on this application live	ed in a non-prof	t or co-operative	e rental accommodation in Ontario	? Yes 🔲 No 🔲
If "Yes", provide the name of h	nousing provider:				
If "Yes" please give name of pe	erson, subsidized address and	d occupancy da	ites:		
NAME:	ADDRESS:			OCCUPANCY DATES:	from
					to/
6. SPECIAL NEEDS	HOUSING				
	rm can be found on the Cour	nty of Simcoe v	ebsite. It can al	n verification of disability and comp so be completed in person at the pinder).	_
I/We require a wheelchair acce	essible unit: Yes 🔲 No 🗆	☐ Do y	ou own a vehicle	e?: Yes 🗌 No 🔲	
Do you require main floor/elev	rator?: Yes 🗌 No 🗀]			
ERED FOR ANY/ALL ACCESS	SIBLE UNITS.			TTACHED TO THIS APPLICATION	
					·······
NAME:			PHC	NE NUMBER:	
0 DDEVIOUS ADDDE	 ECC END THE DACT			COMDIETED)	
8. PREVIOUS ADDRE		JILANO.	(IVIUST BE		
PREVIOUS ADDRESS (most recent first)	FROM	T()	REASON FOR LE	AVING
	MM/YYYY	MM/	YYY		
	MM/YYYY	MMA			
	MM/YYYY	MMA			
	MM/YYYY MM/YYYY	MM/\square			
	TV11VI/ T T T	TVIIVI/ I			
	UIDEMENTO (ODTIC				
9. ADDITIONAL REQ	UIKEWENTS (UPTIC	JINAL) 			
Check one or more of the persons on this application of the persons on this application of the persons on this application of the persons of	or apartment or a building issues, complete the next	g with an t box.lf you using that	parking. If younit, please in require parking where parking alternate park	" designated buildings have e ou own a car and are applying ndicate if parking is mandatory ng, you will be excluded from g is not available. If you are we king for your car and do not we choices, do not check the ne	for a seniors y for you. If you offers for housing villing to find ish to be excluded
reasons. Yes No	. 5. 5.674101 455550 101 11	- Carti	·	a parking space; please exclu g is unavailable. Yes 🔲 No [

10. MONTHLY INCOME BEFORE DEDUCTIONS RECEIVED BY ALL PERSONS/FAMILY MEMBERS TO LIVE IN THE ACCOMMODATION. **ALL SOURCES OF INCOME MUST BE REPORTED**. (GST OR CHILD TAX CREDIT SHOULD **NOT** BE INCLUDED AS A SOURCE OF INCOME).

LIST OF SOURCES OF INCOME	S OF INCOME GROSS MONTHLY TOTAL (BEFORE DEDUCTIONS)							
	APPLICANT	CO-APPLICANT	OTHERS ON APPLICATION					
Ontario Works (Social Services)	\$	\$	\$					
Ontario Disability Support Program (O.D.S.P)	\$	\$	\$					
Full/Part Time Employment	\$	\$	\$					
Employment Insurance (E.I.)	\$	\$	\$					
Workplace Safety Insurance Benefits (W.S.I.B.)	\$	\$	\$					
Old Age Security (O.A.S)	\$	\$	\$					
Gains – Aged	\$	\$	\$					
Canada Pension Plan (C.P.P.)	\$	\$	\$					
Private Pensions	\$	\$	\$					
Student Grants	\$	\$	\$					
Ontario Student Assistance Program (O.S.A.P.)	\$	\$	\$					
Other Income	\$	\$	\$					

11. DETAILED STATEMENT OF ASSETS

STATEMENT OF ASSETS		VALUE	
	APPLICANT	CO-APPLICANT	OTHERS ON APPLICATION
Bank, Trust Company, Credit Union (savings and chequing)	\$	\$	\$
Stocks, Bonds, GIC's, Debentures, Term Deposits, etc.	\$	\$	\$
RRSP, Annuities	\$	\$	\$
Rent Revenue	\$	\$	\$
Business Assets	\$	\$	\$
Monies owed to you over \$500	\$	\$	\$
Other Assets (specify)	\$	\$	\$

Do you or any other person listed on this application own property ie. house, farm, land, mobile home, cottage? Yes No If "Yes", indicate type of property, address and estimated value:							
Have you or any person listed on this application transferred assets? Yes ☐ No ☐ If "Yes", indicate type of property, address and estimated value: \$	DATE: _	MM/DD/YY					

COMPLETE THIS SECTION!)	FOR SPECIAL PRIORITY, PLEASE READ AND
Any member of a household who is 16 years of age or ol on the social housing waiting list. Special priority status is abused by someone who is or was living with her/him wit immigrant. In order to qualify for special priority status the Please check here if we may contact you at home:	given to households who have a member who has been nin the past 3 months, or who is sponsoring her/him as an e following information and verification is required:
MANDATORY REQUIREMENTS:	VERIFICATION PROVIDED WITH APPLICATION:
1. A letter outlining the nature of the abuse and timeframes of when the abuse occurred, the timeframes in which you co-resided and your current plans of reconciliation or permanent separation.	Attached by letter
2. Proof of co-residency	Proof attached
3. Written Verification of Abuse on letterhead by a professional such as a doctor, a lawyer, a law enforcement officer, a community health-care worker, a social service worker, etc.	Attached by letter □
YOU MUST HAVE ALL 3 SECTIONS COMPLETE AND VERIFIC	ATION ATTACHED TO THIS APPLICATION TO BE CONSIDERED
FOR SPECIAL PRIORITY STATUS.	
FOR SPECIAL PRIORITY STATUS.	
FOR SPECIAL PRIORITY STATUS. 13. ADDITIONAL COMMENTS	
FOR SPECIAL PRIORITY STATUS. 13. ADDITIONAL COMMENTS	
FOR SPECIAL PRIORITY STATUS. 13. ADDITIONAL COMMENTS	
FOR SPECIAL PRIORITY STATUS. 13. ADDITIONAL COMMENTS	

UPDATE HOUSING LOCAT	IONS									
APPLICANT NAME:										
DATE OF BIRTH:MM/DE										
CO-APPLICANT NAME:										
DATE OF BIRTH:MM/DE										
ADDRESS:				_ APT. NO)					
CITY/TOWN:	POST	TAL CODE:			PHONE:	_()			
NOTE: YOU WILL BE GIVEN THREE (3) OFFERS OF HOUSING ONLY. REFUSAL OF ALL THREE OFFERS WILL RESULT IN YOUR APPLICATIONS BEING CANCELLED FROM THE WAITING LIST.										
The maximum number of bedrooms allowed boxes below, you may choose units with only with fewer bedrooms. The more choices man not choose a one bedroom if you have four oprivately-owned building. A senior is not lie	the maximude, the soor children. A	um number of ner you will like Rent Supple i	bedrooms for bedro	or your fam d. Occupa a rent ge	ily size or ncy stand ared-to-	you r ards a incon	may a apply,	ilso ch so yo	noose u sho	units uld
PROVIDER: NP = NON-PROFIT SCH = SIMCOE COUNTY		CO-OPERATIV	E HOUSING	RS	= RENT	SUPP	PLEME	ENT		
IF YOU SELECT "CO-OP" HOUSING, YOU MU		LING TO VOLU	JNTEER YOU	IR TIME AN	D/OR SE	RVICE	S.			
0	•••••	○ No.		• • • • • • • • • • • • • • • • • • • •		• • • • • • •	••••		•••••	
Some handicapped unit(s) available (some require application directly to proper	ty for unit)	build	-smoking ling		Number Place √ ir					
ALLISTON	PROVIDER	TENANT TYPE	BLDG. TYPE	# OF UNITS	BACH	1	2	3	4	ELEVATOR
109 Wellington Street	SCH	Adult	Apts.	30						
111 Nelson Street	SCH	Senior	Apts.	16						
219 King Street North (Nottawasaga Co-op)	CO-OP	Adult/Family	Apts.	53						Yes
Rent Supplement	RS	Adult/Family								Yes
ANGUS	PROVIDER	TENANT TYPE	BLDG. TYPE	# OF UNITS	BACH	1	2	3	4	ELEVATOR
257 Centre Street (Angus Legion)	NP	Senior	Apts.	45						Yes

ALLISTON	PROVIDER	TYPE	DLDG. TTPE	# UF UNITS	DAUT			ى ا	4	ELEVAIUK
109 Wellington Street	SCH	Adult	Apts.	30						
111 Nelson Street	SCH	Senior	Apts.	16						
219 King Street North (Nottawasaga Co-op)	CO-OP	Adult/Family	Apts.	53						Yes
Rent Supplement	RS	Adult/Family								Yes
ANGUS	PROVIDER	TENANT TYPE	BLDG. TYPE	# OF UNITS	BACH	1	2	3	4	ELEVATOR
257 Centre Street (Angus Legion)	NP	Senior	Apts.	45						Yes
BARRIE	PROVIDER	TENANT TYPE	BLDG. TYPE	# OF UNITS	BACH	1	2	3	4	ELEVATOR
380 Duckworth Street (Summit View) ⊗	NP	Adult/Family	Apts.	99						Yes
1 Blake Street	SCH	Senior	Apts.	91						Yes
10/20 Golfdale Road (Cundles Heights) ■ ⊗	NP	Adult/Family	Apts.	50						
101/111 D'Ambrosio Drive (Deerhurst Glen) [₺] ⊗	NP	Adult/Family	Apts.	50						
108 Anne Street North (Ad Astral)	NP	Adult/Family	Apts.	50						
108 Burton Avenue	SCH	Adult	Apts.	30						





Number of Bedrooms Place $\sqrt{}$ in open box to select

BARRIE	PROVIDER	TENANT TYPE	BLDG. TYPE	# OF UNITS	BACH	1	2	3	4	ELEVATOR
131 Berczy Street (Berczy Glen) ⊗	NP	Adult/Family	Apts.	24						
14 Worsley Street (Coral Non Profit)	NP	Adult/Family	Apts.	115						Yes
18 Sophia Street East	SCH	Adult	Apts.	30						
186 Grove Street East ⊗	NP	Adult/Family	Apts.	27						Yes
191/193 Edgehill Drive 🚨 🕸	NP	Adult/Family	Apts.	70						
205 Kozlov Street (North Barrie Heights) 🙈	NP	Family	Houses	64						
225 Kozlov Street (Northfields)	NP	Adult/Family	Apts.	53						
31 Penetang Street (Penetang Court)	NP	Adult/Family	Apts.	56						
33 Brooks Street 😵	SCH	Senior	Apts.	53						
339 Essa Road (Timbercrest) 😵	NP	Adult/Family	Apts.	50						
393 Blake Street	SCH	Family	Houses	15						
49 Coulter Street (Coulter Glen) 🚨 🕸	NP	Adult/Family	Apts.	125						Yes
54 & 58 Peel Street (We Care TH)	NP	Family	Houses	16						
549 Yonge Street (Millcreek)	NP	Family	Houses	118						
56 Peel Street (We Care Apts)	NP	Family	Apts.	14						
75 Amelia Street (St. Mary's)	NP	Senior	Apts.	60						Yes
80-100 Little Avenue (Allanview) 🚨 🕸	NP	Adult/Family	Apts.	100						
90 Edgehill Drive (Gateway Co-Op)	CO-OP	Adult/Family	Apts.	217						Yes
Alfred Street	SCH	Family	Houses	1						
Bothwell Crescent	SCH	Family	Houses	1						
Carol Road (Southfields)	NP	Adult/Family	Apts.	67						
Chaucer Crescent	SCH	Family	Houses	7						
Christie Crescent	SCH	Family	Houses	3						·
Codrington Street	SCH	Family	Houses	1						
Cook Street	SCH	Family	Houses	24						
Grove Street East	SCH	Family	Houses	13						
Heath Street	SCH	Family	Houses	22						
Lakeview Crescent	SCH	Family	Houses	1						
Melrose Avenue	SCH	Family	Houses	1						
Napier Street	SCH	Family	Houses	1						
Newton Street	SCH	Family	Houses	1						
Oakley Park Square	SCH	Family	Houses	2						
Queen Street	SCH	Family	Houses	2						
Rose Street	SCH	Family	Houses	2						
St. Vincent Street	SCH	Family	Houses	5						
Wellington Street	SCH	Family	Houses	1						
Rent Supplement	RS	Adult/Family								
BEETON	PROVIDER	TENANT TYPE	BLDG. TYPE	# OF UNITS	BACH	1	2	3	4	ELEVATOR
50 Tecumseth Street	SCH	Senior	Apts.	24						
Rent Supplement	RS	Senior	Apts.	7						





Number of Bedrooms Place $\sqrt{}$ in open box to select

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BRADFORD	PROVIDER	TENANT TYPE	BLDG. TYPE	# OF UNITS	BACH	1	2	3	4	ELEVATOR
100 Miller Park Court (2 bdrm. are market rent)	SCH	Senior	Apts.	76						
220 Holland Street (Quaker Hill)	CO-OP	Adult/Family	Apts.	46						Yes
Rent Supplement	RS	Adult/Family								
COLDWATER	PROVIDER	TENANT TYPE	BLDG. TYPE	# OF UNITS	BACH	1	2	3	4	ELEVATOR
11 Mill Street (Coldwater Seniors)	NP	Senior	Apts.	62						Yes
COLLINGWOOD	PROVIDER	TENANT TYPE	BLDG. TYPE	# OF UNITS	BACH	1	2	3	4	ELEVATOR
150 Albert Street	SCH	Adult	Apts.	16						
201 Matthew Way	SCH	Adult/Family	Apts.	16						
201 Matthew Way	SCH	Family	Houses	64						
233 St. Paul Street	SCH	Adult	Apts.	33						
25 Napier Street	SCH	Senior	Apts.	53						
250 Erie St (Collingwood Non Profit)	NP	Adult/Family	Apts.	45						Yes
Eighth Street	SCH	Family	Houses	6						
High Street	SCH	Family	Houses	10						
Murray Court	SCH	Family	Houses	6						
Second Street	SCH	Family	Houses	14						
Seventh Street	SCH	Family	Houses	6						
Walnut Street Apts	SCH	Adult	Apts.	4						
Walnut Street Twnhs	SCH	Family	Houses	4						
Rent Supplement	RS	Adult/Family								
ELMVALE	PROVIDER	TENANT TYPE	BLDG. TYPE	# OF UNITS	BACH	1	2	3	4	ELEVATOR
8 Flos Crescent	SCH	Adult	Apts.	14						
32 Yonge Street	SCH	Senior	Apts.	20						
INNISFIL	PROVIDER	TENANT TYPE	BLDG. TYPE	# OF UNITS	BACH	1	2	3	4	ELEVATOR
2049 Victoria Street	SCH	Senior	Apts.	40						
MIDLAND	PROVIDER	TENANT TYPE	BLDG. TYPE	# OF UNITS	BACH	1	2	3	4	ELEVATOR
407 Midland Avenue	SCH	Adult	Apts.	22				r		
551 Hugel Avenue (Knox Price)	NP	Senior	Apts.	20						Yes
559 King Street	SCH	Adult	Apts.	49						
615 William Street (Javelin)	CO-OP	Adult/Family	Apts.	72						Yes
661 King Street (Mountainview Co-Op)	CO-OP	Family	Houses	50						
810 Bay Street	SCH	Senior	Apts.	40						
854-860 Hartman Dr (Mt. Lakeview)	NP	Adult/Family	Apts.	106						Yes
946 Yonge Street	SCH	Senior	Apts.	22						
Beauchamp Court	SCH	Family	Houses	6						
Borden Street	SCH	Family	Houses	10						
Dominion/Seventh Street	SCH	Family	Houses	10						
Donalda Street	SCH	Family	Houses	30						
Fitton Street	SCH	Family	Houses	10						





Number of Bedrooms Place $\sqrt{}$ in open box to select

				,						
MIDLAND	PROVIDER	TENANT TYPE	BLDG. TYPE	# OF UNITS	BACH	1	2	3	4	ELEVATOR
William Street	SCH	Family	Houses	2						
Yonge Street	SCH	Family	Houses	6						
Rent Supplement	RS	Adult/Family								
ORILLIA	PROVIDER	TENANT TYPE	BLDG. TYPE	# OF UNITS	BACH	1	2	3	4	ELEVATOR
125 Fittons Road (Mariposa Place)	NP	Adult/Family	Apts.	88						Yes
18 Peter Street North (St. James Court)	NP	Adult/Family	Apts.	37						Yes
246 Oxford Street	SCH	Family	Houses	32						
250/252 Barrie Road (Fellowship Towers)	NP	Adult/Family	Apts.	106						Yes
26 Fittons Road (Elizabeth Overend Place)	NP	Adult/Family	Apts.	55						Yes
335 Peter Street	SCH	Adult	Apts.	16						
397 Regent Street	SCH	Adult	Apts.	11						
401 Regent Street	SCH	Senior	Apts.	70						:
472 High Street (Fellowship Villa)	NP	Family	Apts.	24						•
5 Rosemary Road (Fellowship Heights)	NP	Family	Apts.	52						Yes
70/80 Fittons Road West (Legioncrest Seniors)	NP	Senior	Apts.	114						Yes
75/80 Walker Ave (Walker Village)	NP	Family	Houses	76						
Hilda/Forest Street	SCH	Family	Houses	3						
Simcoe/High Street	SCH	Family	Houses	14						
Rent Supplement	RS	Adult/Family								:
PENETANGUISHENE	PROVIDER	TENANT TYPE	BLDG. TYPE	# OF UNITS	BACH	1	2	3	4	ELEVATOR
26 Gignac Drive	SCH	Adult	Apts.	15						
46 Maria Street	SCH	Senior	Apts.	40						
69 Harriet Street	SCH	Adult	Apts.	20						
Chatham Street	SCH	Family	Houses	2						
Gignac Drive	SCH	Family	Houses	22						
John Street	SCH	Family	Houses	4						
Sheridan Street	SCH	Family	Houses	4						
STAYNER	PROVIDER	TENANT TYPE	BLDG. TYPE	# OF UNITS	BACH	1	2	3	4	ELEVATOR
239 Brock Street	SCH	Adult	Apts.	15						
WASAGA BEACH	PROVIDER	TENANT TYPE	BLDG. TYPE	# OF UNITS	BACH	1	2	3	4	ELEVATOR
30 Seventh Lane	SCH	Adult	Apts.	41						

Consent, Release and Declaration



RELEASE

Please read this release and consent section carefully, and sign in the spaces below. All people 16 years of age and older who are not full-time students and who are going to live with you must sign this.

- 1. I understand that the Simcoe County Housing Corporation, the County of Simcoe and the housing providers to whom I will be applying are authorized to collect personal information on this form in accordance with sections 65 or 71 of the Housing Services Act, 2011 S.O. 2011, c.6 and that the information will be used to determine eligibility for rent-geared-to income and/or Special Needs Housing. Any questions about the collection of my personal information should be directed to the Supervisor, Tenant and Applicant Services, County of Simcoe, Social and Community Services Division 1110 Highway 26, Midhurst, Ontario, LOL 1XO, or call (705) 725-7215.
- 2. I understand and agree that the County of Simcoe will use the information I give them for the following specific purposes:
 - to find out if I qualify for the housing I have applied for
 - to find out if I continue to qualify for rent-geared-to-income assistance and/or special needs housing
 - to find out how much assistance I am eligible for
 - for statistical reporting and policy research
- 3. I consent to the release of any information to the County of Simcoe about any bank account, safety deposit box, assets of any nature or kind held by me, or on my behalf, or by or on behalf of any of my dependants or children temporarily in my care, alone or jointly with any other person in any financial institution.
- 4. For the purpose of eligibility assessment I allow the County of Simcoe and the housing providers to whom I will be applying to obtain any credit information about me from any credit agency or any other source.
- 5. I allow the County of Simcoe and the housing providers to whom I will be applying to share my personal information, without further notice to me, with the Ministry of Municipal Affairs and Housing, the Housing Services Corporation, other municipal service managers or district social services administration boards or lead agencies as defined under the Housing Services Act (HSA) and each person or organization providing services by contract to any of them, if it is needed to make decisions or verify my eligibility for assistance under the HSA, the Ontario Works Act, 1997, the Ontario Disability Support Program Act, 1997 or the Day Nurseries Act.
- 6. I consent to the County of Simcoe giving my personal information to the government of enforcing the Income Tax Act (Canada) or the Immigration act.
- 7. I understand that any of my personal information given by the County of Simcoe to a government or body mentioned above in paragraph 5 and 6 will only be given in accordance with the Housing Services Act and its regulations.
- 8. I understand and agree that the County of Simcoe may cross-reference my personal information related to this housing application with other municipal data pertaining to my household.
- 9. I understand that any inquiries with respect to my personal information may take the form of electronic data exchanges.

DECLARATION

- 1. I understand that all information I give to The County of Simcoe will belong to them and that they will give my information to the housing providers I will apply to.
- 2. I understand that only the people I have listed on this application form may live with me in subsidized housing.
- 3. I understand that The County of Simcoe and/or the housing provider I will apply to will use my personal information to determine if I am eligible or continue to be eligible for RGI assistance and/or Special Needs housing; the size and type of unit I may be eligible to receive; my placement on waiting lists; and the amount of geared-to-income-rent payable by me.
- 4. I declare that I am in Canada legally.
- 5. I understand that I must pay back or arrange to pay any money I may owe to any subsidized housing provider before I can be offered a subsidized unit.
- 6. I understand that it is an offence, under the Housing Services Act, for an applicant or any individual to knowingly obtain or assist a household member to obtain rent-geared-to-income assistance for which they are not entitled. Such an offence carries up to a \$5,000 fine or to up to 6 months imprisonment as well as a prohibition from re-applying for assistance for a minimum period of two years. If something on this application is missing, incorrect or false, The County of Simcoe or the housing providers I have applied to may request additional information or may cancel my application.
- 7. I understand that if The County of Simcoe and/or the Housing Providers representing the County of Simcoe request a household to reimburse The County of Simcoe, the members of the household who are parties to the lease or the occupancy agreement for the unit are jointly and severally liable to pay the amount owing to The County of Simcoe

All people on this application who are 16 years of age and older who are not full-time students must sign below to indicate they have read and accept all the terms and conditions of Release and consent section

Please do not submit this form to the County of Simcoe without all required signatures.

HOUSEHOLD MEMBER:	SIGNATURE:	DATE SIGNED:	MM/DD/YY
HOUSEHOLD MEMBER:	SIGNATURE:	DATE SIGNED:	MM/DD/YY
HOUSEHOLD MEMBER:	SIGNATURE:	DATE SIGNED:	MM/DD/YY
HOUSEHOLD MEMBER:	SIGNATURE:	DATE SIGNED:	MM/DD/YY
HOUSEHOLD MEMBER:	SIGNATURE:	DATE SIGNED:	MM/DD/YY
HOUSEHOLD MEMBER:	SIGNATURE:	DATE SIGNED:	MM/DD/YY

If you have any question or complaints about the collection, use or disclosure of your personal information, please contact:

County of Simcoe Social Housing Department 1110 Highway 26, Midhurst, Ontario LOL 1X0 (705) 725-7215