



**Have you received any other Government Assistance for your home?** (e.g. Residential Rehabilitative

Assistance Program)  YES (specify)  No

(Attach additional sheets if required)

\_\_\_\_\_  
(Specify)

\_\_\_\_\_  
(Date MM/DD/YY)

\_\_\_\_\_  
(Specify)

\_\_\_\_\_  
(Date MM/DD/YY)

\_\_\_\_\_  
(Specify)

\_\_\_\_\_  
(Date MM/DD/YY)

\_\_\_\_\_  
(Specify)

\_\_\_\_\_  
(Date MM/DD/YY)

**Urgent Repairs to dwelling:**

Briefly describe repairs and/or modifications required (Attach additional sheets, if required):

---

---

---

---

---

**Repairs to improve Accessibility to dwelling for persons with disabilities:**

Briefly describe repairs and/or modifications required (Attach additional sheets, if required):

---

---

---

---

---

**Repairs to address Safety-Related Features that support seniors' ability to age-in-place:**

Briefly describe repairs and/or modifications required (Attach additional sheets if required):

---

---

---

---

---

**Loan Forgiveness:**

Forgiveness of the grant/loan **will be earned** by the homeowner at a rate of 10% per year for 10 years.

To earn forgiveness, applicants must maintain continued ownership and occupancy of the dwelling and adhere to all other terms and conditions of the program. If the homeowner sells or vacates the home, they are responsible for paying back any outstanding loan amount. Alternatively, an eligible new buyer may choose to take on the conditions of the loan in order for the home to remain affordable.

**PLEASE NOTE: Additional information may be requested, in order to confirm eligibility for assistance.**

**Declaration:**

I declare that all information given in this application is correct and is complete to the best of my knowledge. The application and supporting documents become the property of the delivery agent and the District of Timiskaming Social Services Administration Board (DTSSAB). Personal Information contained on this form or in attachments is collected by MANTECH SERVICES and/or the DTSSAB Social Housing Program pursuant to the *Municipal Freedom of Information and Protection of Privacy Act*, (R.S.O. 1990, c.M.56). This information will be used to determine eligibility for the Homeowner Repair Program. Personal Information will be disclosed to the DTSSAB, the Ministry of Municipal Affairs and Housing, and other municipal/provincial and federal departments and agencies that assist in the provision of affordable housing and to social agencies providing financial assistance to the applicant. Information provided by the household may be shared for the purposes of making decisions, verifying eligibility for assistance or reporting under all components of the Canada – Ontario Affordable Housing Program. The applicant consents to the verification, disclosure, and transfer of information given on this form and attachments by or to any of the above entities and will provide any required supporting material.

Pursuant to the *Municipal Freedom of Information and Protection of Privacy Act*, I give my consent and authorization to MANTECH SERVICES and/or the DTSSAB Social Housing Program to:

- (1) make inquiries to verify the information given in this application and I authorize any person, corporation, or any social agency having knowledge of required information to release such information to MANTECH SERVICES and/or the DTSSAB Social Housing Program. I agree to provide any supporting material required for my application.
- (2) disclose the information given on this form to the DTSSAB, the Ministry of Municipal Affairs and Housing and other municipal, provincial, and federal departments and agencies that assist in the provision of affordable housing and social services providing financial assistance to me and persons on this application. I understand that it is my responsibility to inform MANTECH SERVICES and/or the DTSSAB of any changes in information within fifteen (15) days of the change. (i.e., change of address, telephone number, family composition, type or amount of income). I agree to provide any supporting material or documents as required by MANTECH SERVICES, its administrators and/or the DTSSAB, the Ministry of Municipal Affairs and Housing and other municipal, provincial, and federal departments and agencies.

\_\_\_\_\_  
Property Owner's Signature

\_\_\_\_\_  
Date(MM/DD/YY)

\_\_\_\_\_  
Spouse/Partner's Signature

\_\_\_\_\_  
Date(MM/DD/YY)

**(1) To be eligible to receive assistance under the HRC program:**

- (a) the market value of your home must be at or below the average market selling price, as determined by CMHC annually;
- (b) qualifying homeowners must reside within the District of Timiskaming;
- (c) projects eligible for HRC assistance must be the sole and principal residence of the applicant(s);
- (d) only properties that have been constructed and occupied for a minimum of five years are eligible;
- (e) applicants and/or properties in receipt of other government assistance subsidies (such as Residential Rehabilitation Assistance Program) **do not** qualify under the HRC Program.

- (f) to qualify for assistance under the HRC Program, households must be substandard or deficient, and require repair that brings them up to a reasonable standard. Eligible services for homeowners may be in one or more of the following categories:
- (i) Structural;
  - (ii) Electrical;
  - (iii) Plumbing;
  - (iv) Heating;
  - (v) Fire safety;
  - (vi) Septic systems and well water;
  - (vii) Improved accessibility for persons with disabilities; and/or
  - (viii) Safety-related features that support seniors' ability to age-in-place.

**(2) The Verification Process includes income verification and documentation:**

You must provide verification of your *Total Gross Household Income* from all sources received.

**Included Income**

- (a) Gross salaries, wages, commissions, bonuses, tips and gratuities including any seasonal employment (submit Cheque Stubs, Tax Return);
- (b) The Gross Annual Income from any form of self-employment including an owned business less itemized deductions, as allowed by Canada Revenue Agency, plus any capital cost allowance used as deduction;
- (c) The gross amount of Employment Insurance Benefits;
- (d) The gross amount of any Social Assistance Benefits;
- (e) The gross amount of Worker's Compensation Payments or other industrial accident insurance payments made because of illness or disability;
- (f) The gross amount of any Disability Support or Pension Benefits;
- (g) The gross amount of any Old Age Security, Federal Guaranteed Income Supplement, and Spouse's Allowance, and financial assistance under the Ontario Guaranteed Annual Income System (GAINS);
- (h) The gross amount of every kind of pension, benefit and annuity whether from a federal, provincial or municipal government of Canada or any level of government of any other country or state or from any other source;
- (i) The gross amount of alimony, separation, maintenance or support payments;
- (j) The gross amount of gains from investments including dividends, stocks, shares, and other securities and, where the actual income cannot be determined, an imputed rate of return set by the latest Canada Savings Bonds rate is to be used;
- (k) The gross interest income from savings or chequing accounts in a bank, trust company or union;
- (l) The gross amount of any rental income (i.e. net room and board from boarders); and/or
- (m) 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.

- (3) The Verification Process requires the following documentation:**
- (a) You must confirm that there are no outstanding property tax arrears on the property by providing a copy of your Municipal Tax Bill and receipt of payment;
  - (b) You must provide confirmation of insurance coverage for the full replacement value of the building;
  - (c) You must confirm that there are no outstanding municipal water arrears on the property by providing a copy of your current Municipal Water Bill and receipt of payment;
  - (d) If applicable, your lending institution or other such creditor must provide confirmation from that there are no outstanding mortgage arrears on the property;
  - (e) To be eligible you cannot have any outstanding Social Housing arrears;
  - (f) You must provide confirmation that the household structure is modest in size by providing the actual square footage;
- (4) The maximum requested for a loan/grant must not exceed \$16,000, or as determined by the DTSSAB;**
- (5) Upon receipt of written authorization to proceed from ManTech Services, a Title Search must be conducted to ensure that the subject property is your sole and principal residence. The cost of this search will be deducted from the loan/grant amount, only if your Application is approved;**
- (6) Upon receipt of written authorization to proceed from the DTSSAB, a Mortgage must be registered on Title. The cost of the Registration will be deducted from the loan/grant amount, only if your application is approved;**

*Please use the following checklist to ensure all information and documentation is provided to our office for review, in order to avoid any delay in acknowledging your Questionnaire:*

- Current verification of income attached for all household members 16 years of age or older (example: 2005 Income Tax Return, ODSP Statement, letter from employer, etc.).
- ONLY IF SELF-EMPLOYED, provide last 3 consecutive years of your *Income Tax Returns*, including all business activities (if applicable).
- Child Tax Benefits (if applicable).
- Current Property Assessment confirming value of house.
- Current Property Tax Bill and receipt of payment.
- Letter from doctor explaining disability and modifications required to home, if applicable.
- Current municipal water bill and receipt of payment
- Confirmation of insurance coverage
- Outstanding mortgage arrears on property (attach information)