

District of Timiskaming Social Services Administration Board (DTSSAB)
Application for Rent-Geared-to-Income, Affordable, Market Housing
Co-Ordinated Access for Social Housing

c/o DTSSAB Housing Services
290 Armstrong Street, New Liskeard ON P0J 1P0
Phone: 1-888-544-5555 Fax: 1-705-647-5267

To apply for Rent-Geared-To-Income Housing, you must be:

- Sixteen years of age or older (**attach copies of birth certificates for all household members or the Application is incomplete**)
- Able to live on your own, independently (example: do your own cooking, cleaning, laundry, bathing) with or without supports
- 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 (attach a copy of the Permanent resident card, Canadian Citizen card, landed Immigrant papers etc. or the Application is incomplete).
- You must NOT owe arrears to any social housing provider or have been found by the Landlord & tenant Board or a court of law to have misrepresented income in relation to the receipt of rent-geared-to-income assistance
- Willing to put any house you own up for sale and sell it within six months of the date of offer to lease

Instructions for filling out this Application:

- Print all information in ink
- Answer every question and complete all sections of the attached Application form. Mark a line through the space or mark it "n/a" (not applicable) in sections that do not apply to you.
- Have all household members sign if they are 16 years of age or older and have them declare their income and/or provide verification that they are attending high school or post-secondary education (for example: most recent report card or letter from the school, attendance record)
- **Unsigned and/or incomplete Applications will be returned to you**

You must report any changes in documents or information that you have provided
for this Application.

Report changes to Housing Services within 10 days of the change.

Examples include items such as: number of family members, income, address, phone number.

If you need help completing this Application, contact the Housing staff at:

DTSSAB's Housing Services
290 Armstrong Street, New Liskeard ON P0J 1P0
Phone: 1-888-544-5555 x2229

Rent-Geared-to-Income

In order to determine eligibility for subsidized rent-geared-to-income housing, all sections of the Application must be completed. When the completed Application is reviewed, you will receive written notice of your eligibility and what category your household is listed in. Verification of all sources of income will be required prior to an offer of accommodation being made.

Effective June 1, 2014, smoking is prohibited inside all buildings; including: private balconies and patios for all new tenants moving in after June 1, 2014 and within a distance of five (5) meters from: any windows, entrances or exits to any buildings owned by the DTSSAB. Tenants who have signed a lease agreement before June 1, 2014, will be exempt.

As a condition of being offered accommodation by DTSSAB's Housing Services you will be required to provide proof of liability insurance coverage (minimum \$1,000,000 liability) by way of a current insurance certificate to the Landlord on an annual basis.

APPLICANT

Last Name: _____ First Name: _____

Date of Birth: ____/____/____ Male Female Other SIN: ____/____/____
YYYY MM DD

Phone: (____) ____ - _____ Work Home Cell Alternate Contact

Phone: (____) ____ - _____ Work Home Cell Alternate Contact

Street Address: _____ Apt. No: _____

PO Box: _____ Town/City: _____ Postal Code: _____

Email: _____

Alternate Contact Name: _____

Relationship to Applicant: _____ Phone: _____

CO-APPLICANT

Last Name: _____ First Name: _____

Date of Birth: ____/____/____ Male Female Other SIN: ____/____/____
YYYY MM DD

Phone: (____) ____ - _____ Work Home Cell Alternate Contact

Phone: (____) ____ - _____ Work Home Cell Alternate Contact

Street Address: _____ Apt. No: _____

PO Box: _____ Town/City: _____ Postal Code: _____

Email: _____ Relationship to Applicant: _____

OTHER PERSON(S) HOUSEHOLD MEMBERS TO RESIDE IN ACCOMMODATIONS

Last Name	First Name	Date of Birth yyyy/mm/dd	Custody	Relationship to Applicant	Student/ Working	Gender M/F OTHER
Attach copy of Birth Certificate			Sole Shared Joint		S W	M F O
Attach copy of Birth Certificate			Sole Shared Joint		S W	M F O
Attach copy of Birth Certificate			Sole Shared Joint		S W	M F O
Attach copy of Birth Certificate			Sole Shared Joint		S W	M F O

Verification of Registration at School or Income will be required for children over 16 years of age.

Is a baby expected? No Yes, if Yes what is the due date (yyyy/mm/dd)? _____
 (attach a copy of doctor's note)

To be eligible for a bedroom for your child (or children), the child must stay overnight with the applicant at least four (4) nights per month. (attach a copy of court issued documentation or a legally authorized custodial agreement)

Note: The term **custody** refers to how parents make decisions for their children. **Joint Custody** means that the major decisions are made by the parents together. **Sole custody** means that one parent makes the major decisions. The term used to describe an equal time **sharing** of the children is "**Shared Custody**".

GENERAL INFORMATION SECTION

1. Does each member of the household meet at least one of the following criteria?
- Is a Canadian Citizen? Yes No
 - Has made an application for status as a permanent resident under the *Immigration and Refugee Act (Canada)*? Yes No
 - Has made a claim for refugee protection under the *Immigration and Refugee Protection ACT (Canada)*? Yes No
2. Has a removal order become enforceable under the *Immigration and Refugee Protection ACT (Canada)*? Yes No
3. Is at least one member of the household 16 years old or older and able to live independently? Yes No
4. Does any member of the household owe arrears for rent or damages as a result of previous tenancy with a Social Housing Provider for rent-geared-to-income assistance? Yes No
5. Has any member of the household ever been convicted of an offence in relation to the receipt of rent-geared-to-income assistance? Yes No
6. Has any member of the household been found by the Ontario Landlord & Tenant Board or a court of law to have misrepresented income in relation to the receipt of rent-geared-to-income assistance? Yes No
7. Does any member of the household have special needs due to a medical condition or disability? Yes No
 If Yes, please provide details:

8. Are you able to manage stairs? Yes No
 Do you require a ground level unit or elevator availability? Yes No
 If Yes, please provide details (i.e. uses walker):

9. Do you require parking? Yes No
10. Do you need a modified/wheelchair accessible unit? Yes No
11. Do you own a home? Yes No
12. Current Landlord: _____ Phone: _____
13. Previous Landlord: _____ Phone: _____
14. Have you previously resided in subsidized accommodation in Ontario? Yes No
 Name and Address _____
 of Accommodation _____
 Reason for Leaving: _____

 Date of Move In (yyyy/mm/dd): _____ Date of Move Out (yyyy/mm/dd): _____

COMMENTS:

Please indicate if you are interested in:

- | | | |
|--|-----|----|
| a) Rent-Geared-To-Income (Subsidized Rent) | Yes | No |
| b) Market-Rent (Non-Subsidized Rent) | Yes | No |
| c) Affordable Housing | Yes | No |

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 District of Timiskaming Social Services Administration Board (DTSSAB). Copies of, and information relating 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-geared-to-income assistance, determining size and unit type in respect to of which the household is eligible to receive rent-geared-to-income assistance, and determining the amount of rent-geared-to-income payable by the household.

If the information on this Application is incorrect or not true, the District of Timiskaming Social Services Administration Board or the housing providers that I/we have applied to may request additional information, may cancel my Application or both; and I/we may be prohibited from re-applying for assistance for a minimum of two (2) years under the *Housing Services Act, 2011*.

I/We understand that an offer of accommodation will be contingent upon confirmation of eligibility.

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

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

Personal information contained on this form or in attachments is collected by the District of Timiskaming Social Services Administration Board to provide me/us with rental accommodation.

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 District of Timiskaming Social Services Administration Board:

- To make inquiries, to verify the information given on this Application, including a landlord and/or credit check and I/we authorize the Minister, the DTSSAB, 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 the possession and was collected under the *Housing Services Act, 2011*, the *Ontario Works Act, 1997*, the *Ontario Disability Support Program Act, 1997*, the information that is necessary for the purpose 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 District of Timiskaming Social Services Administration Board’s Housing Services has made an agreement under the *Housing Services Act, 2011*, without further notice to me/us, for the purpose of conducting research related to a social benefit program, social housing/housing services or rent-geared-to-income assistance.

For more information on the Consent Release & Declaration, please contact our Privacy Officer, Mark Stewart at 705-567-9366 x3229 or by email stewartm@dtssab.com

NOTE: unsigned and/or Incomplete Applications will be returned to the Applicant

This Application MUST be signed by all persons 16 years of age or over

REMEMBER TO ATTACH COPIES OF BIRTH CERTIFICATES FOR ALL HOUSEHOLD MEMBERS OR THE APPLICATION WILL BE CONSIDERED INCOMPLETE

_____	_____	_____
Applicant	Signature	Date (yyyy/mm/dd)
_____	_____	_____
Applicant	Signature	Date (yyyy/mm/dd)
_____	_____	_____
Applicant	Signature	Date (yyyy/mm/dd)
_____	_____	_____
Applicant	Signature	Date (yyyy/mm/dd)

SOURCES OF INCOME & ASSETS

For the purpose of assessing eligibility for Rent-Geared-to-income Assistance, income means: all net income (after deductions), benefits and gains of every kind and every source including, but not limited to the following. Any sources of income not listed below are to be included under “Other”.

Source of Income	Applicant's Net Monthly Income	Co-Applicant's Net Monthly Income	Other Members' Net Monthly Income
Employment (all sources)	\$ per month	\$ per month	\$ per month
Self-Employment	\$ per month	\$ per month	\$ per month
Employment Insurance (EI)	\$ per month	\$ per month	\$ per month
Workers' Compensation (WSIB)	\$ per month	\$ per month	\$ per month
Ontario Works (OW)	\$ per month	\$ per month	\$ per month
Ontario Disability Support Program (ODSP)	\$ per month	\$ per month	\$ per month
Old Age Security (OAS)	\$ per month	\$ per month	\$ per month
Federal Guaranteed Income Supplement (GIS)	\$ per month	\$ per month	\$ per month
Canada Pension Plan (CPP)	\$ per month	\$ per month	\$ per month
Private Pension/Allowance (Other)	\$ per month	\$ per month	\$ per month
Separation/Alimony/Support	\$ per month	\$ per month	\$ per month
Other Income (specify)	\$ per month	\$ per month	\$ per month

Income Producing Assets	Applicant	Co-Applicant	Other Members
Real Estate/Property	\$ per month	\$ per month	\$ per month
Bank Savings Account	\$ per month	\$ per month	\$ per month
GICS, Stocks, Shares, Bonds	\$ per month	\$ per month	\$ per month
Debentures, Mortgages, Loans, etc.	\$ per month	\$ per month	\$ per month
Licenses (i.e. Taxi) Business Interest	\$ per month	\$ per month	\$ per month
Other	\$ per month	\$ per month	\$ per month

Non-Income Producing Assets	Applicant	Co-Applicant	Other Members
RRSP's	\$ per month	\$ per month	\$ per month
Real Estate/Property	\$ per month	\$ per month	\$ per month
Collections or Investment in Valuable Assets	\$ per month	\$ per month	\$ per month
Disposal of Assets within the past 36 months	\$ per month	\$ per month	\$ per month
Other	\$ per month	\$ per month	\$ per month


If there is a change in a document or information that the household has provided with respect to the application for Rent-Geared-to-Income Assistance, the household shall provide the updated document and information to the DTSSAB's Housing Services within 10 calendar days after the change.

Failure to do so can result in the applicant's name being removed from the waiting list.

This application must be used to apply for housing in any of the following Housing communities in the District of Timiskaming. There are a limited number of accessible units within the District.

Check off areas of preferences.



LOCATIONS FOR APARTMENTS

Location	Address	Utilities	Type	Building Type	Bachelor	1/2 Bed 	1 Bed	2 Bed
Cobalt	24 Prospect Ave	Included	Adult & Senior	Apartment				
Cobalt	26 Ferland Ave	Included	Adult & Senior	Apartment				
Cobalt	29 Miller Ave	Included	Adult & Senior	Apartment				
North Cobalt	390 Lakeview Ave	Included	Adult & Senior	Apartment				
Haileybury	135 Bruce St	Included	Seniors Only	Apartment				
Haileybury	370 Broadway St	Included	Adult & Senior	Apartment				
Haileybury	480 Broadway St	Included	Adult & Senior	Apartment				
New Liskeard	100 Market St	Included	Adult & Senior	Apartment				
New Liskeard	154 Market St	Included	Adult & Senior	Apartment				
New Liskeard	255 Grant Dr	Hydro	Adult & Senior	Apartment				
Elk Lake	37 Lake St	Included	Adult & Senior	Apartment				
Earlton	37 Tenth St	Included	Adult & Senior	Apartment				
Earlton	37A Tenth St	Included	Adult & Senior	Apartment				
Earlton	41 Tenth St	Included	Adult & Senior	Apartment				
Englehart	30 Ninth Ave	Included	Adult & Senior	Apartment				
Englehart	45 Tenth Ave	Included	Adult & Senior	Apartment				
Englehart	69 Sixth Ave	Included	Adult & Senior	Apartment				
Englehart	108 Fifth Ave	Included	Adult & Senior	Apartment				
Kirkland Lake	25 Tweedsmuir Rd	Included	Adult & Senior	Apartment				
Kirkland Lake	25A Tweedsmuir Rd	Included	Adult & Senior	Apartment				
Kirkland Lake	42 Churchill Dr	Included	Adult & Senior	Apartment				
Kirkland Lake	60 Fifth St	Hydro	Seniors Only	Apartment				
Larder Lake	99 Thompson Blvd	Included	Adult & Senior	Apartment				

LOCATIONS FOR FAMILY UNITS

Location	Address	Utilities	Type	Building Type	2 Bed	3 Bed	4 Bed	5 Bed
New Liskeard	569 Taylor Ave	Hydro/Gas	Family	House				
New Liskeard	569 Bolger Ave	Hydro/Gas	Family	House				
New Liskeard	570 Bolger Ave	Hydro/Gas	Family	House				
New Liskeard	562 Broadwood Ave	Hydro/Gas	Family	House				
Earlton	Tenth St	Hydro/Gas	Family	Townhouse				
Kirkland Lake	25 Tweedsmuir Rd	Hydro	Family	Townhouse				
Kirkland Lake	Scattered	Hydro/Gas	Family	Townhouse				
Kirkland Lake	Pollock Ave	Hydro/Gas	Family	Townhouse				

LOCATIONS FOR ACCESSIBLE FAMILY UNITS

Location	Address	Utilities	Type	Building Type	2 Bed 	3 Bed 
New Liskeard	569 Taylor Ave.	Hydro/Gas	Family	House		
Kirkland Lake	Pollock Ave.	Hydro/Gas	Family	House		

NON-PROFIT HOUSING

Location	Address	Utilities	Type	Building Type	1 Bed	2 Bed
Haileybury	135 Bruce ST	Included	Seniors Only	Apartment		
New Liskeard	105 Market ST	Included	Seniors Only	Apartment		

**Rural & Native Scattered Family Units (CTPNNPH)
(Contact Provider for further details on these units)**

Northern Timiskaming: Kirkland Lake, King Kirkland, Dobie, Harvey Kirkland, Kearns
Virginia Town, Larder Lake, Swastika
Central Timiskaming: Matachewan, Charlton, Elk Lake, Englehart, Earleton, Thornloe, Kenebeek
Southern Timiskaming: New Liskeard, Haileybury, Cobalt, Latchford

CTNH: Cochrane-Temiskaming Native Housing
PO Box 2635
Cochrane ON P0L 1C0
Phone: 705-272-5718 Fax: 705-272-6097
Email: ctnh@puc.net

For further information on the Waiting List and Housing Providers please refer to the Application Guide or contact:

DTSSAB: District of Timiskaming Social Services Administration Board
Attention: Housing Services Program
PO Box 6006, 290 Armstrong Street
New Liskeard ON P0J 1P0
Phone: 705-647-7447 x2229 800-627-2944 x2229
Fax: 705-647-5267

Kirkland Lake ON
Phone: 705-567-9366 x3243 888-544-5555 x3243
Fax: 705-567-1942
Email: housing.application@dtssab.com

NLNP: New Liskeard Non-Profit Housing Corporation
PO Box 1564, 105 Market Street
New Liskeard ON P0J 1P0
Phone: 705-647-3076 Fax: 705-647-6456
Email: nlnp@ntl.sympatico.ca

RCL: Zone K-1 Veterans' Home Corporation
135 Bruce Drive
Haileybury ON P0J 1K0
Phone: 705-672-2557 Fax: 705-672-2558
Email: vets@ntl.sympatico.ca

Confirmation of Application

Application Received From (Primary Applicant): _____

Application Received By: _____

Date Received (yyyy/mm/dd): _____ Time Received: _____

This copy will serve to acknowledge receipt of your application by the Central Waiting List, and to acknowledge that your application is: Complete Incomplete

If "Incomplete" is checked, please fill in the highlighted areas on the application and/or the missing information, as requested. If "Complete" is checked, retain this for your records. If you have any questions, please contact the Housing Provider nearest you.

Within 10 days of receiving your application the DTSSAB will send you a letter of confirmation. If you do not receive this in due time or have any further questions, please contact:

Housing Services at **705-647-7447 x2229** or **800-627-2944 x2229**.

Definition of Income

“Income” means all income, benefits and gains, of every kind and from every source including, 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 as personal salary or other benefits of anyone who is self-employed in a business;
- (d) the gross amount of employment insurance 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 old age security, federal guaranteed income supplement and spouse’s allowance and financial assistance under the Ontario Guaranteed Annual Income System (GAINS);
- (g) the gross amount of every kind of pension, allowance, benefit and annuity from a federal, provincial or municipal agency;
- (h) 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 interest on dividends, stocks, shares and other securities, and where the actual income cannot be determined, an imputed rate of return set by the Ministry of Municipal Affairs and Housing from time to time;
- (k) the gross interest income from savings or chequing accounts in the bank, trust company or a credit union;
- (l) 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;
- (m) an imputed income 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.

Examples of Possible Sources of Income

Employment

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

Self-Employment

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

Income Producing Assets

- Real Estate (residential, commercial, farmland, cottage, mobile home) which produces rental income
- Savings Accounts (bank, trust company, credit union), annuities, Guaranteed Investment Certificates, stocks or shares, bonds, debentures, loans, notes, term deposits
- Farm Property which produces Income
- License which produces income (e.g. Taxi License)
- 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 cottages, farmland, commercial or vacant land)
- Collection of, or investments in, other valuable non-income producing assets
- Business interest which does not produce income