



## AFFORDABLE HOUSING APPLICATION FORM

Enclosed please find an application for you to complete and return along with your income verification as noted below. Applications received at our office are considered on a first come, first serve basis and will be maintained on a waiting list for upcoming vacancies.

Every community has different options in regards to bedsize, community location, accessibility features. Please visit our website [www.ptbohousingcorp.ca](http://www.ptbohousingcorp.ca), for information related to:

- Monthly rent, if utilities are included, additional charges for parking, etc
- Maximum household income thresholds
- Community specific information

### \*\*\*\*\*DOCUMENTS THAT MUST BE SUBMITTED\*\*\*\*\*

1. A completed application form, signed by all household members over the age of 18
2. Information relating to your household's income, to verify eligibility
  - Provide copies of monthly cheques or cheque stubs. If cheques are direct deposit, provide a copy of bank books or bank statements.
  - Each employed applicant must provide a copy of their most recent pay statement showing year to date earnings.
  - Each applicant in receipt of Social Assistance must provide a copy of their Ontario Works (OW) or Ontario Disability Support Program (ODSP) benefits stub and a copy of their drug or dental card.
  - Each self-employed applicant must provide confirmation of current income as required the Peterborough Housing Corporation.
  - All other forms of income must be supported by documents for verification purposes. Each applicant with income-producing or non-income producing assets must provide verification.
  - Each applicant must provide Peterborough Housing Corporation with verification of their most recent income tax return, this can be done in one of three ways:
    - A copy of the income tax return prepared by the applicant or an agent for the applicant.
    - A copy of the Notice of Assessment from Revenue Canada.
    - An income tax assessment provided to the applicant from Revenue Canada.

**If the following are not submitted, your application will be considered incomplete and may not be considered.**

Property owners will be required to dispose of property within a 6 month period and must sign an agreement to acknowledge this requirement. Following the submission of your application the process of consideration is:

1. Review of your income to ensure it meets the income thresholds
2. Rental Credit History reviewed
3. Office interview with Peterborough Housing Corporation staff members
4. Decision made if application is approved for an offer or denied

Please note your application will be considered for any upcoming vacancies. Please ensure that you advise us of any changes to your contact information as required.

If at any point in the process your application is deemed to be ineligible or denied, you will be made aware in writing of this decision.



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Received Date:

I am applying for the following properties:

|   |  |   |                              |                              |                              |                              |   |
|---|--|---|------------------------------|------------------------------|------------------------------|------------------------------|---|
| <b>Bedsize</b>  |  | <input type="checkbox"/> 1BD            | <input type="checkbox"/> 2BD | <input type="checkbox"/> 3BD | <input type="checkbox"/> 4BD | <input type="checkbox"/> 5BD | <input type="checkbox"/> 1BD Accessible |
|   |  | <input type="checkbox"/> 2BD Accessible |                              |                              |                              |                              |   |
| <i>verification of accessibility needs will be required</i>   |  |   |                              |                              |                              |                              |   |
| <b>Location:</b>  |  |   |                              |                              |                              |                              |   |
| <input type="checkbox"/> <b>Anson House</b> – 136 Anson Street, Peterborough  |  |   |                              |                              |                              |                              |   |
| <input type="checkbox"/> <b>Edinburgh Street</b> – 220 Edinburgh Street, Peterborough                                   |  |   |                              |                              |                              |                              |   |
| <input type="checkbox"/> <b>River Ridge</b> – 900 Dutton Road, Peterborough   |  |   |                              |                              |                              |                              |   |
| <input type="checkbox"/> <b>Saunders Court</b> – 130 Anson Street, Peterborough   |  |   |                              |                              |                              |                              |   |
| <input type="checkbox"/> <b>Woollen Mill</b> – 526 McDonnell Street, Peterborough                                       |  |   |                              |                              |                              |                              |   |
| <b>Buildings Designated as Non-Smoking:</b>   |  |   |                              |                              |                              |                              |   |
| <input type="checkbox"/> <b>553 Bonaccord Street</b> – Peterborough   |  |   |                              |                              |                              |                              |   |
| <input type="checkbox"/> <b>Bradburn House</b> – 293 London Street, Peterborough  |  |   |                              |                              |                              |                              |   |
| <input type="checkbox"/> <b>Trailview Terrace</b> – Rabbit Street, Lakefield – <i>Seniors - must be 60 yrs or older</i> |  |   |                              |                              |                              |                              |   |
| <input type="checkbox"/> <b>Gerow Building</b> – 17 Smith Street, Havelock – <i>Seniors - must be 60 yrs or older</i>   |  |   |                              |                              |                              |                              |   |

| Applicant #1 Information  |                                   |   |   |
|---|-----------------------------------|---|---|
| <input type="checkbox"/> MR <input type="checkbox"/> MRS<br><input type="checkbox"/> MS | <b>First &amp; Middle Name</b>    |   | <b>Last Name</b>                          |
| <input type="checkbox"/> Male<br><input type="checkbox"/> Female                        | <b>Date of Birth (MM/DD/YYYY)</b> |   | <b>Social Insurance Number (optional)</b> |
| <b>Street #</b>   | <b>Street Name</b>                |   | <b>Apt #</b>                              |
| <b>City</b>   |                                   | <b>Province</b>   | <b>Postal Code</b>                        |
| Do you <input type="checkbox"/> Own your home <input type="checkbox"/> Rent your home   |                                   |   |   |
| <b>Home Phone #</b>   |                                   | Can we call you at home? <input type="checkbox"/> Yes <input type="checkbox"/> No |   |
| <b>Cell Phone #</b>   |                                   | Can we call your cell? <input type="checkbox"/> Yes <input type="checkbox"/> No   |   |
| <b>Email Address</b>  |                                   | Can we email you? <input type="checkbox"/> Yes <input type="checkbox"/> No        |   |

| Applicant # 2 Information   |                                   |   |   |
|---|-----------------------------------|---|---|
| <input type="checkbox"/> MR <input type="checkbox"/> MRS<br><input type="checkbox"/> MS | <b>First &amp; Middle Name</b>    |   | <b>Last Name</b>                          |
| <input type="checkbox"/> Male<br><input type="checkbox"/> Female                        | <b>Date of Birth (MM/DD/YYYY)</b> |   | <b>Social Insurance Number (optional)</b> |
| <input type="checkbox"/> Same address as Applicant #1 <u>OR</u>                         |                                   |   |   |
| <b>Alternate Address:</b>   |                                   |   |   |
| <b>Home Phone #</b>   |                                   | Can we call you at home? <input type="checkbox"/> Yes <input type="checkbox"/> No |   |
| <b>Cell Phone #</b>   |                                   | Can we call your cell? <input type="checkbox"/> Yes <input type="checkbox"/> No   |   |
| <b>Email Address</b>  |                                   | Can we email you? <input type="checkbox"/> Yes <input type="checkbox"/> No        |   |



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**Other Household Member(s) to Reside in the Accommodation**

| Last Name | First Name | Date of Birth | Sex | Relationship to Applicant |
|-----------|------------|---------------|-----|---------------------------|
|           |            |               |     |                           |
|           |            |               |     |                           |
|           |            |               |     |                           |
|           |            |               |     |                           |

**Statement of Monthly Income before deductions (gross)**  
 GROSS Monthly Income – List ALL sources. **Submit verification of income with the application**

|   | Applicant #1 | Applicant #2 |
|---|--------------|--------------|
| Pensions - CPP                            | \$           | \$           |
| Pension – OAP                             | \$           | \$           |
| Pension – GAINS                           | \$           | \$           |
| Pension – Company                         | \$           | \$           |
| Ontario Disability Support Program (ODSP) | \$           | \$           |
| Ontario Works (OW)                        | \$           | \$           |
| Employment                                | \$           | \$           |
| Employment Insurance                      | \$           | \$           |
| WSIB                                      | \$           | \$           |
| Investment Income OR Income from Assets   | \$           | \$           |
| Any other income                          | \$           | \$           |
| <b>Total Gross Monthly Income</b>         | \$           | \$           |

**Applicant #1 Employment Status**  Not Employed

|                         |                             |
|-------------------------|-----------------------------|
| <b>Current Employer</b> | <b>Job Title</b>            |
| <b>Employer Address</b> |                             |
| <b>Employer Phone #</b> | <b>Length of Employment</b> |
| <b>Contact Person</b>   | <b>Job Title</b>            |

**Applicant #2 Employment Status**  Not Employed

|                         |                             |
|-------------------------|-----------------------------|
| <b>Current Employer</b> | <b>Job Title</b>            |
| <b>Employer Address</b> |                             |
| <b>Employer Phone #</b> | <b>Length of Employment</b> |
| <b>Contact Person</b>   | <b>Job Title</b>            |



# AFFORDABLE HOUSING APPLICATION FORM

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**Previous Tenancy – At least 5 years required (include all mortgaged or leased properties)**

| Tenant Name(s) | Landlord Name & Address | From<br>MM/YYYY | To<br>MM/YYYY |
|----------------|-------------------------|-----------------|---------------|
|                |                         |                 |               |
|                |                         |                 |               |
|                |                         |                 |               |
|                |                         |                 |               |
|                |                         |                 |               |

**Have you, or any person(s) listed on this application lived in subsidized rental accommodations in Ontario?**  Yes – complete below  No

| Tenant(s) Name | Housing Provider Name & Address | From<br>MM/YYYY | To<br>MM/YYYY |
|----------------|---------------------------------|-----------------|---------------|
|                |                                 |                 |               |
|                |                                 |                 |               |
|                |                                 |                 |               |
|                |                                 |                 |               |

**Housing & Related Needs Information**

How much are you currently paying? \$ \_\_\_\_\_/month in rent/mortgage  
 Are utilities included?  No  Yes

How much notice are you required to give your current landlord?  
 30 days  60 days  No notice required  Other \_\_\_\_\_

Do you own any property?  No  Yes (*details*) \_\_\_\_\_

Are you able to climb stairs?  No  Yes

Do you own a pet?  No  Yes  
*Note: proof of licensing and immunizations will be required, and local by-laws apply*

Do you own a vehicle:  No  Yes (*how many*) \_\_\_\_\_  
 Do you anticipate applying for a parking space?  No  Yes  
*Note: Parking fees are not included in the rent and are rented at a nominal monthly charge.*

Will you comply with (select buildings) Non-Smoking designation?  No  Yes

Do you currently have content/renters insurance?  No  Yes  
*Note: Content/renters insurance is a requirement of the lease agreement.*



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## Declaration, Release and Consent to Information

1. 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 Peterborough Housing Corporation.
2. I/we understand that when rental accommodation is provided to me/us that it will be occupied by me/us and the persons listed on this application.
3. I/we understand that this application does not constitute an agreement on the part of Peterborough Housing Corporation to provide me/us with rental accommodation.
4. I/we authorize Peterborough Housing Corporation to obtain such factual and investigative information as permitted by law. I/we acknowledge notice from the Peterborough Housing Corporation that a consumer report containing credit information may or will be referred to in connection with this application for housing.
5. I/we understand that my/our residency may be terminated if false information is determined after approval of my/our application for housing.
6. Personal information contained on this form or in its attachments is collected by the Peterborough Housing Corporation pursuant to the *Housing Development Act 2011, R.S.O. 1990, c. H.18, s. 2, 4 and 7* and *Freedom of Information and Protection of Privacy Act, R.S.O. 1990 c.F.310* and *Municipal Freedom of Information and Protection of Privacy Act, R.S.O. 1990 c.M.56* and will be used to determine suitability and eligibility for housing applied for and the continuation of housing.
7. Personal information may be disclosed to the Ministry of Municipal Affairs and Housing and other municipal, provincial or federal departments or agencies that assist in the provision of affordable housing.
8. The applicant(s)/residents(s) 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. Questions regarding this collection should be directed to: CEO of Peterborough Housing Corporation, 526 McDonnell Street, Peterborough, Ontario, K9H 0A6
9. I/we authorize Peterborough Housing Corporation to inquire about any information that may pertain to this housing application and this shall be irrevocable authority for releasing such information to the Peterborough Housing Corporation.
10. I/we give my/our consent and authorization to the Peterborough Housing Corporation:
  - a. To make any inquiries that it deems necessary to verify the information given in this form and I/we authorize any person, corporation, or any social agency having knowledge of any such required information to release the information to the Peterborough Housing Corporation.
  - b. I/we agree to provide any supporting information to the Peterborough Housing Corporation.
  - c. To disclose the information given in this form to any social agency providing any form of social assistance to me/us and to any Municipal Non-Profit Housing Corporation or other source of subsidized accommodation.

### Signatures of ALL applicants age 18 and older

Applicant \_\_\_\_\_ Date \_\_\_\_\_

Consent to check Rental Credit History - Yes  No

Applicant \_\_\_\_\_ Date \_\_\_\_\_

Consent to check Rental Credit History - Yes  No

Applicant \_\_\_\_\_ Date \_\_\_\_\_

Consent to check Rental Credit History - Yes  No

Applicant \_\_\_\_\_ Date \_\_\_\_\_

Consent to check Rental Credit History - Yes  No



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## Optional Supplementary Information

*This page is not required for affordable housing applications, but is optional and will be considered. It is our desire at PHC to foster positive community development.*

**Please comment on WHY you would be a good neighbour to others at one of PHC's affordable housing sites. Please reference any volunteer or relevant community experience you may have had that would assist in this:**

**Please comment on HOW you would be a good neighbour to others. Please reference any specific plans or intentions you would carry through on if housed at one of our properties:**

**Please add any comments relative to being a good neighbour to others at PHC sites:**