

# Joint Tenancy Application for Rent Geared to Income Accommodation

## Section 1: Current Tenant Information

Current Primary Tenant(s):

Name(s):			
Address:			
Phone Number:		Email:	

## Section 2: Applicant(s) Information

Applicant #	Applicant 1	Applicant 2
Name:		
Address:		
Date of Birth:		
Sex:		
Citizenship:	<input type="checkbox"/> Canadian Citizen <input type="checkbox"/> Landed Immigrant <input type="checkbox"/> Refugee Claimant <input type="checkbox"/> Other: _____	<input type="checkbox"/> Canadian Citizen <input type="checkbox"/> Landed Immigrant <input type="checkbox"/> Refugee Claimant <input type="checkbox"/> Other: _____
Phone:		
Email:		
Relationship to Current Tenant:		

Other Household Applicants (children, dependents):

Last Name	First Name	Date of Birth	Sex	Relationship to Tenant/Applicant

I have provided proof of citizenship and custody for all applicants, children and/or dependents listed above (mandatory).	<input type="checkbox"/> Yes
---	------------------------------

## Section 3: Current/Previous Tenancies in Subsidized Housing in Ontario

Have you or any other persons listed on the application lived in any housing project under any program administered by the Ministry of Municipal Affairs or a Service Manager?	<input type="checkbox"/> Yes <input type="checkbox"/> No
--	---

If Yes, please provide the following information:

Tenant Name	Address	Moved In	Moved Out
Housing Providers' Name	Housing Providers' Address	Housing Providers' Phone	

## Section 4: Verification of Income

All applicants over the age of 18 are required to provide their most recent Notice of Assessment or Income Tax Summary.

I have included the most recent Notice of Assessment or Income Tax Summary for all applicants over the age of 18 (mandatory)	<input type="checkbox"/> Yes
--	------------------------------

If your most recent Notice of Assessment does not accurately reflect your current income, OR if an applicant over 18 is attending school full time, please complete the following:

Full Name	Gross Income per Month (before deductions)	Source of Income AND/OR School Name	Proof Attached
			<input type="checkbox"/> Yes
			<input type="checkbox"/> Yes
			<input type="checkbox"/> Yes
			<input type="checkbox"/> Yes

If any applicants are receiving Ontario Works (OW) or Ontario Disability Support Program (ODSP), please complete the following:

Full Name	Program (OW or ODSP)	Proof Attached (Cheque Stub or Statement of Assistance)
		<input type="checkbox"/> Yes
		<input type="checkbox"/> Yes
		<input type="checkbox"/> Yes
		<input type="checkbox"/> Yes

Please indicate if any applicants are making or receiving child or spousal support:

Are any support payments made or received? (Spousal, child)	Amount	Frequency	Proof Attached
<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Yes

## Section 5: Verification of Assets - Information

Effective July 1st, 2023, the City of Peterborough has established an asset limit policy that restricts households with \$75,000 or more in assets from qualifying for (RGI) assistance.

As you are applying to have additional persons added into your household, all applicants must provide verification of their assets.

If the joint household assets exceed \$75,000, the household will be deemed ineligible for a rent subsidy and will be responsible for paying market rent. If your situation changes, you may reapply.

The following assets are considered exempt and do not need to be included on this form:

- Locked in Investments
  - Primary vehicle
  - Term of Life Annuity
  - Life Insurance (cash surrender value less than \$100,000.00)
  - Non cashable Guaranteed Investment Certificate (GIC) until maturity date
  - Trust Account (for a person with a disability up to \$100,000.00)
  - Funds held In Trust (that are not accessible to the resident)
  - Business Bank Account/Property (up to \$20,000.00)
- Restricted Life Income Fund (RLIF)
  - Registered Disability Savings Plan (RDSP)
  - Registered Educational Savings Plan (RESP)

**Recipients of Ontario Works (OW) or Ontario Disability Support Program (ODSP) may be exempt. Please see Section 7 for more information.**

Section 6: Verification of Assets - Exemption

Is everyone applying to be part of the household a recipient or member of a social assistance benefit unit? (Ontario Works, Ontario Disability Support Program)

☐ Yes

If you answered **YES** to the above, you are not required to complete the rest of the Verification of Assets Sections. Please sign below and return the completed Joint Tenancy Application to Peterborough Housing Corporation.

If you answered **NO** to the above, please complete Section 7 to 9.

6a: Verification of Assets – Exemption Release and Consent

All Tenants and Applicants 18 years of age or older must sign below

By signing below, all tenants and applicants declare the following is true:

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.

I/we understand, when rental accommodation is provided to me/us that it will be occupied by me/us and the persons listed on this application.

I/we understand that this application does not constitute an agreement on the part of the Peterborough Housing Corporation to provide me/us with rental accommodation.

Personal information contained on this form or in attachments is collected for Peterborough Housing Corporation pursuant to the *Housing Development Act, Sections 2,4 and 7, R.S.O. 1990. C.O. 21* and the *Housing Development Act, Subsection 7(2) R.S.O. 1990. CH 18* and will be used to determine suitability and eligibility for housing applied for, continuation of housing and the appropriate rent scale and rent geared-to-income charge. Personal information may be disclosed to Local Housing Corporations, non-profit housing corporations, the Ministry of Municipal Affairs and Housing and other municipal/provincial and federal departments and agencies who assist in the provision of affordable housing. Information provided by the household may be shared for the purposes of making decisions or verifying eligibility for assistance under the *Housing Services Act, 2011*, the *Ontario Disability Support Program Act, 1997*, the *Ontario Works Act, 1997* or the *Child Care and Early Years Act, 2014*.

The applicant(s)/resident(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 about the collection, use, and disclosure of this information should be directed to: Resident Services Manager, Peterborough Housing Corporation, at 705-742-0439.

Current Tenants

_____ Print Name (Tenant)	_____ Signature	_____ Date
_____ Print Name (Tenant)	_____ Signature	_____ Date
_____ Print Name (Tenant)	_____ Signature	_____ Date
_____ Print Name (Tenant)	_____ Signature	_____ Date

Applicants

_____ Print Name (Applicant)	_____ Signature	_____ Date
_____ Print Name (Applicant)	_____ Signature	_____ Date
_____ Print Name (Applicant)	_____ Signature	_____ Date
_____ Print Name (Applicant)	_____ Signature	_____ Date

**Section 7: Verification of Assets – Bank/Financial Institution Information**

This Section is to be completed by the Applicant’s Bank/Financial Institution. If additional forms are needed, please contact our office.

Please note, the rent charged to Peterborough Housing Corporation tenants is based on their GROSS income. Please provide all available information as requested for the tenant(s) named on the previous page. All information will be treated as confidential

**Chequing/Savings Accounts**

Account Number	Balance (\$)	Current Interest Rate (%)	Interest earned in past 12 months (\$)

**Investments – Including GIC’s, Term Deposits, RRSPs, RRIFs, Stocks, Bonds, etc.\***

Investment Type	Value (\$)	Current Interest Rate (%)	Interest earned in past 12 months (\$)	Locked In? (Yes/No)

Name of Financial Institution:		Financial Institution Seal or Stamp
Address:		
Authorized Signature:		
Position:		
Date:		

**\*Excluded Investments/Accounts**

The following investments/accounts are considered exempt and do not need to be included:

- Locked in Investments
- Term of Life Annuity
- Registered Educational Savings Plan (RESP)
- Life Insurance (cash surrender value less than \$100,000.00)
- Non cashable Guaranteed Investment Certificate (GIC) until maturity date
- Trust Account (for a person with a disability up to \$100,000.00)
- Funds held In Trust (that are not accessible to the resident)
- Business Bank Account/Property (up to \$20,000.00)

- Restricted Life Income Fund (RLIF)
- Registered Disability Savings Plan (RDSP)

Section 8: Verification of Assets – Assets held by Applicants

This Section is to be completed by the Applicants requesting to be part of the Household.

8a. Real Estate Equity	
Do any applicants own property? (Business property is exempt)	<input type="checkbox"/> Yes <input type="checkbox"/> No

If you answered YES to the above, please complete the following:

What is the value (CAD) of the property according to your MPAC assessment?  
(minus mortgages, lines of credit or liens secured on the property. Includes residential and non-residential.)

Value in CAD (\$)	MPAC Statement or Appraisal Attached
	<input type="checkbox"/> Yes
	<input type="checkbox"/> Yes

8b. Vehicles	
Do any applicants own a vehicle?	<input type="checkbox"/> Yes <input type="checkbox"/> No

If you answered YES to the above, please complete the following:	
Number of vehicles are owned by applicants:	
Number of applicants that are licensed drivers:	

Vehicle Type	Value (\$)	Loan Document Attached (Only if valued over \$15,000.00)
Applicant Vehicle #1 (Car, Truck, Motorcycle, etc.)		<input type="checkbox"/> Yes
Applicant Vehicle #2 (Car, Truck, Motorcycle, etc.)		<input type="checkbox"/> Yes
Applicant Vehicle #3 (Car, Truck, Motorcycle, etc.)		<input type="checkbox"/> Yes
Recreational Vehicle #1 (Boat, snowmobile, ATV, etc.)		<input type="checkbox"/> Yes
Recreational Vehicle #2 (Boat, snowmobile, ATV, etc.)		<input type="checkbox"/> Yes

8c. Registered Accounts/Investments		
Do any applicants have any registered account of investments?*	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Current Statements Attached
Do any applicants have any Life Insurance Policies?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Current Statements Attached

Once the above information is complete, please have all current tenants and applicants sign the Release and Consent on the following page then return to Peterborough Housing Corporation.

Section 9: Release and Consent

All Tenants and Applicants 18 years of age or older must sign below

By signing below, all tenants and applicants declare the following is true:

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.

I/we understand, when rental accommodation is provided to me/us that it will be occupied by me/us and the persons listed on this application.

I/we understand that this application does not constitute an agreement on the part of the Peterborough Housing Corporation to provide me/us with rental accommodation.

Personal information contained on this form or in attachments is collected for Peterborough Housing Corporation pursuant to the *Housing Development Act, Sections 2,4 and 7, R.S.O. 1990. C.O. 21* and the *Housing Development Act, Subsection 7(2) R.S.O. 1990. CH 18* and will be used to determine suitability and eligibility for housing applied for, continuation of housing and the appropriate rent scale and rent geared-to-income charge. Personal information may be disclosed to Local Housing Corporations, non-profit housing corporations, the Ministry of Municipal Affairs and Housing and other municipal/provincial and federal departments and agencies who assist in the provision of affordable housing. Information provided by the household may be shared for the purposes of making decisions or verifying eligibility for assistance under the *Housing Services Act, 2011*, the *Ontario Disability Support Program Act, 1997*, the *Ontario Works Act, 1997* or the *Child Care and Early Years Act, 2014*.

The applicant(s)/resident(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 about the collection, use, and disclosure of this information should be directed to: Resident Services Manager, Peterborough Housing Corporation, at 705-742-0439.

Current Tenants

_____ Print Name (Tenant)	_____ Signature	_____ Date
_____ Print Name (Tenant)	_____ Signature	_____ Date
_____ Print Name (Tenant)	_____ Signature	_____ Date
_____ Print Name (Tenant)	_____ Signature	_____ Date

Applicants

_____ Print Name (Applicant)	_____ Signature	_____ Date
_____ Print Name (Applicant)	_____ Signature	_____ Date
_____ Print Name (Applicant)	_____ Signature	_____ Date
_____ Print Name (Applicant)	_____ Signature	_____ Date