Application for Rent-Geared-to-Income (RGI) Housing

If you do not complete all sections of this application form or do not attach all the required documents, your application cannot be processed.

Your completed application form and attached documents can be mailed or delivered to:

Halton Access to Community Housing (HATCH) 690 Dorval Drive, 7th Floor Oakville, ON L6K 3X9

APPLICATIONS WILL NOT BE ACCEPTED BY FAX



For more information, Dial 311 or visit <u>www.halton.ca/hatch</u> or email <u>hatch@halton.ca</u>.

(English)

If you have language difficulties and you need help please call the Halton Multicultural Council at (905)842-2486 Ext. 221

(French)

En cas de difficultés à communiquer en d'autres langues ou si vous avez besoin d'assistance, veuillez communiquer avec Le Conseil Multiculturel d'Halton au (905) 842-2486, poste 221

(Spanish)

Si usted tiene dificultad comunicandose en ingles y necesita ayuda por favor llame a Halton Multicultural Council Tel. (905) 842-2486 Ext. 221 nosotros podemos ayudarle.

(Arabic)

إذا كنت تعاني من صعوبات أو مشاكل لغوية وتحتاج للمساعدة، الرجاء الإتصال بـمجلس هالتون المتعدد الثقافات عُلى الرقم: 842-2486 (905) تحويلة 221

(Serbian)

Ако имате проблем са језиком и треба вам помоћ слободно позовите Халтон Мултикултурални Центар на телефон 2015 842 2486 доков 221

905 842 2486 локал 221

(Croatian)

Ako imate problem sa jezikom i treba vam pomoć slobodno pozovite Halton Multikulturalni Centar na telefon 905 842 2486 lokal 221

(Chinese)

如果您有语言上的困难需要帮助,请致电 Halton Multicultural Council (905) 842-2486 分机号 221

(Punjabi)

ਜੇ ਤੁਹਾਨੂੰ ਬੋਂਲੀ ਵਿੱਚ ਔਖਿਆਈ ਆ ਰਹੀ ਹੈ ਅਤੇ ਤੁਹਾਨੂੰ ਮਦਦ ਚਾਹੀਦੀ ਹੈ ਤਾਂ ਤੁਸੀ ਹਾਲਟਨ ਮਲਟੀਕਲਚਰਲ ਕੌਸਲ ਤੇ ਇਸ ਫੋਨ ਨੰਬਰ ਫੋਨ ਕਰੋ (905) 842-2486 Ext. 221

(Polish)

Jezeli maja Panstwo trudnosci w poslugiwaniu sie jezykiem angielskim i potrzebuja Panstwo pomocy prosze zadzwonic do Halton Multicultural Council pod numer 905-842-2486 wew.221

(Portuguese)

Se tiver problemas para-se comunicar em inglês e precisar de ajuda, por favor telefone para o "Halton Multicultural Council" (905) 842-2486 ext. 221

(Korean)

언어소통 문제가 있을 경우 Halton Multicultural Council에 도움을 청하십시오(905-842-2486 구내번호 221).

Tagalog (Filipino)

Kong mayroon kayong kahirapan sa lenguahe at kailangan ninyo ng tulong masiyahang tumawag sa Halton Multicultural Council sa 905-842-2486 ext. 221.

HATCH APPLICATION CHECKLIST

IMPORTANT: *If you do not complete <u>all</u> sections of this application form or do not include citizenship documentation for <u>all</u> household members, HATCH may be required to shred your application without placing you on the wait list.

Complete // the Check list below:



To be Eligible for subsidized housing your household must meet <u>all</u> of the items listed below:

- 1. \Box all sections of the application are complete.
- 2. □ page 32 is signed by all household members 16+ years old.
- 3. TYou must be able to live independently, and make your own arrangements for support services in order to receive RGI housing.
- 4.
 Copies of Canadian birth certificates, Canadian passport, landed immigrant, permanent resident card or refugee claimant documents for ALL members of the household are included.
- 5. D No member of the household is currently under a deportation, departure or exclusion order to leave Canada.
- 6. □ the Building Selection form is complete (<u>only</u> those 60+ can select buildings from any community type (Senior pg.13-18 /Non-senior pg.18-29).
- 7. are you requesting an additional bedroom for a member of your household where there is a legal custody agreement or visiting rights involving overnight stays?
 If yes, you must supply a copy of the agreement.
- 8. **D** No member of the household owes money to any social housing provider.
- 9. □ confirmation that payments on arrears to a Social Housing Provider are in good standing (Repayment Schedule) are included.
- 10. □ If you own a house or rent any other property, you must agree to sell it or terminate the lease within 180 days of being housed.
- 11. □ No member of the household has been convicted of an offence in relation to rentgeared-to-income assistance or found by a court of law to have misrepresented their income for the purpose of rent-geared-to-income assistance.

Forms related to the requests below are available online:

IMPORTANT:

Visit <u>www.halton.ca/housing</u> to print and complete the form(s) related to the specific request you have selected above and provide to HATCH with this completed application form.

- □ Are you requesting a wheelchair accessible unit?
- □ Are you requesting an additional bedroom due to an existing medical condition?
- Are you applying as a victim of domestic violence under the Provincial Special Priority Policy (SPP)?

HATCH Applicant Roles and Responsibilities when applying and once approved

HATCH applicants are required to:

- Keep contact information in your HATCH application up-to-date.
- Complete the Annual Update Requirement form each year, in the summer.
- Enter into a repayment agreement with any social housing provider where you owe money

IMPORTANT:

- * **HATCH will not process** NOA documentation sent before and without the completed Annual Update form. Please only provide NOA documentation when you receive the Annual Update Form from HATCH.
- * It is important to know, that HATCH will not follow-up by phone for an annual update not received.

SECTION 1 – PRIMARY APPLICA	ANT	INF	ORMATION		
First Name:	1	Middle	e Name or Initial	:	
Last Name:			ate/Maiden Nam	le:	
Sex: Male Female Other	C	Date o	of Birth/_	/ DD /YYYY	
Marital Status: Single Common Law Married Separated Divorced Widow					
What is your status in Canada? (attach proc	of to t	the ap	plication for all	household members)	
 Canadian Citizen First Nations (or) Landed Immigrant Refugee Claimant Applied for Permanent Resident status Sponsored Immigrant 					
*Applicants who have Record of Landing with any other proof of status in Canada	g Doc		nts- please prov	vide a copy(s) along	
				MM / DD / YYYY	
Social Insurance Number: (optional)			E-mail:		
Current Address:		Unit #	:	Box #:	
City:	F	Provir	ice:	Postal Code:	
Home Phone:	(Cell F	Phone:		
Work Phone: Ext:	(Can w	we call you at work?		
Mailing / safe address, if different from above	e:				
c/o:	Unit	#:		Box #:	
City:		vince:		Postal Code:	
Present Landlord: (Name and Address)	Lanc	andlord Phone #:		Monthly Rent: \$	
Why do you want to move?					
Why do you want to move to Halton Region?	?				
Have you ever lived in Halton Region?				did you leave Halton?	
Is your current landlord a social housing pro-	vider	? 🗖	Yes 🗖 No		
Are you currently receiving a rent-geared-to-	-incor	me su	bsidy? 🗖 Yes	□ No	
Are you receiving any other housing related housing allowance, etc)?	finan	icial a	ssistance (e.g. re	ent supplement,	
In what city/country did you live one year age	o? C	City: _	(Country:	
I am able to live independently: Yes No	Are	you v	villing to pay ma	rket rent? 🗖 Yes 🗖 No	
Spoken language(s):	Pre	eferred	language of corre	espondence: English French	
Do you use an interpreter?		Lang	uage:		
Interpreter's Name:	<u> </u>	Inter	preter's Phone #	:()	

SECTION 1 – PRIMARY APPLICANT INFORMATION (Continued)

Other people we can call if we need to reach you:

Name	Relationship	Agency	Home Phone #	Other Phone #
Do you give us permission to talk about your application with the above people?				

• Please note that HATCH may discuss any matter about your HATCH application with the individuals listed above.

SECTION 1 – CO-APPLICANT					
First Name:	Middle	Name or Initial:			
Last Name:	Alterna	te/Maiden Nam	e:		
Sex: Male Female Other Date of Birth: //// DD // YYYY					
Marital Status: Single Common Law Married Separated Divorced Widowed					
What is your status in Canada? (attach proof to	the app	lication)			
 Canadian Citizen First Nations (or) Refugee Claimant Applied for Permanent 			Refug Spons	ee ored Immigrant	
*Applicants who have a Record of Landing D with any other proof of status in Canada do	ocumei cumenta	nt - please prov ation. (Date of arriv	vide a val to Ca	copy along nada))	
Social Insurance Number:(optional)		E-mail:			
Current Address:	Unit #:		Box #	t:	
City:	Provinc	ce:	Posta	al Code:	
Home Phone:	Cell Pl	hone:			
Work Phone: Ext:	Can we	e call you at woi	rk? □	Yes 🗖 No	
Present Landlord:	Landlo	rd Phone #:		Monthly Rent: \$	
Why do you want to move?					
Why do you want to move to Halton Region?					
Have you ever lived in Halton Region?	s 🗖 No				
If yes, when did you live in Halton Region?					
Is your current landlord a social housing provide	er? 🗖 Y	′es □ No			
Are you currently receiving a rent-geared-to-inc	ome sub	sidy? 🗖 Yes	🗖 No		
Are you receiving any other housing benefit (rer Yes INo If ' yes ', which benefit?	nt supple	ement, housing a	allowa	nce, etc.)?	
In what city/country did you live one year ago?	City:	Cou	ntry:		

SECTION 3 – HOUSEHOLD INFORMATION

List the names of all adults and children (including yourself) who will live with you in subsidized housing. You must attach proof of your legal status in Canada for all household members.

Status in Canada

status in Canada to	status in Canada for all nousenoid members.														
			Polotionship	;	Se>	<		ate Birth					e Claimant	ent Residence	
Last Name	First Name	to you	М	F	0	Month	Day	Year	Canadian Citizen	First Nations	Landed Immigrant	Refugee or Refugee Claimant	Applied for Permanent Residence	Social Insurance Number	
			self												(Optional)
Do you have joint ac If 'yes', please prov			ted in this appl	lica	itior	ר?		J Y€	es 🗆] No		I N//	Ą		
Name of C	Child		Arrange	eme	ent								De	tails	;
		🗖 Sh	ared Custody			/isita	ation	l							
		🗖 Sh	ared Custody			/isita	ation								
		🗖 Sh	ared Custody			/isita	ation								
		🗖 Sh	ared Custody			/isita	ation								
SUPPORT SERVICES UNITS Do you or anyone who plans to live with you require support services In order to live independently? If you answered "Yes" to the above question select:					s 🗖 No										
• The Suppor	rt Service Build	ing So	elections Loca	ate	d o	n p	age	s pç	g.17	& p	g.2	9.			
IMPORTANT: Pleas	e provide a cop	by of c	one of the follo	owi	ing	do	cun	nent	s fo	r <u>ea</u>	<u>ich</u>	hou	ıseł	old	member
IMPORTANT: Please provide a copy of one of the following documents for Canadian Birth Certificate (front and back) OR Canadian Citizenship Permanent Resident							ents	5		front and back) front and back)					

Refugee Claimant Documents

(front and back)

SECTION 4 – ACCOMMODATION REQUESTS	
How many bedrooms do you need?	2 🗖 3 🗖 4 🗖 5 (5+/6)
*Please note: your selected bedroom size may not be appro	oved for your household
	-
If you are 65 years of age or older, do you prefer senior housin *Offers of housing for Senior buildings are given to those who ha	
What type of accommodation do you prefer: Townhouse A	partment D No Preference
Do you own a vehicle? Yes No Do you require parking for this vehicle? Yes No Would you be willing to make other arrangements for your vehicle in order to accept a unit with no parking? Yes No	How many spaces? *most properties only have 1 parking spot per household
Is a baby expected? Yes No If yes, due date * Attach a verifying letter from your medical practitioner	e?/// MM / DD / YYYY
Does everyone listed on the application live with you now If No, why not?	w? 🗖 Yes 🗖 No
*Please note that when offered an opportunity to view a uni application form can move into the offered unit	t only those listed on the
Wheelchair Accessible and/or Additional Bedroo	m Requests
Do you, or someone in your household, require an accessible un	it? □ Yes □ No
a member of your household who requires the ongoing use of	a wheelchair.
Additional equipment is used on a full time bases:	
dialysis equipment, dialysis equipment, dialysis	other:
Typically, an additional bedroom will not b	be allowed for:
	ing/Sleep Apnea
	uent night time waking or insomnia
the storage of assistive devices required due to a disability or for a serious medical condition on a full time basis?	medical equipment required
a separate bedroom for a spouse because of a significant disa condition?	ability or serious medical
overnight accommodation of an individual to provide support s to a medical condition/disability. The caregiver must <u>not</u> maint elsewhere and must be listed as a household member on your	ain accommodations
IMPORTANT	
*Your household will not be considered eligible for a whee an additional bedroom <u>unless</u> HATCH receives a Wheelc Bedroom Request Form completed by your medical Doc HATCH Application Form. Call 311, toll free: 1-866-442-58 905-825-6000 to request a copy of this form.	hair Accessible/Additional tor in addition to your

SECTION 5 – INCOME AND ASSET INFORMATION

INCOME

Fill in the monthly income (before deductions) for you and each person in your household 16 years of age and older.

Definition of Gross Income: An individual's total personal income before taking taxes or deductions into account

SOURCE OF INCOME	APPLICANT Gross Monthly Amount	CO- APPLICANT Gross Monthly Amount	OTHER HOUSEHOLD MEMBER(S) Gross Monthly Amount
Employment	\$	\$	\$
Self-Employment	\$	\$	\$
Employment Insurance (EI)	\$	\$	\$
Workers Safety Insurance Board (WSIB)	\$	\$	\$
Ontario Works (OW)	\$	\$	\$
Ontario Disability Support Program (ODSP)	\$	\$	\$
Old Age Security (OAS) / Supplement	\$	\$	\$
GAINS "A" / GIS	\$	\$	\$
Canada Pension Plan (CPP/QPP)	\$	\$	\$
Other Country Pension	\$	\$	\$
Other Pension(s)	\$	\$	\$
Support Payments	\$	\$	\$
Support Payments	\$	\$	\$
Grant/Bursary	\$	\$	\$
Other income (give details):	\$	\$	\$
Total (also include -Household Total (calculated))		<u> </u>	<u> </u>
Notice of Assessment (most recent) - (a copy of your most recent NOA is re on page 9)		ormation about th	is request is provided
Does anyone in your household re	ceive the followin	ng?	
OSAP	\$	\$	\$
Child Tax Credit	\$	\$	\$
Other	\$	\$	\$

SECTION 5 – INCOME AND ASSET INFORMATION (Continued)

ASSETS

Fill in the value of any assets owned by you and each person in your household 16 years of age and older.

TYPE OF ASSET	APPLICANT	CO- APPLICANT	OTHER HOUSEHOLD MEMBER(S)
Bank Account (give details):	\$	\$	\$
GICs/Bonds (give details):	\$	\$	\$
RRSPs (give details):	\$	\$	\$
Other assets (give details):	\$	\$	\$
Property (give details):	\$	\$	\$

 Have you given away, or transferred, any property, real estate, investments or other funds/money to relatives or friends, in the past 3 years? Has anyone in your household?

If '**yes**', give date of transfer (MM/DD/YY): _____ Amount/Value:

If 'yes', what is the address of the property:

2. Do you presently own or co-own any property suitable for year round residency, in Canada or any other country? □ Yes □ No

If yes, address of property:

What is the estimated value? \$_____

Submit your Notice of Assessment (NOA)

Attach copies of the NOA for <u>all</u> adult members on your HATCH application

What is a Notice of Assessment (NOA)?

Each year, as a taxpayer, you complete a tax return based on your previous year's income to send to Canada Revenue Agency (CRA). The CRA issues you a Notice of Assessment (NOA) upon receipt of the tax return. The NOA is an annual statement sent by revenue authorities to taxpayers detailing the amount of your total income for the previous year. HATCH is requesting a copy of the NOA you received from your most recent tax return. Provide <u>copies</u> of the NOA summary page (showing line 150) for <u>all</u> adult members on your HATCH application.

*If you have not received your NOA, contact CRA at: 1-800-959-8281.

May 5.	, 2007	Name Jane Doe	Social Insurance 123 456 78		x year 2007	Tax centre Shawinig	gan QC G9N 7S6
			Summary				000000
Line							\$ Amount
150	Total	Income					00,000
	Deduc	tions from total	income				000
236							00,000
260							00,000
150		Ontario non-ref redits	undable				000
420	Net f	ederal tax					0,000.00
428	Net 0	ntario tax					0,000.00
435	Total	payable					0,000.00
437	Total	income tax dedu	cted				0,000.00
448	CPP O	verpayment					00.00
482	Total	Credits					0,000.00
							0,000.00
	(Tota	l payable minus	total credits)				(000.00)
	Balan	ce from this ass			 		
	Balan	ce from this ass	total credits) essment		 		(000.00) CR 000.00
Date May 5,	Balan Direc	Aurne Jane Doe	total credits) essment William V. Baker Commissioner of Revenu 123 456 789	e 2007	Tax cer Shar		(000.00) CR 000.00 CR 000.00
The back	2007 2007 2007 2007 2007 2007 2007 2007	Norre Jane Doce 2008 I toto contains important information in limit for 2007 ble RRSP contributions di deduction limit at the end 007 earned income of \$(006 pension adjustment.	total credits) essment	ie havydar 2007 atment ki (†) cann	The cer Shar to be les	*** winigan QC s then zero. \$0 	(000.00) CR 000.00 CR 000.00 G9N756

□ Yes □ No

\$

SECTION 6 – PREVIOUS HOUSING HISTORY

List ALL three (3) of the most recent addresses for <u>the last 5 years</u> for ALL household members.*

Household Member	Previous Address	Move in date m/y	Move out date m/y	Name of Landlord	Landlord's Phone #

*Note: If you need more space for additional addresses or additional applicants, please record on a separate piece of paper and <u>attach</u> to this application form.

SECTION 6 – PREVIOUS SOCIAL HOUSING HISTORY (Continued)

Have you or anyone listed in your application <u>ever</u> lived in subsidized housing paying market rent or in receipt of a subsidy (ex. Rent -Geared-to-Income (RGI), below market rent) or been in receipt of a housing benefit in Ontario? Ontario? Yes No

If 'yes', please complete below

Name of person listed on the lease	Address	Name of Housing Provider	Type of Subsidy/ Benefit received	Move- out date	Arrears Owing (\$)
Example: John Doe	1262 Pine Ave, Smithville ON L6K 3X9	Strong Properties Inc.	RGI	01/30/2008 dd/mm/yyyy	🗆 Yes 🗆 No
					🗆 Yes 🗆 No
					🗆 Yes 🗆 No
					🗆 Yes 🗆 No
Have you or any member of your household ever lived in: Oakville Deurlington Deurlington Acton					
	rent from a family memb		per(s) who curren		TYes INo

SECTION 7 – SPECIAL PRIORITY POLICY (SPP) & LOCAL PRIORITY

Applicants with verified SPP status may not be housed immediately.

The Special Priority status is reserved for those who have been abused by an individual who is or was living with the abused member or

A household may be eligible to be included in the Special Priority household category if a member of the household has been abused by another individual that is or was living with them. This may include an individual who is sponsoring the abused household member as an immigrant.

Are you applying for Special Priority?I Yes I NoDo you have a Sponsor?I Yes I No

IMPORTANT:

The abused member must intend to live permanently apart from the abusing individual and <u>MUST</u> complete a Provincial Special Priority Policy (SPP) Request for Status as a Victim of Domestic Abuse Form.

To obtain a copy of the Provincial Special Priority Policy (SPP) Request for Status as a Victim of Domestic Abuse Form. Please call **311** or visit our **website and search for "Provincial Priority Household Verification Form"**

Local Priority Status: Homeless

Applicants with verified homeless status will not be housed immediately.

- Your wait for housing <u>may</u> be reduced but your wait could still be long
- Buildings you select may only have 1 vacancy in a year. Therefore, the building can offer one opportunity of housing to applicants on the wait list in that given year. Applicants on the wait list in Halton Region may find their wait is longer than expected as buildings can only offer housing when a tenant vacates a unit.
- HATCH staff has no way of knowing when you will be housed from the wait list or how long you will wait.

Applicants may be deemed homeless when the applicant:

- Is <u>currently</u> living in an emergency shelter (written verification from the shelter is required)
- Awaits release from a hospital and is unable to return to his/her former accommodations due to medical reasons. (written verification from the shelter is required)
- Will be evicted by his/her landlord (an Eviction Order, issued by the Landlord and Tenant Board (LTB) or the Superior Court of Justice, is required (an LTB N4 or L1 does not qualify). If the eviction is related to income misrepresentation or arrears with a social housing provider, the application will be denied as the household is not eligible to be on the social housing waitlist for RGI housing for a period of 2 years from the date of conviction.
- Has been notified by their landlord that the landlord him/herself is going to live in the applicant's unit within 60 days. (a Landlord and Tenant Board N12 Form, is required)

Are you applying for Homeless status? Yes No

Homelessness is NOT:

Living in a unit with high rent without an eviction otice,
 Living in a unit with high rent without an eviction
 Living in a unit with high rent without an eviction
 Living in a unit with high rent without an eviction
 Living in a unit with high rent without an eviction
 Living in a unit with high rent without an eviction
 Living in a unit with high rent without an eviction
 Living in a unit with high rent without an eviction
 Living in a unit with high rent without an eviction
 Living in a unit with high rent without an eviction

Living with your parent(s) and/or family member(s)

- Living in a unit too small for your current household,
- Released from hospital but expected to return to previous address.





HATCH Building Selection Lists: Rent-Geared-to-Income (RGI) housing

FIND THE APPLICANT TYPE BELOW THAT RELATES TO YOUR HOUSEHOLD AND FOLLOW THE INSTRUCTIONS CAREFULLY:



SENIOR APPLICANTS pg.13-18

If one member of your household is 60+ you may <u>select</u> both All-Age and Senior Community Type Building Selections.

• Offers of housing for Senior Communities are given to those applicants who have reached the age of 65+.



SENIOR WHEELCHAIR ACCESSIBLE (WCA) APPLICANTS **b** pg.16

If your household makes a selection(s) under this section of the HATCH Building Selection List your household will require an eligibility assessment by HATCH Staff.

• A Medical Request Form for a Wheelchair Accessible unit and/or Additional Bedroom Form <u>must</u> be completed to determine eligibility for this unit type.



SENIOR SUPPORT SERVICE (SS) APPLICANTS 💞 pg. 17

If your household makes a selection(s) under this section of the HATCH Building Selection List your household will require an <u>initial</u> eligibility assessment.

- To determine initial eligibility for support services your household will be contacted by the various Support Service Providers in the building(s) selected by your household.
- Offers of housing may be given to Support Service initially eligible applicant's age 60+



ALL-AGE APPLICANTS pg. 18-29

Applicants younger than 60 may <u>only</u> select from the All-Age Community Building Selection Lists.



ALL-AGE WHEELCHAIR ACCESSIBLE AND/OR SUPPORT SERVICE APPLICANT: pg. 26-29

If your household makes a selection(s) under this section of the HATCH Building Selection List your household will require an eligibility assessment.

- A Medical Request Form for a Wheelchair Accessible unit and/or Additional Bedroom Form <u>must</u> be completed to determine eligibility for this unit type.
 - To determine initial eligibility for support services your household will be contacted by the various Support Service Providers in the building(s) selected by your household.
 - Applicants who are eligible for All-age Support Service units may receive an offer of housing at 16+

Legend:	$C_{0-0p} = C_{00perative}$	Apt. = Apartment
		🋍 TH = Townhouse
	1.5 WR = One and a half bathrooms in unit	2 WR = Two bathrooms in unit
	\mathcal{E} = wheelchair accessible units (WCA)	Good = Good amount of parking spaces
	1-2BR = one-two bedroom wheelchair accessible unit	\checkmark = Check box: to select the building
	\square = Indicates unit size(s) offered in the building	= Supportive Services: in the building
	$\mathbf{RI} = $ Roll-in shower	Utilities = Water, Heat, Hydro -Those listed below are included
	Incl. = All utilities included	Excl. = All utilities excluded
	HCHC = Halton Community Housing Corporation	



SENIOR APPLICANTS

IMPORTANT

If one member of your household is 60+ you may select both All-age and Senior Community Type Building Selections

Senior: Regular units (pg.13-14), 🖪 units (pg.16) & 💩 units (pg.17), Rent Supplement (pg.18)

All-Age: Regular units (pg.19-26), 🛃 units (pg.26-28) & 🧔 units (pg.29), Rent Supplement (pg.18)

Legend: LTD = limited parking spaces

 \checkmark = Check box: to select the building

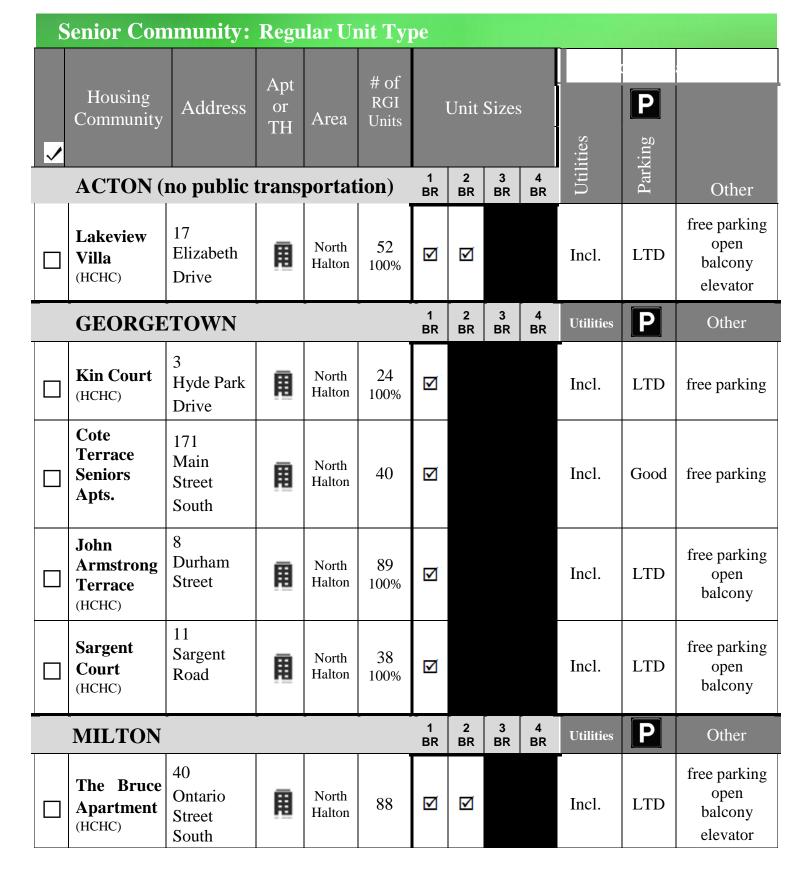
= wheelchair accessible units (WCA)

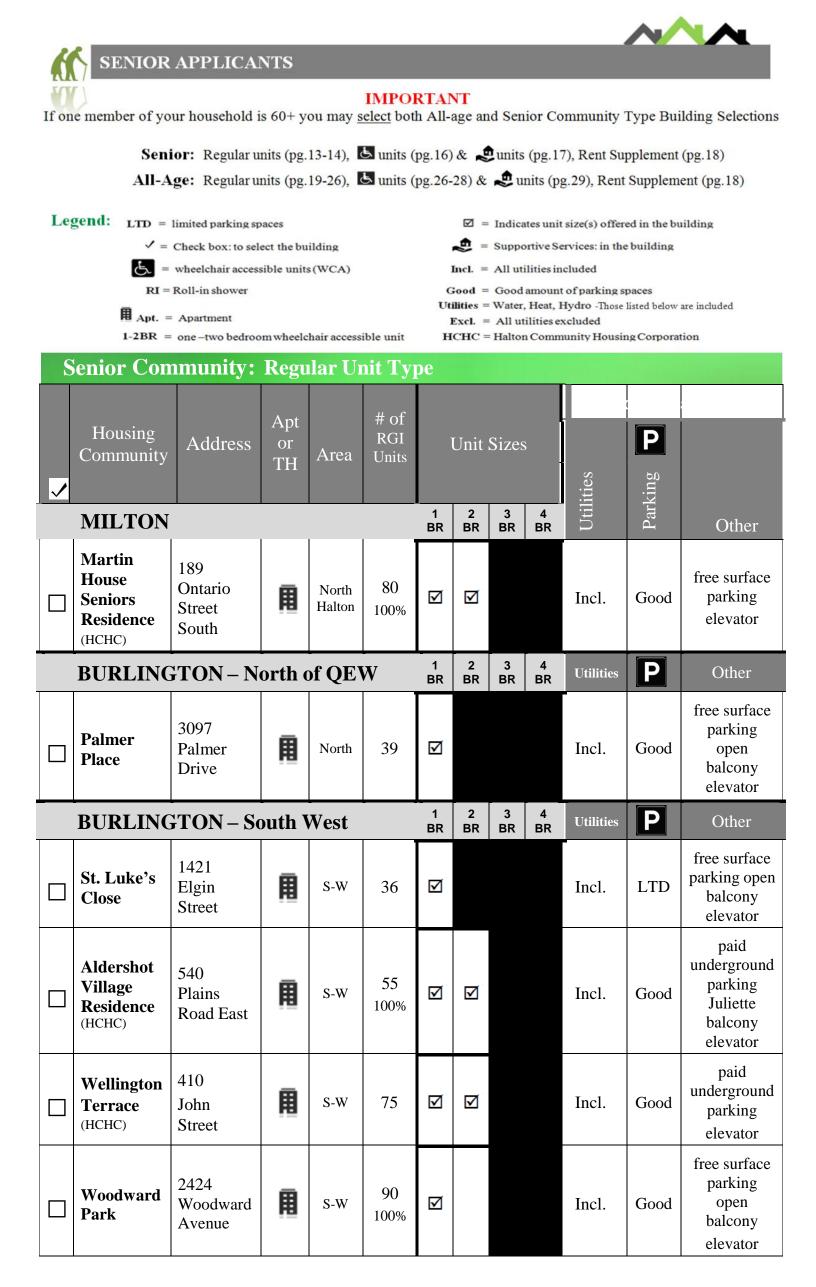
 $\mathbf{RI} = \mathbf{Roll} \cdot \mathbf{in \ shower}$

Apt. = Apartment

1-2BR = one-two bedroom wheelchair accessible unit

- Indicates unit size(s) offered in the building
- Supportive Services: in the building
- Incl. = All utilities included
- Good = Good amount of parking spaces
- Utilities = Water, Heat, Hydro -Those listed below are included
 - Excl. = All utilities excluded
- HCHC = Halton Community Housing Corporation







Other

free parking

open

balcony

free parking

open

balcony

elevator

free parking

open

balcony

elevator

Other

paid parking

open balcony

elevator

Other

paid

underground

and above-

ground

parking

paid parking

open balcony

paid above-

ground

parking



Gardens

234 - 274

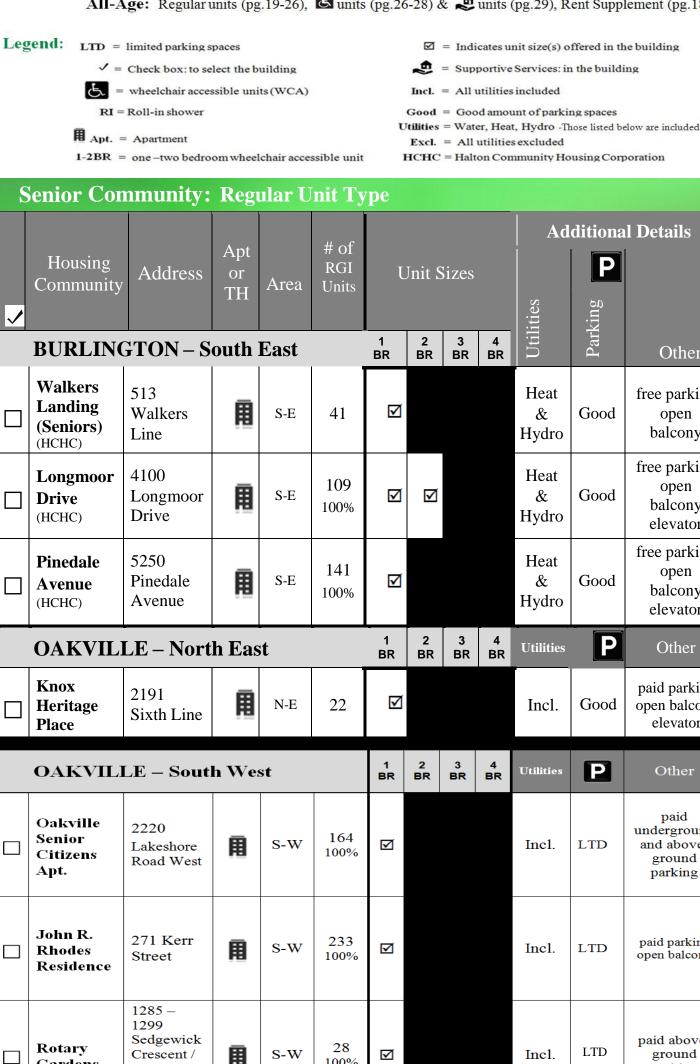
Woodside Drive

IMPORTANT

If one member of your household is 60+ you may select both All-age and Senior Community Type Building Selections

Senior: Regular units (pg.13-14), 🕓 units (pg.16) & Dunits (pg.17), Rent Supplement (pg.18)

All-Age: Regular units (pg.19-26), 🕓 units (pg.26-28) & Inits (pg.29), Rent Supplement (pg.18)



100%



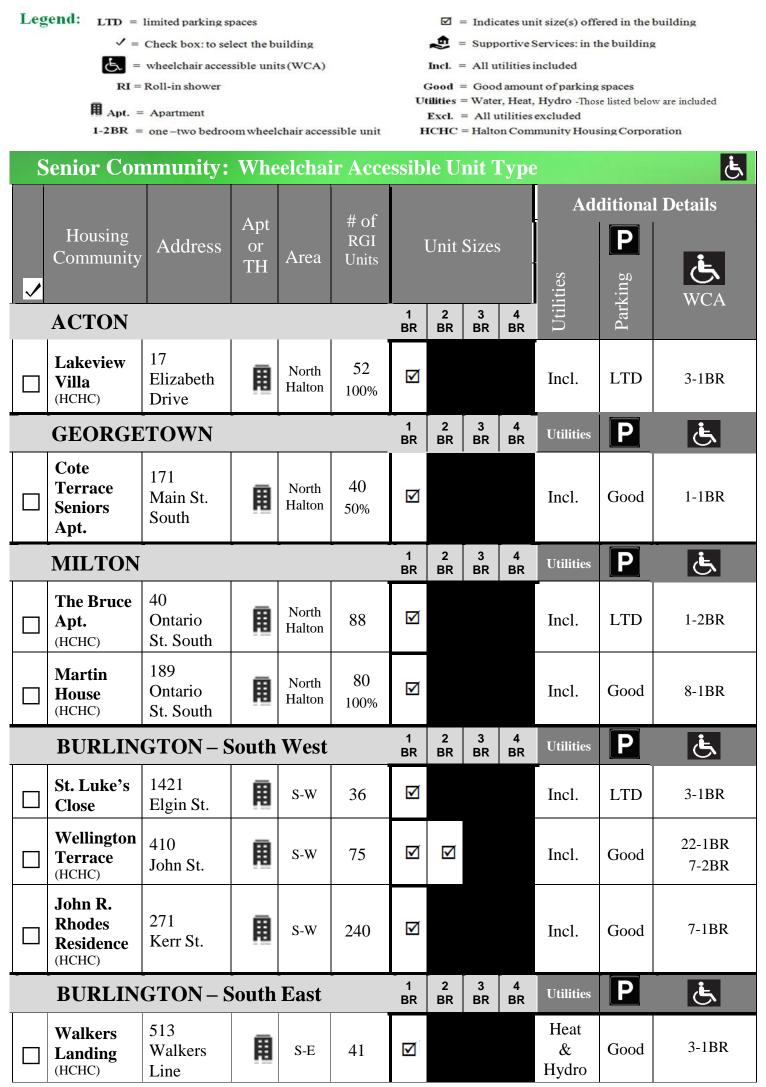


IMPORTANT

If one member of your household is 60+ you may select both All-age and Senior Community Type Building Selections

Senior: Regular units (pg.13-14), 🕓 units (pg.16) & 💐 units (pg.17), Rent Supplement (pg.18)

All-Age: Regular units (pg.19-26), 🕓 units (pg.26-28) & 💐 units (pg.29), Rent Supplement (pg.18)





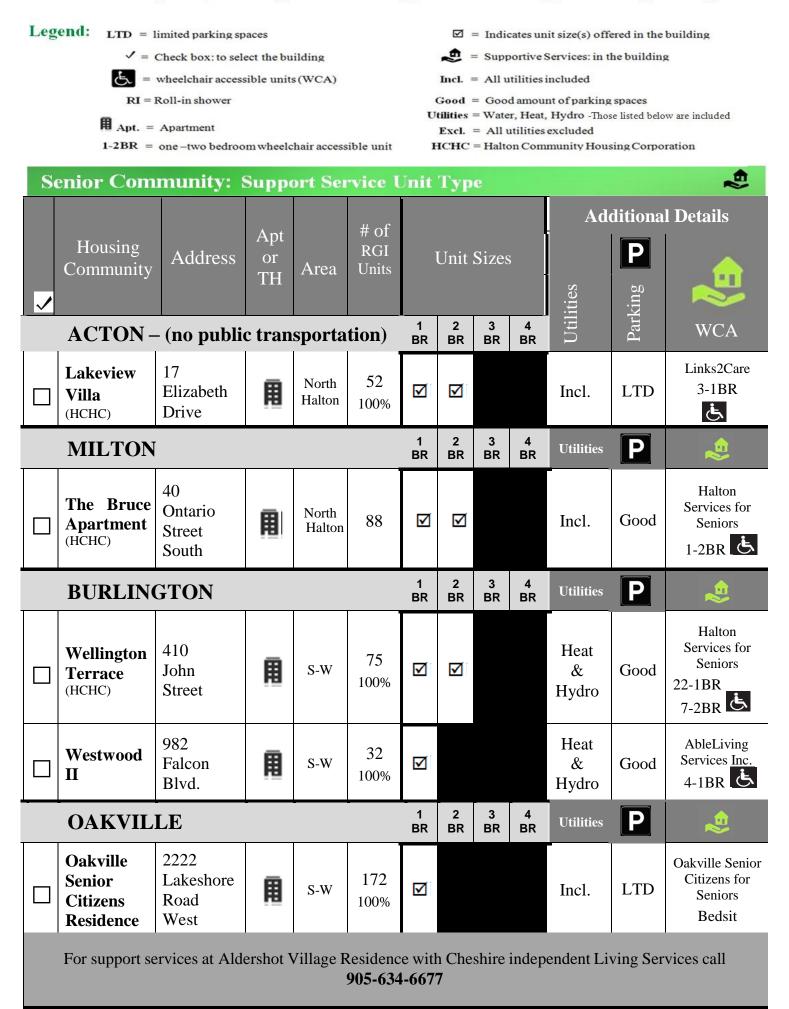


IMPORTANT

If one member of your household is 60+ you may select both All-age and Senior Community Type Building Selections

Senior: Regular units (pg.13-14), 🔄 units (pg.16) & 💩 units (pg.17), Rent Supplement (pg.18)

All-Age: Regular units (pg.19-26), 🕓 units (pg.26-28) & 🥏 units (pg.29), Rent Supplement (pg.18)







IMPORTANT

Rent Supplement Building Selections

Senior: Regular units (pg.13-14), 🔄 units (pg.16) & 💩 units (pg.17), Rent Supplement (pg.18)

All-Age: Regular units (pg.19-26), 🔄 units (pg.26-28) & 🥥 units (pg.29), Rent Supplement (pg.18)

Se	enior & All-Age Community: Rent Supplement Unit Type
	Unit Sizes
R	ENT SUPPLEMENT 1 2 3 4 BR BR BR BR
	IMPORTANT:
Ye	ou will be considered for the following Rent Supplement units offered in both the Community and Unit types you select below:
	und ome types you select below.
✓	Senior Community All-Age Community Both
	Various Rent Supplement regular and wheelchair accessible unit locations in Acton
	 Refusing an offer from the Rent Supplement Program <u>will</u> count as a refusal on your HATCH application. Please only select this housing option if you are able and willing to live in any area of Acton
Ė	Thease only select this nousing option in you are able and winning to rive in any area of Acton
	Various Rent Supplement regular and wheelchair accessible unit locations in Georgetown
	• Refusing an offer from the Rent Supplement Program <u>will</u> count as a refusal on your HATCH application.
ية	• Please only select this housing option if you are able and willing to live in any area of Georgetown
0	
	Various Rent Supplement regular and wheelchair accessible unit locations in Milton
	 Refusing an offer from the Rent Supplement Program <u>will</u> count as a refusal on your HATCH application.
	 Please only select this housing option if you are able and willing to live in any area of Milton
رفحه	
	Various Rent Supplement regular and wheelchair accessible unit locations in Burlington
	 Refusing an offer from the Rent Supplement Program <u>will</u> count as a refusal on your HATCH application.
Ė	• Please only select this housing option if you are able and willing to live in any area of Burlington
	Various Rent Supplement regular and wheelchair accessible unit locations in Oakville
	• Refusing an offer from the Rent Supplement Program <u>will</u> count as a refusal on your HATCH application.
فتح	• Please only select this housing option if you are able and willing to live in any area of Oakville
IM	PORTANT: all refusals of Rent Supplement offers of housing <u>will</u> count towards your legislated
	three offers of housing.



IMPORTANT:

Applicants younger than 65 may <u>only</u> select All-Age Community Building Selections All-Age: Regular units (pg.19-26), 🕓 units (pg.26-28) & 🗢 units (pg.29), Rent Supplement (pg.18)

- Co-op = Cooperative LTD = limited parking spaces
- 1.5 WR = One and a half bathrooms in unit
 - \mathcal{L} = wheelchair accessible units (WCA)
- 1-2BR = one-two bedroom wheelchair accessible unit
 - \square = Indicates unit size(s) offered in the building
 - $\mathbf{RI} = \mathbf{Roll} \cdot \mathbf{in}$ shower
 - Incl. = All utilities included
- $\mathbf{HCHC} = \mathbf{Halton}$ Community Housing Corporation
- Apt. = Apartment
- 🋍 TH = Townhouse
- 2 WR = Two bathrooms in unit
- Good = Good amount of parking spaces
 - \checkmark = Check box: to select the building
 - SS = Supportive Services: in the building
- Utilities = Water, Heat, Hydro
- **Excl.** = All utilities excluded

A	All-Age Community: Regular Unit Type												
✓	Housing Community	Address	Apt or TH	Area	# of RGI Units	Unit Sizes			Utilities	Parking d			
	ACTON -	1 BR	2 BR	3 BR	4 BR	Uti	Par	Other					
	Cobblehill Homes	53 Cook	Ħ	North	15					Heat	Good	paid parking open balcony no elevator	
	Co-op	Street	æ	Halton	10			1.5 WR	1.5 WR	Incl.	Good	paid parking	
	Braeside (HCHC)	46 Holmesway Place	æ	North Halton	12 100%	M				Incl.	LTD	free parking	
	Holmesway Place (HCHC)	10-44 Holmesway Place	÷	North Halton	18 100%				1.5 WR	Water & Heat	Good	free parking private driveway	
	MILTON					1 BR	2 BR	3 BR	4 BR	Utilities	Ρ	Other	
	Rotary	154 Bronte	Ħ	North	11					Water &	Good	free parking	
	Rotary Square	Bronte street, South	æ	Halton	9			1.5 WR	1.5 WR	& Heat	Good	private driveway	
	Harmony Court (HCHC)	111 Ontario Street, North	Ħ	North Halton	36 100%					Incl.	Good	free surface parking open balcony elevator	



IMPORTANT:

Applicants younger than 65 may <u>only</u> select All-Age Community Building Selections

All-Age: Regular units (pg.19-26), 🖪 units (pg.26-28) & 🧔 units (pg.29), Rent Supplement (pg.18)

A	Legend	LTD = lim 1.5 WR = One \blacksquare = who 1-2BR = one \blacksquare = Ind RI = Roll Incl. = All HCHC = Hal	ited parking e and a half eelchair acce e –two bedro icates unit s l-in shower utilities incl ton Commu	SS = Supportive Services: in the building Utilities = Water, Heat, Hydro Excl. = All utilities excluded								
✓			TH	Area	Units	1	2	3	4	Utilities	Parking	
	BURLING Walkers Fields (HCHC)	2300 Walkers Line		North	35	BR	BR	BR	BR	5 Excl.	Good	Other small backyard & free parking driveway
	The Manor	2039 Walkers Line	Ê	North	84		Ŋ	N		Hydro & Water	Good	paid underground parking 3bd- enclosed balcony 2bd-open balcony
	Driftwood Drive	3030 Driftwood Drive		North	44 100%		Ŋ	$\mathbf{\Sigma}$		Water	Good	small backyard & free parking driveway
	Tansley Park	4090 Millcroft Park		North	12			1.5 WR		Water	Good	free surface parking small backyard
	Van	1380		North	40		V	1.5 WR		Hydro &	Good	paid surface
	Norman Place	Guelph Line	≣	INOIUI	14		M			& Water	UUUU	parking no elevator
	Victoria Village	2461 Whittaker Drive		North	24			1.5 WR		Excl.	LTD	backyard free parking (driveway & surface)



IMPORTANT:

Applicants younger than 65 may <u>only</u> select All-Age Community Building Selections All-Age: Regular units (pg.19-26), 🖾 units (pg.26-28) & 💭 units (pg.29), Rent Supplement (pg.18)

Legend: o	Co-op = Cooperative
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 - \square = Indicates unit size(s) offered in the building
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 - Incl. = All utilities included
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- Apt. = Apartment
- TH = Townhouse
- 2 WR = Two bathrooms in unit
- Good = Good amount of parking spaces
- \checkmark = Check box: to select the building
- SS = Supportive Services: in the building
- Utilities = Water, Heat, Hydro
- Excl. = All utilities excluded

A	All-Age Community: Regular Unit Type												
✓	Housing Community	Address	Apt or TH	Area	# of RGI Units	Unit Sizes			Utilities	Parking d			
	BURLING		1 BR	2 BR	3 BR	4 BR	Util	Parl	Other				
	Don Quixote Co-op	1315 Maple Crossing Blvd.		S-W	41		1.5 WR	1.5 WR	1.5 WR	Excl.	Good	small backyard free parking driveway	
	Maple Crossing (HCHC)	1300 Maple Crossing Blvd.		S-W	60			1.5 WR	1.5 WR	Excl.	Good	small backyard free parking driveway	
	Nelson Co-op	28A-1026 Glendor Avenue		S-W	90			1.5 WR		Incl.	Good	small backyard free parking driveway	
	Brant Court Apartment (HCHC)	708-710 Brant Street	IIII.	S-W	16 100%					Incl.	Very LTD	free surface parking no elevator (12) 1BR & (4) bachelor units	
	STOA Co-op	456 Brock Avenue	I	S-W	49	Ŋ	Ŋ	N		Heat & Hydro	Good	free underground parking open balcony or patios elevator	



IMPORTANT:

Applicants younger than 65 may only select All-Age Community Building Selections

All-Age: Regular units (pg.19-26), 🖾 units (pg.26-28) & Inits (pg.29), Rent Supplement (pg.18)

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- 1.5 WR = One and a half bathrooms in unit
 - = wheelchair accessible units (WCA)
- 1-2BR = one-two bedroom wheelchair accessible unit
 - \square = Indicates unit size(s) offered in the building
 - $\mathbf{RI} =$ Roll-in shower
- Incl. = All utilities included
- $\mathbf{HCHC}=\mathbf{H}alton\,\mathbf{C}ommunity\,\mathbf{H}ousing\,\mathbf{C}orporation$
- Apt. = Apartment
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A	All-Age Community: Regular Unit Type											
~	Housing Community	Address	Apt or TH	Area	# of RGI Units		Unit Sizes			Utilities	Parking J	
	BURLING	GTON Cor	nt			1 BR	2 BR	3 BR	4 BR	Util	Parl	Other
	Westwood II	982 Falcon Blvd.	IIII.	S-W	37					Water	Good	Water, fridge, stove, washer/dryer , dishwasher in unit included in rent
	Burloak Drive (HCHC)	254 & 360 Burloak Drive	B	S-E	54 100%				1.5 WR	Heat & Hydro	LTD	small backyard free parking
	Walkers Landing (HCHC)	515 Walkers line & 4105 Longmoor Drive		S-E	46/46			1.5 WR		Excl.	Good	small backyard free parking driveway
	OAKVILI	LE				1 BR	2 BR	3 BR	4 BR	Utilities	Ρ	Other
	Golden Briar Heights (HCHC)	2250 Golden Briar Trail	÷	N-E	77		Ø	Ø		Excl.	Good	free surface parking small backyard
	Elm Road (HCHC)	1478-1494 Elm Road	B)	N-E	54 100%				1.5 WR	Incl.	Good	free surface parking



IMPORTANT:

Applicants younger than 65 may <u>only</u> select All-Age Community Building Selections All-Age: Regular units (pg.19-26), 🕒 units (pg.26-28) & 🥏 units (pg.29), Rent Supplement (pg.18)

Legend	:
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- Co-op = Cooperative LTD = limited parking spaces
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- **1-2BR** = one -two bedroom wheelchair accessible unit ☑ = Indicates unit size(s) offered in the building
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Α	All-Age Community: Regular Unit Type												
✓	Housing Community	Address	Apt or TH	Area	# of RGI Units	1	Unit	Sizes		Utilities Parking J			
1	OAKVILI	LE Cont			1 BR	2 BR	3 BR	4 BR	Uti	Paı	Other		
	Donaghey Square (HCHC)	1531 Sixth Line	÷	N-E	27			1.5 WR	1.5 WR	Excl.	LTD	small backyard free surface parking	
	Interfaith Homes	Rimmington Drive various units	÷	N-E	57				1.5 WR	Excl.	Good	free surface parking driveway small backyard	
	Birch Glen Co-op	1160 Dorval Drive		N-W	101					Incl.	Good	paid underground parking & enclosed balcony elevator	
	Glen Oaks Co-op	1180 Dorval Drive	I	N-W	84	N		N		Incl.	Good	paid underground parking & enclosed balcony elevator	
	The Abbeyview (HCHC)	1150 Dorval Drive		N-W	29					Incl.	Good	paid underground parking & enclosed balcony elevator	
	Brays Lane (HCHC)	2299 Bray's Lane		N-W	45					Excl.	Good	paid surface driveway	

IMPORTANT:

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All-Age: Regular units (pg.19-26), 🔄 units (pg.26-28) & 💐 units (pg.29), Rent Supplement (pg.18)

Legend: Co-op = Cooperative

- LTD = limited parking spaces
- 1.5 WR = One and a half bathrooms in unit
 - $\underbrace{ }_{ } =$ wheelchair accessible units (WCA)
- 1-2BR = one-two bedroom wheelchair accessible unit
 - Indicates unit size(s) offered in the building
 RI = Roll-in shower
 - Incl. = All utilities included
- HCHC = Halton Community Housing Corporation
- Apt. = Apartment
- **TH** = Townhouse
- 2 WR = Two bathrooms in unit
- Good = Good amount of parking spaces
 - \checkmark = Check box: to select the building
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- Utilities = Water, Heat, Hydro
- Excl. = All utilities excluded

Α	All-Age Community: Regular Unit Type												
✓	Housing Community		Apt or TH	Area	# of RGI Units	1	Unit 2	Sizes	4	Utilities Parking d			
-	OAKVILI	LE Cont	•			BR	BR	BR	BR	Ŋ	P	Other	
	Glen Valley Place (HCHC)	1220 Glen Valley Road	÷	N-W	45			Ŋ		Excl.	Good	small backyard paid parking driveway	
	The Oaklands	2021 Merchants Gate		N-W	88					Excl.	Good	paid underground /surface parking & open balcony elevator	
	Margaret Drive (HCHC)	287-359 Margaret Drive	ŝ	S-W	48 100%				1.5 WR	Incl.	Good	small backyard free surface parking	
	Maurice	284-320	Ħ		16 100%			Q				surface parking no elevator	
	Maurice Drive (HCHC)	284-320 Maurice Drive		S-W	44 100%			1.5 WR	1.5 WR	Incl.	Good	surface parking detached, semi- detached & row TH	
	Prince Charles Place	111 Prince Charles Drive	Ħ	S-W	43			1.5 WR		Excl.	Good	free parking driveway & surface lot	



IMPORTANT:

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A	Legend:	1-2BR = one- ☑ = India RI = Roll- Incl. = All u HCHC = Halta	ed parking s and a half bi clchair acces -two bedroo cates unit siz in shower tilities inclu on Commun	athrooms in u sible units (W m wheelchain e(s) offered i ided ity Housing C	VCA) r accessible u n the building Corporation	الله على المراجع المراجع مراجع المراجع ال مراجع المراجع ال مراجع المراجع ا	$\mathbf{TH} = \mathbf{Tc}$ $\mathbf{VR} = \mathbf{Tv}$ $\mathbf{od} = \mathbf{Gc}$ $\mathbf{V} = \mathbf{Cl}$ $\mathbf{SS} = \mathbf{St}$ $\mathbf{ties} = \mathbf{W}$	heck box	ooms in u ant of par : to select : Services t, Hydro	king spaces the building tin the buildir	g	
	Housing Community	Address	Apt or TH	Area	# of RGI Units		Unit	Sizes	5	Utilities	Parking J	
	OAKVILI	LE Cont	•			1 BR	2 BR	3 BR	4 BR	Util	Par	Other
	Sheridan Woods (HCHC)	2301 Sheridan Garden Drive	÷	S-E	35					Excl.	Good	free driveway & surface parking
	Mariposa Co-op	1150 Gable Drive	Ħ	S-E	23			1.5 WR		Excl.	Good	free parking driveway



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	Legend	$LTD = \lim_{x \to 0} 1.5 \text{ WR} = 0 \text{ In } 0$ $U = 0 \text{ In } 0$ $U = 1 \text{ In } 0$	operative ited parking e and a half eelchair acc e –two bedru licates unit s 1-in shower utilities inc	g spaces bathrooms in essible units (oom wheelcha size(s) offered	unit WCA) hir accessible l in the buildi	ling SS = Supportive Services: in the building Utilities = Water, Heat, Hydro Excl. = All utilities excluded							
A	All-Age Co	ommunity	: Wh	eelcha	ir Acc	essi	ble l	U nit	Typ	e		لى	
✓	Housing Community Address Apt TH Area # of RGI Units							Sizes	5	Utilities	Parking d	یک WCA	
	ACTON – (no public transportation)						2 BR	3 BR	4 BR	Util	Parl		
	Cobblehill Homes Co-op	53 Cook Street	Ħ	North Halton	15		Ŋ			Heat	Good	1-2BR 1-3BR	
	MILTON	[1 BR	2 BR	3 BR	4 BR	Utilities	Ρ	Other	
	Rotary Square	154 Bronte Street, South	Ħ	North Halton	11		A			Incl.	LTD	1-2BR	
	Harmony Court (HCHC)	111 Ontario Street, North	Ħ	North Halton	36					Incl.	Good	1-1BR	
	BURLIN	GTON				1 BR	2 BR	3 BR	4 BR	Utilities	Ρ	Other	
	Walkers Fields (HCHC)	2300 Walkers Line	æ	North	35		N			Excl.	Good	2-2BR	
	The Manor	2039 Walkers Line		North	84			V		Hydro & Water	Good	6-3BR	



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2-3BR

&

2-3BR

**** ALL-AGE APPLICANT

IMPORTANT:

Walkers

Longmoor Drive

Æ۵

S-E

Line &

4105

Walkers

Landing

(HCHC)

Applicants younger than 65 may only select All-Age Community Building Selections All-Age: Regular units (pg.19-26), 🛃 units (pg.26-28) & 🥏 units (pg.29), Rent Supplement (pg.18)

	Legen	LTD = Ii 1.5 WR = C U = W 1-2BR = o U = Ii RI = R Incl. = A	mited parki one and a ha wheelchair ac ne –two bec ndicates uni oll-in show all utilities in	lf bathrooms ccessible unit droom wheelc t size(s) offer er	ts (WCA) hair accessib ed in the buil	le unit ding U	✓ = SS = Utilities =	Townha Two ba Good at Check Suppor	ouse throoms mount of box: to se tive Serv Heat, Hyd	parking spaces elect the buildin ices: in the bui dro	ng	
A	All-Age Co	mmunity	: Wh	eelcha	ir Acc	essi	ble U	U nit	Тур	e		فع
✓	Housing Community	Address	Apt or TH	Area	# of RGI Units		Unit	Sizes	5	Utilities	Parking d	E WCA
	BURLIN	GTON				1 BR	2 BR	3 BR	4 BR	Util	Parl	
	Driftwood Drive	3030 Driftwood Drive	Å	North	44			V		Water	Good	1-2BR 1-3BR
	Tansley Park	4090 Millcroft Park		North	12		V			Excl.	Good	1-2BR
	Van Norman Place	1380 Guelph Line	Ħ	North	54		V			Heat & Water	Good	3-1BR RI 1-2BR
	Don Quixote Co-op	1315 Maple Crossing Blvd.		S-W	41		1.5 WR			Excl.	Good	1-2BR 1-3BR
	Maple Crossing (HCHC)	1300 Maple Crossing Blvd.		S-W	60					Excl.	Good	2-2BR
	Nelson Co-op	28A-1026 Glendor Avenue	Æ	S-W	90		N	V		Incl.	Good	1-2BR 1-3BR
	STOA Co-op	456 Brock Avenue	₿	S-W	49		V			Heat & Hydro	Good	3-1BR 3-1BR RI 3-2BR
		515										2-3BR

<u>27</u> * Any offer of housing you refuse will count towards your three legislated offers of housing.

46/46

 $\mathbf{\nabla}$

1.5 WR

Excl.

Good

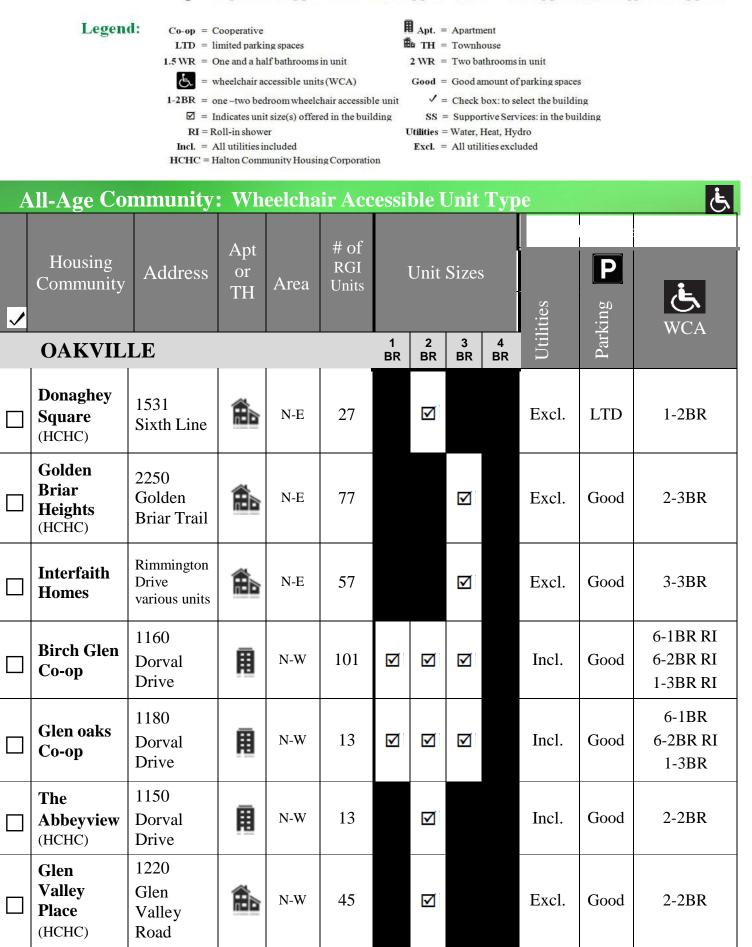
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Applicants younger than 65 may only select All-Age Community Building Selections

All-Age: Regular units (pg.19-26), 🛃 units (pg.26-28) & 🥥 units (pg.29), Rent Supplement (pg.18)





IMPORTANT:

Applicants younger than 65 may only select All-Age Community Building Selections

All-Age: Regular units (pg.19-26), 🖪 units (pg.26-28) & 🧔 units (pg.29), Rent Supplement (pg.18)



All-Age Community: Wheelchair Accessible Unit Type									j.			
	Housing Community	Address	Apt or TH	Area	# of RGI Units	Unit Sizes		Utilities	Parking d	E WCA		
OAKVILLE Cont			•		1 BR	2 BR	3 BR	4 BR	Util	Parl		
	The Oaklands	2021 Merchants Gate		N-W	88	\mathbf{N}	V	M		Incl.	Good	4-1BR 2-2BR 1-3BR
	Prince Charles Place	111 Prince Charles Drive	Ħ	S-W	43					Water	Good	4-2BR
	Sheridan Woods (HCHC)	2301 Sheridan Garden Drive		S-W	35					Excl.	Good	1-2BR
	Jean & Howard Caine Apartment	259 Robinson Street	≣	S-E	58 All					Incl.	Good	50-1BR RI 8-2BR RI

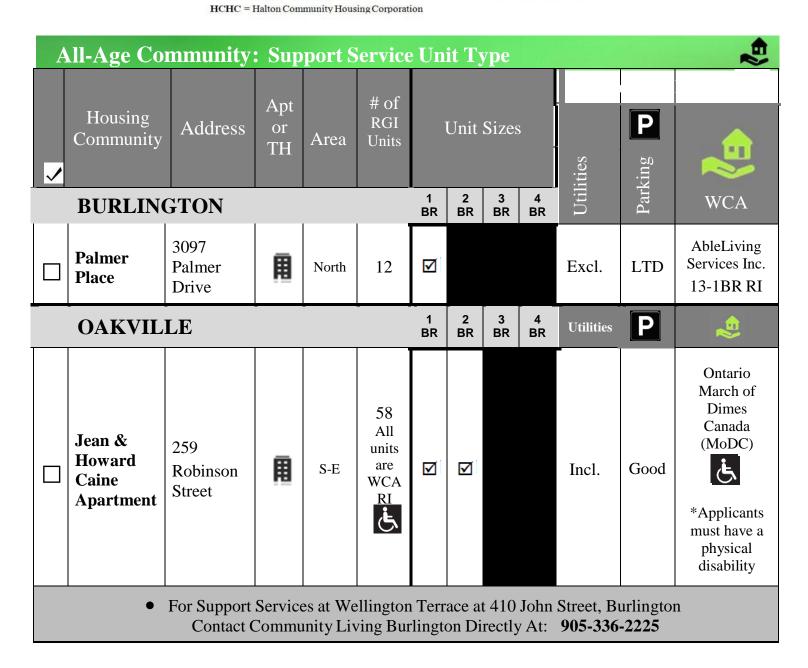


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IMPORTANT:

Applicants younger than 65 may <u>only</u> select All-Age Community Building Selections

All-Age: Regular units (pg.19-26), 🛃 units (pg.26-28) & Inits (pg.29), Rent Supplement (pg.18) Legend: Apt. = Apartment Co-op = Cooperative TH = Townhouse LTD = limited parking spaces 1.5 WR = One and a half bathrooms in unit 2 WR = Two bathrooms in unit = wheelchair accessible units (WCA) Good = Good amount of parking spaces 1-2BR = one-two bedroom wheelchair accessible unit \checkmark = Check box: to select the building \square = Indicates unit size(s) offered in the building SS = Supportive Services: in the building RI = Roll-in shower Utilities = Water, Heat, Hydro Incl. = All utilities included Excl. = All utilities excluded



SECTION 8 – DECLARATION AND CONSENT

You are required to sign this form as a part of your HATCH application. By signing this form you are providing Halton Region with the following: (1) your acknowledgement that Halton Region is collecting your information for the purposes of determining your eligibility to be active on the Halton Access to Community Housing (HATCH) wait list for rent-geared-to-income (RGI) housing; (2) your consent for Halton Region to share your information with other government agencies to determine/verify your eligibility for their programs; and (3) your solemn declaration to Halton Region that all the information you have provided in your HATCH application is true, that you are in Canada legally, and that you understand your responsibilities regarding your HATCH and RGI eligibility.

Please read this form carefully and sign in the space(s) provided below.

All people 16 years of age and older who are going to live with you must sign this form.

1. Notice of Collection of Information

- I acknowledge that Halton Region and the housing providers to whom I will be applying are authorized to collect personal information on this form in accordance with section 13 of the *Housing Services Act*, *2011* and that the information will be used to determine eligibility for rent-geared-to income (RGI) and/or Special Needs Housing. Any questions about the collection of my personal information should be directed to the Manager, Housing Services, 690 Dorval Drive, 7th Floor, Oakville ON L6K 3X9, 905 825-6000, or toll free 1-866-442-5866, TTY 905 827-9833.
- I acknowledge that HATCH will use the information I give them for the following specific purposes:
 - To find out if I qualify for an RGI subsidy and the housing that I have applied for;
 - To find out if I continue to qualify for RGI assistance and/or special needs housing;
 - To find out how much assistance I am eligible to receive;
 - For statistical reporting and policy research;
 - Referrals to appropriate internal agencies.

2. Consent to Share Your Information

- I allow Halton Region 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*, 2011 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 *Housing Services Act*, 2011, the Ontario Works Act, 1997, the Ontario Disability Support Program Act, 1997 or the Day Nurseries Act, 1990.
- I consent to Halton Region giving my personal information to government agencies that enforce the *Income Tax Act* and/or the *Immigration and Refugee Protection Act*.
- I understand that all information I provide to Halton Region will be given to all housing providers I apply to, as well as appropriate internal agencies.

3. Declaration

I solemnly declare the following:

- Everything I have written in this application is true, correct and complete.
- I understand that if information on this application is missing, incorrect or false, Halton Region or the Housing Providers I have applied to may request additional information or may cancel my RGI housing application.
- I understand that only the people I have listed on this application form may live with me in (RGI) housing.
- I am in Canada legally.

- I understand that I must make arrangements to pay all money I owe to any social housing provider prior to my application being placed on the HATCH wait list, and to provide verification to HATCH.
- I understand that I must report any changes to the information on this application directly to HATCH immediately which includes changes to my phone number, address, email address, income, and status in Canada or family composition.
- I understand that if I fail to respond to correspondence from HATCH or fail to provide required documentation to HATCH, my RGI housing application may be cancelled.
- I understand that it is an offence under the Housing Services Act, 2011 for an applicant or any individual to knowingly obtain or assist a household member to obtain RGI assistance for which they are not entitled. Such an offence carries up to a \$5,000 fine or up to six months imprisonment, as well as a prohibition from re-applying for assistance for a minimum period of two years.

Two-way Consent 4.

	Ι		give	/e						
	App	licant Full Name		Professionals Full Name						
	from	ne agency or company where the Profe								
	Name of the	e agency or company where the Profe	essional named above works	med above works						
	with HATCH re	garding any and all	issues pertainin	pertaining to my RGI housing application						
	and my applica	tion for	ou have applied for with HA	priority with HATCH.						
	Communication	may occur for a peri	od of \square 6 Mon	hs □1 Year □	other					
	Signature		Print	Print Name						
	Date:									
	gn where appropria	-			16 years of age and olde					
	Appl	icant		Co	o-Applicant					
	Appl	icant Print Name		Co	Print Name					
1 Sign Date	ature		2							
1 Date	ature		2	gnature te:						
1	ature ::		2 D	gnature .te: ss						

Signatures of other household members 16 years of age or older:

	Household Member						
2	Signature	Print Name					
3	Date:						
Wi	Witness						
Signature		Print Name					
Dat	e:						

	Household Member							
	Signature	Print Name						
4	Date:							
Wi	Witness							
Sig	nature	Print Name						
Date	e:							

Signatures of other household members 16 years of age or older:

Household Member				Household Member				
5	Signature Date:	Print Name		6	Signature Date:	Print Name		
Witness			Witness					
Signature		Print Name		Signature		Print Name		
Date:				Date:				