



## Instructions and Checklist

You must complete this form and the attached Consent for the Collection, Use and Disclosure of Personal Information form to be eligible for rent-geared-to-income (RGI) or modified housing.

**You must complete all sections of this form. Mark any sections not applicable to you with 'N/A.'**

**Do not disassemble the form. Attach all supporting material at the back of the review package.**

**You, your spouse (if applicable), and all other people who live with you, who are 18 years of age and older and not full-time students, must read and sign:**

- Section 6 of this Eligibility Review package ("Declaration")
- Section 7 of this Eligibility Review package ("Consent for the Collection, Use and Disclosure of Personal Information")

**You must include the following information when you return your eligibility forms:**

1. **Last year's Proof of Income Statement or Notice of Assessment (NOA)** from the Canada Revenue Agency for you, your spouse (if applicable), and anyone else you live with who is 18 years of age or older and not a full-time student. See the attached information page about how to get a Proof of Income Statement.
2. **Proof of current income** if the net income on your Proof of Income Statement or NOA is different from your current gross income by 20% or more. (*You still have to provide a Proof of Income Statement or NOA.*)
3. **Current Statement of Assistance from Ontario Works or ODSP**, showing the amount of your social assistance and the names of everyone in your benefit unit (if you receive social assistance).
4. **Proof of school enrolment** for all full-time students who are 18 years of age or older and earning income that would normally be included in the RGI calculation, e.g., employment income. (*Educational funding such as OSAP is excluded income.*) If you need to provide proof, you may submit:
  - *Ontario Student Assistance Program (OSAP) statement or letter from the school registrar showing the percentage of a full course load that the student is taking. (Note that if you are an ODSP recipient, 40% represents a full-time course-load.)*
5. **Proof of assets** if the total value of your assets is more than \$30,000 or if you have had a large change in the value of your assets or you have disposed of any assets in the last 12 months.
  - *Bank statements showing current balance*
  - *Financial statements for investments (e.g., GICs, term deposits, mutual funds, shares, RRSPs)*
  - *Statement of the cash surrender value of any life insurance policy*
  - *Most recent property appraisal and most recent mortgage statement for real property*
6. A current letter from Immigration, Refugees and Citizenship Canada (IRCC) showing proof of status in Canada for anyone who is not a Canadian Citizen or Permanent Resident.



### Section 1: Primary Tenant

<input type="text" value="Last Name"/>	<input type="text" value="First Name"/>
<input type="text" value="Address"/>	<input type="text" value="City &amp; Province"/>
<input type="text" value="Date of Birth (mm/dd/yyyy)"/>	<input type="text" value="Gender"/>
<input type="text" value="Social Insurance #"/>	Full-time student? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="text" value="Home Phone #"/>	<input type="text" value="Work Phone #"/>
<input type="text" value="Cell Phone #"/>	<input type="text" value="Email address:"/>

If you live in a modified unit or receive support services, do you still require modifications and supports?       Yes       No       Not applicable

### Section 2: Other Household Members

Please provide information about all adults and children who live with you.

First Name	Last Name	Relationship	Date of Birth <small>mm/dd/yyyy</small>	Gender	Full-Time Student?

Has anyone moved in or out of your unit in the last 12 months?       Yes       No

If Yes, please provide details, including the name of the person, their date of birth, their relationship to you, and the date they moved in or out of the unit.



### Section 3: Income Information

On the next page in the section provided, list ALL money received by you or anyone living with you. This may include:

- Employment (full time, part time, casual)
- Self-employment or business income (Please include the name of your business and the nature of your work)
- Ontario Works (OW)
- Ontario Disability Support Program (ODSP)
- Employment Insurance (EI)
- Workplace Safety Insurance Board (WSIB)
- Old Age Security and Guaranteed Income Supplements (OAS/GIS/GAINS)
- Canada Pension Plan (CPP) and other pensions (e.g. company, private, foreign, military)
- Retirement Income Fund (RIF) draws or payments
- Life Income Fund (LIF) draws or payments
- Investment income (e.g., interest/dividends)
- Spousal support / Alimony (FRO statement)

**You must provide the most recent Proof of Income Statement OR Notice of Assessment (NOA) for you, your spouse (if applicable), and all other people with income listed below who are not full-time students listed in Section 2.**

**If you receive Ontario Works or ODSP, you must provide your Statement of Assistance, showing the amount of your social assistance and the names of everyone in your benefit unit.**

**If your income has changed in the last 12 months or if the income declared below is different from the net income amount on your Proof of Income Statement or NOA by 20% or more, please provide current proof of income, in addition to the Proof of Income Statement or NOA. For example:**

- Pay stubs or letter from employer showing gross income
- Service Canada statements for OAS, GIS, CPP (1-800-277-9914) or Employment Insurance (1-800-206-7218)
- Statements of gross income for WSIB, private pensions, insurance benefits or any other income.



### Section 3 – Income Information

List ALL income / money received by you or anyone living with you:

Name of Person with Income	Type of Income	Monthly GROSS Income (income before deductions)	Proof of Income Statement or NOA attached?

Have you received any Registered Disability Savings Plan (RDSP) payments in the last 12 months?  
 Yes       No

Is anyone in your household self-employed? If Yes, please provide the name and nature of the business below and submit a completed Self-Employment form with your package (please contact us to request a copy of the form).  
 Yes       No

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### Section 4: Asset Information

In the section provided below, list ALL assets owned by you or anyone living with you. Assets may include:

- Bank accounts, tax free savings accounts
- Life Insurance (cash surrender value)
- Term deposits, guaranteed investment certificates (GIC), savings bonds
- Collections or valuables, cash (over \$1,000)
- Registered Retirement Savings Plans (RRSP), Registered Retirement Income Funds (RRIF), Registered Disability Savings Plans (RDSP)
- Business assets (if you own your own business or are self-employed)
- Registered Education Savings Plans (RESP)
- Loans to another person
- Stocks, shares, mutual funds and any other funds invested
- Real property

List ALL assets owned by you or anyone living with you:

Person who owns the asset	Details of Asset (Type, account number, name of bank)	Value or Account Balance

Have you disposed of any assets in the last 12 months? If Yes, provide details:  Yes  No



### Section 4: Asset Information, Continued

Have you had any new assets in the last 12 months? If Yes, provide details:  Yes  No

Does anyone own property (e.g., house, cottage, trailer, etc.) **suitable for year round occupancy**? If Yes, provide details:  Yes  No

**You must provide proof if you answered 'Yes' to any of the above questions.**

**You must provide proof of ALL assets if the total value of your assets is more than \$30,000.**



### Section 5: Status in Canada

Is everyone in your household either a Canadian citizen or permanent Resident?  Yes  No

If no, please provide details of their status in Canada:

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You must provide an up-to-date letter from Immigration, Refugees and Citizenship Canada (IRCC) stating the current status in Canada of everyone in your household who is not a Canadian citizen or permanent resident.



**Section 6: Declaration**

1. I declare that all information given for this review is true to the best of my knowledge and that I have not withheld or left out any required information.
2. I understand that the household not allowed to receive rent subsidy that the household is not eligible for. The household may be required to pay back any subsidy it incorrectly receives. If it is found that the household did not provide the correct information, it may lose its eligibility for subsidy.
3. I declare that no member of my household is currently under a removal order to leave Canada.
4. If any of the following changes occur, I will inform my housing provider in writing, and provide proof of the reported changes, within 30 calendar days of the date that the change(s) occurred:
  - Someone moves in or moves out of my unit
  - A member of my household starts or stops full-time student attendance at school
  - A member of my household starts or stops receiving Ontario Works or ODSP
  - A member of my household who is also receiving Ontario Works or ODSP experiences a permanent increase to their non-benefit income
  - A member of my household has their Income taxes re-assessed
  - A member of my household has a Change of status in Canada
  - A member of my household experiences a large change in the value of assets, including disposal of any assets
  - The entire household plans to be or has been absent from the unit for longer than 60 consecutive days or 90 days in a 12-month period
5. I will complete my income tax return annually and on time and will advise if my income tax return is re-assessed.
6. I understand that the information given for this application may be used for the purpose of making decisions or verifying eligibility for assistance under Municipal Freedom of Information and Protection of Privacy Act, 1990, 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.

**Name** \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Name** \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Name** \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Name** \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_





## Section 7: Consent for the Collection, Use and Disclosure of Personal Information

The *Housing Services Act, 2011* allows Victor Davis Memorial Court Non-Profit Homes Inc. to collect personal information in order to provide housing and homelessness services.

Personal Information includes recorded information about me including but not limited to personal address, telephone number or email, identifying number assigned to me, SIN, income, credit history, subsidy, arrears, personal circumstances, health, conflicts between tenants, requests for transfers for personal reasons and any requests from tenants that are personal in nature.

I understand that I will need to provide personal information to see if I am eligible to receive a rent subsidy or a modified housing unit.

I confirm that the personal information that I have provided for my Eligibility Review application is correct and true to the best of my knowledge.

1. Victor Davis Memorial Court Non-Profit Homes Inc. will use the information I provide for the following purposes:
  - to find out if I am eligible for rent subsidy and/or modified housing
  - to find out how much subsidy I will receive
  
2. I understand that Victor Davis Memorial Court Non-Profit Homes Inc. may need to share my personal information. I agree that my personal information may be shared with any or all of the following:
  - any department of the County of Wellington, including:
    - Ontario Works
    - Children's Early Years
    - Housing Services
  - the Ontario Disability Support Program (ODSP)
  - any Ministry of the Government of Ontario
  - Government of Canada
  - any other provincial or territorial government
  - any other party as applicable by law
  
3. I agree and confirm that:
  - Victor Davis Memorial Court Non-Profit Homes Inc. is allowed to have access to all personal information including about all income or any bank accounts or any other assets that I own either by myself or with other persons. This includes any bank accounts or assets that I hold for any children or dependents in my care.



Annual Eligibility Review  
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- Inquiries about my personal information may be made electronically and I may receive notices and documents by email at the email addresses provided in my application.

4. All personal information created, held or collected by the Victor Davis Memorial Court Non-Profit Homes Inc. is protected under PIPEDA. For questions regarding this collection of information, contact Victor Davis Memorial Court Non-Profit Homes Inc. at 519.821.7518.

**Household Address:** \_\_\_\_\_

**Full names of all persons signing this document (please print):**

\_\_\_\_\_

\_\_\_\_\_

All those named above to please sign and date below **and include a witness signature** (another adult member of the household may serve as a witness):

X	X	X
_____ Signature	_____ Date	_____ Witness signature

X	X	X
_____ Signature	_____ Date	_____ Witness signature

X	X	X
_____ Signature	_____ Date	_____ Witness signature

X	X	X
_____ Signature	_____ Date	_____ Witness signature



## Section 8: Proof of Insurance

### Tenant / Renter's Insurance

Each household must provide a copy of its active certificate of insurance which must include name(s) of insured, address of insured, name of insurer, policy number and insurance term (effective and expiry dates).

### Vehicle Insurance

For each vehicle in the household that has an assigned parking space on the property, please provide a copy of your insurance slip (pink slip).

### Insurance Changes & Renewals

Insurance changes and renewals must be submitted to the office with 10 days of the date that the change occurred.

Insurance proof documents can be emailed to [office@victordavishomes.ca](mailto:office@victordavishomes.ca) or dropped-off using the office's mail slot.

Please contact us if you have any questions.