



For Registry Office Use Only

Date:

Version française disponible.

## 1. Market to RGI Criteria

To be eligible for a Market to RGI local priority, you must meet **all** of the following conditions:

- The unit in which you are applying for RGI assistance meets the local occupancy standards.
  - You have resided with your current housing provider for a minimum of one year and move-in, have been a market rent tenant.
  - Your household has experienced a decrease in income, by no fault of your own, since moving into your current housing.
- Please note that your housing provider will have to confirm with The Registry that you meet these criteria.

## 2. Eligibility Rules

To be eligible for subsidized housing, you must meet **all** of the following conditions:

- All members of the household are legal residents of Canada or refugee claimants. You must provide proof of residency (i.e. birth certificate, immigration documents, etc.)
- No member of the household is currently under a deportation, departure or exclusion order to leave Canada.
- At least 1 person in your household must be 16 years of age and older.
- No member of the household owes money to any social housing provider.
- No member of the household has been convicted of an offence in relation to rent-geared-to-income assistance or found by a court of law or the Landlord and Tenant Board to have misrepresented their income for the purpose of rent-geared-to-income assistance.
- 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.
- You must be able to live independently, and make your own arrangements for support services.

## 3. Household Information

Please provide information about **all the adults and children** who will live in the housing you are applying for. This section **must** be filled out. All household members **must report and provide proof** of their current income.

| Last Name | First Name | Date of Birth<br>yyyy-mm-dd | Sex<br>M/F | Relationship<br>to applicant | Monthly<br>Income | Source of Income<br>(work, pension,<br>welfare, etc.)<br>Proof required |
|-----------|------------|-----------------------------|------------|------------------------------|-------------------|---|
|           |            |                             |            | <i>Applicant</i>             |                   |   |
|           |            |                             |            |                              |                   |   |
|           |            |                             |            |                              |                   |   |
|           |            |                             |            |                              |                   |   |
|           |            |                             |            |                              |                   |   |
|           |            |                             |            |                              |                   |   |

Is a baby expected?      Yes      No      If Yes, date expected (yyyy-mm-dd):

### Present Address:

|  |             |                |                                       |                     |
|--|-------------|----------------|---------------------------------------|---------------------|
| Street No.   | Street Name | Apartment No.  | City / Province                       | Postal Code         |
| Social Insurance No. (Optional)  |             | Home Telephone | Work/ Daytime Telephone               |                     |
| Email Address:   |             |                |                                       |                     |
| Present Landlord / Social Housing Provider   |             |                | Number of bedrooms in current unit:   |                     |
| I am currently in a market rent unit and require a subsidy for this unit.      Yes      No |             |                |                                       |                     |
| Spoken language(s)   | English     | French         | Preferred language for correspondence | English      French |

### Other Information:

Here is your legal agreement with us. Please read it carefully, and sign in the space below.

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

**4. Release and Consent; Declaration**

**Release and Consent**

1. I understand that there are laws that allow The Registry, as agent for the City of Ottawa as Service Manager, to collect personal information about me.
2. I understand that The Registry will use the information I give them to see if I qualify for the housing I have applied for.
3. I allow The Registry to give the information on this form and any attachments to the social services offices, other municipal service managers or district social services administration boards, housing providers, or the Housing Services Corporation for former tenant arrears without further notice to me, if the information is necessary for the purpose of making decisions or verifying 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*.
4. I allow The Registry to give the information on this form and any attachments to the government of Canada, a department, ministry, or agency of it, without further notice to me if the information is necessary for the purpose of administering or enforcing the *Income Tax Act (Canada)* or the *Immigration Act*.
5. I allow The Registry to give the information on this form and any attachments to any government or body with whom The Registry has made an agreement under the *Housing Services Act, 2011*, without further notice to me, for the purpose of conducting research related to a social benefit program or social housing or rent-geared-to-income assistance program.
6. I understand that any information on this form and any attachment given by The Registry to a body listed above is confidential and will only be given in accordance with the *Housing Services Act, 2011* and associated regulations.

**Declaration**

1. I give my word that everything I have written in this application is correct and complete.
2. I understand that all information I give to The Registry, as agent for the City of Ottawa as Service Manager, will be retained by them and they will give my information to the housing providers I have chosen.
3. If something on this application is incorrect or not true, The Registry or the housing providers I have applied to may request additional information, may cancel my application or both and I may be prohibited from re-applying for assistance for a minimum period of two years under the *Housing Services Act, 2011*.
4. I understand that only the people I have listed on this application form may live with me in subsidized housing.
5. I understand that The Registry will use the information I give them to see if I qualify for the housing I have applied for, to see if I continue to qualify for rent-geared-to-income assistance and to see how much assistance I am eligible for.
6. I give my word that I am in Canada legally.
7. Before I can receive housing, I understand that I must pay back or make arrangements to pay any money I owe to any social housing provider.
8. I understand that I must report any changes to this information directly to The Registry.
9. I must update my application with The Registry at least once per year. **Failure to do so will result in the cancellation of your file.**

**“Personal information contained in this form or in attachments is collected by The Registry pursuant to the *Freedom of Information and Protection of Privacy Act (R.S.O. 1990 c. F.31)* or the *Municipal Freedom of Information and Protection of Privacy Act (R.S.O. 1990 c.M.56)*. This information may be used to determine eligibility for housing applied to, continuation of housing and may be used for the appropriate rent-geared-to-income charge.”**

**The Privacy Officer for The Registry is the Executive Director. Questions or concerns about the use of your personal information may be directed in writing to our office at 2197 Riverside, 5<sup>th</sup> Floor, Ottawa, K1H 1A9.**

Please sign here (include signature of all household members 16 years of age and older)

X X

X X

X X

Date (yyyy-mm-dd):