



99 Christie Lake Rd ~ Perth, ON ~ K7H 3C6

Phone: 613-267-4200 ext. 2402

Email: housingapplications@lanarkcounty.ca

Alternative Drop off locations:

43-C Lansdowne St~ Carleton Place, ON~ K7C 3S9

4 – 52 Abbott St N – Smiths Falls, ON – K7A 1W3

Rent–Geared–to–Income–Housing (RGI) Application

Eligibility Requirements

- The household must have a source of income.
- If minor children are listed on the application, we require verification of custody arrangements at the time of application.
- At least one member of the household must be 16 years of age or older and able to live independently.
- Each member of the household must be a Canadian citizen, a landed immigrant or have Refugee Claimant Status, with no outstanding deportation, departure, or exclusion order in effect.
- No member of the household has been convicted of misrepresenting their income to receive rent-geared-to-income assistance by the Landlord and Tenant Boards or a court of law in the past two years.

Document Checklist

These documents MUST be received before your application can be processed.

- Copy of Birth Certificate(s) or Passport(s) for all household members.
- Current Notice of Assessment for all household members.
- Custody Verification (if required) for example: CAS order, Child Tax Benefit Statement or notarized custody/separation agreement.

Emergency assistance is available in Lanark County by calling 613-267-4200 ext. 2402 between the hours of 8:30 am and 4:00 pm.

After hours assistance is provided by Victim Services by calling 613-206-1486.



Rent-Geared-to-Income Housing Application

Date Stamp: _____

Applicant #1 – Contact Information

Name: _____

Date of Birth (dd/mm/yyyy): _____
(Birth Certificate MUST be provided)

Status in Canada: Canadian Citizen Landed Immigrant Refugee Claimant

Street Address: _____
(Include street number and name)

Unit Number: _____ P.O. Box Number: _____

Town or City: _____ Province: _____ Postal Code: _____

Home Phone #: _____ Cell Phone #: _____

Email: _____

Please note that by providing your email address, you are consenting to the exchange of information via email between yourself and Lanark County Housing staff.

Applicant #2– Contact Information

Name: _____

Date of Birth (dd/mm/yyyy): _____
(Birth Certificate MUST be provided)

Status in Canada: Canadian Citizen Landed Immigrant Refugee Claimant

Street Address: _____
(Include street number and name)

Unit Number: _____ P.O. Box Number: _____

Town or City: _____ Province: _____ Postal Code: _____

Home Phone #: _____ Cell Phone #: _____

Email: _____

Please note that by providing your email address, you are consenting to the exchange of information via email between yourself and Lanark County Housing staff.

Other Members of the Household

Member #1

Name: _____
(first and last)

Gender: _____

Relationship: _____

Date of Birth (dd/mm/yyyy): _____
(Copy of birth certificate MUST be provided)

Member #2

Name: _____
(first and last)

Gender: _____

Relationship: _____

Date of Birth (dd/mm/yyyy): _____
(Copy of birth certificate MUST be provided)

Member #3

Name: _____
(first and last)

Gender: _____

Relationship: _____

Date of Birth (dd/mm/yyyy): _____
(Copy of birth certificate MUST be provided)

Member #4

Name: _____
(first and last)

Gender: _____

Relationship: _____

Date of Birth (dd/mm/yyyy): _____
(Copy of birth certificate MUST be provided)

Is any member of the household expecting a baby? Yes No

If YES, please provide expected due date: _____



Rent-Geared-to-Income Housing Application

INCOME

All sources of income *MUST* be reported. Please indicate source(s) of income for ALL member in the household and enter the amount(s) received per month. Child Tax Benefit and GST are not included as a source of income.

Please include a copy of the most recent Notice of Assessment.

<u>Source of Income</u>	<u>Member #1</u>	<u>Member #2</u>	<u>Member #3</u>
Ontario Disability Support Program (O.D.S.P)	\$ _____	\$ _____	\$ _____
Ontario Works (OW)	\$ _____	\$ _____	\$ _____
Employment (Full/Part Time)	\$ _____	\$ _____	\$ _____
Workplace Safety Insurance Board (W.S.I.B)	\$ _____	\$ _____	\$ _____
Old Age Security (O.A.S)	\$ _____	\$ _____	\$ _____
Canada Pension Plan (C.P.P)	\$ _____	\$ _____	\$ _____
Private Pensions	\$ _____	\$ _____	\$ _____
Student Grants	\$ _____	\$ _____	\$ _____
Other Income	\$ _____	\$ _____	\$ _____

<u>Assets</u> (Maximum of \$100,000)	<u>Member #1</u>	<u>Member #2</u>	<u>Member #3</u>
Bank, Trust Company, Credit Union (chequing and savings accounts)	\$ _____	\$ _____	\$ _____
Stocks, Bonds, Term Deposits, etc.	\$ _____	\$ _____	\$ _____
RRSP, Annuities	\$ _____	\$ _____	\$ _____
Other Assets (Properties, etc.)	\$ _____	\$ _____	\$ _____

It is important that you provide us with the most up-to-date information. When you are offered a unit, you will be required to provide proof of all household income and assets. If you do not meet the requirements, the offer will be withdrawn, and you will be removed from the waitlist.

Housing Information

1. Have any household members previously lived in subsidized housing in Ontario?

Yes No Member Names: _____

2. Do any members of the household owe arrears (unpaid rent, damages) to any Social Housing Provider in Ontario?

Yes No Housing Provider Name: _____

If YES, please provide proof of a repayment agreement that is in good standing.

3. Are all household members currently residing at the same address?

Yes No

4. Some units are not inclusive of utilities. Can utilities such as hydro and gas be put in a household members name?

Yes No

If NO, do not select any units that require utilities to be put in a tenant's name.

5. Do you own property that is suitable for year-round occupation?

Yes No

If YES, please submit a letter of opinion from a qualified professional as to the value of your property. If you are offered accommodations, you must agree to sell you property at fair market value within six months.

Special Priority

Special priority status is given to households who have a member who has been abused by someone who is or was living with her/him within the past 3 months OR is a victim of human trafficking. Written verification of abuse and completed SPP application from a trusted professional (*see SPP Application*) are required.

Do you intend to complete a request for Special Priority Status?

Yes No

If YES, please contact us at 613-267-4200 ext 2402, by email at housingapplications@lanarkcounty.ca for a Special Priority Application

Are we able to contact you at home?

Yes No

Accessibility

Do you require any of the following?

If **yes** to any of the following, please contact Lanark County Housing for a medical form to be completed by your physician (*this is a requirement for ground floor and accessible units*).

Ground Floor/Elevator? Yes No








Wheelchair accessibility? Yes No

Modified accessibility needs? Yes No

Other accessibility needs? Yes No

Please explain your accessibility requirements below:

Building Information Legend

 Heat not included. Heat account MUST be put in tenant's name	 Hydro not included. Hydro MUST be put in tenant's name
 Fridge and Stove not included	 No Pets
 No Smoking Unit(s)	 Elevator in building
 Accessible Unit	Note: content and liability insurance are mandatory for ALL units

Housing Providers

TCO Tayside Community & Residential Support Options	CCS Carebridge Community Support
LCHC Lanark County Housing Corporation	Private Rent Supplement provides units to applicants through special agreements with qualified private sector landlords

Housing Selection
















There are rules about the size of unit (number of bedrooms) that you can move into if your rent is subsidized. The largest unit size allows 1 bedroom per person (subject to custody); couples are expected to share a bedroom.

Please select your locations by checking the box beside the locations you would like to live.

Please choose carefully as you will only receive one offer before your name is removed from the waitlist.

- | | |
|--------------------------------------|----------------------------------------|
| <input type="checkbox"/> Bachelor | <input type="checkbox"/> Three Bedroom |
| <input type="checkbox"/> One Bedroom | <input type="checkbox"/> Four Bedroom |
| <input type="checkbox"/> Two Bedroom | <input type="checkbox"/> Five Bedroom |








Almonte

Address	Building Information	Bedrooms	Housing Provider
<input type="checkbox"/> 176 Roberts St		Bach, 1 Bed	LCHC
<input type="checkbox"/> Victoria/St. James	  	2, 3 Bed	LCHC
<input type="checkbox"/> 278-282 Maude St	 	2, 3 Bed	CCS
<input type="checkbox"/> 321-334 Maude St/St. James St		1, 2, 3 Bed	CCS
<input type="checkbox"/> 107-144 Norton St	  	3, 4 Bed	CCS
<input type="checkbox"/> 326 Maude St	  	1 Bed	Private
<input type="checkbox"/> 212 Ottawa St	 	1 Bed	Private






























Lanark

Address	Building Information	Bedrooms	Housing Provider
<input type="checkbox"/> 56 George St	   	1 Bed	Private


















Pakenham

Address	Building Information	Bedrooms	Housing Provider
<input type="checkbox"/> 178 Five Arches Dr	   	1, 2 Bed	CCS
<input type="checkbox"/> 929 9 th Concession Rd	  	3 Bed	Private

Carleton Place

Address	Building Information	Bedrooms	Housing Provider
<input type="checkbox"/> 7 Arthur St	 	1, 2 Bed	LCHC
<input type="checkbox"/> 126 Sussex St		1, 2 Bed	LCHC
<input type="checkbox"/> 252 Moffatt St		1 Bed	LCHC
<input type="checkbox"/> 171 Munro St		Bach, 1 Bed	LCHC
<input type="checkbox"/> 112 – 143 Caldwell St	  	3, 4 Bed	LCHC
<input type="checkbox"/> 144 – 180 Caldwell St	  	2, 3 Bed	LCHC
<input type="checkbox"/> 404 – 406 Pattie Dr	  	4 Bed	LCHC
<input type="checkbox"/> 179 Caldwell St/ Arthur St	  	1, 2, 3 Bed	LCHC
<input type="checkbox"/> 96 Moore St		3 Bed	Private
<input type="checkbox"/> 114 Rocky Lane	  	3 Bed	Private
<input type="checkbox"/> 188 William St	 	2 Bed	Private
<input type="checkbox"/> 99 Crampton	   	3 Bed	Private
<input type="checkbox"/> 12 Bridge St	 	2 Bed	Private

Perth

Address	Building Information	Bedrooms	Housing Provider
<input type="checkbox"/> 75 Harvey St		1 Bed	LCHC
<input type="checkbox"/> 77 Harvey St		1 Bed	LCHC
<input type="checkbox"/> 16 Herriott		1 Bed	LCHC
<input type="checkbox"/> Beckwith/Robinson	  	2, 3, 4 Bed	LCHC
<input type="checkbox"/> 10 Welland St	  	3 Bed	LCHC
<input type="checkbox"/> 4 Railway St	  	3 Bed	LCHC
<input type="checkbox"/> 31 Rogers Rd	 	1, 2, 3, 4 Bed	TCO
<input type="checkbox"/> 2 Haggart St	  	3 Bed	Private



















Perth continued

Address	Building Information	Bedrooms	Housing Provider
<input type="checkbox"/> 27 Cockburn St		1, 2 Bed	Private
<input type="checkbox"/> 112 Gore St		1 Bed	Private
<input type="checkbox"/> 1830 Rogers Rd		1 Bed	Private

Smiths Falls


Address	Building Information	Bedrooms	Housing Provider
<input type="checkbox"/> 46 Bell Ave		1, 2 Bed	LCHC
<input type="checkbox"/> 195 Carss Ave		1 Bed	LCHC
<input type="checkbox"/> 30 McGill St S		1 Bed	LCHC
<input type="checkbox"/> 24 Bourke St		1, 2 Bed	LCHC
<input type="checkbox"/> Sussex/Empress		2, 3, 4, 5 Bed	LCHC
<input type="checkbox"/> 3 A&B Anne St/ 9 A&B Lanark St		3 Bed	LCHC
<input type="checkbox"/> 68 Broadview Ave		3 Bed	LCHC
<input type="checkbox"/> 72 Thurber St		3 Bed	LCHC
<input type="checkbox"/> Jasper/ Beech/ Carss		2, 3 Bed	LCHC
<input type="checkbox"/> Parkland Court		1, 2, 3 Bed	LCHC
<input type="checkbox"/> 28 Church St		1 Bed	Private
<input type="checkbox"/> 22 – 28 Toulon St		1 Bed	Private
<input type="checkbox"/> 41 Marsha Dr		1 Bed	Private
<input type="checkbox"/> 12 Chambers St		1, 2 Bed	Private
<input type="checkbox"/> 20 Phillip St		1 Bed	Private
<input type="checkbox"/> 10 Pearl St		2 Bed	Private
<input type="checkbox"/> 7 Main St W		1 Bed	Private
<input type="checkbox"/> 18 Beckwith St S		1 Bed	Private

Seniors Only (Applicants MUST be 65+ years of age)

Address	Building Information	Bedrooms
<input type="checkbox"/> Almonte (375 & 411 Country St) <i>Carebridge Community Support</i>	    	1, 2 Bed
<input type="checkbox"/> Carleton Place (105 Elizabeth St) <i>Carleton Place Municipal Non-Profit</i>	  	1, 2 Bed
<input type="checkbox"/> Clayton (134 Linn Bower Lane) <i>Clayton Seniors Housing Corp.</i>	  	1, 2 Bed
<input type="checkbox"/> Perth (20 Haggart St) <i>Tay Valley Non-Profit Housing Corp.</i>	   	1, 2 Bed
<input type="checkbox"/> Perth (99 Harvey St) <i>Private</i>	  	1 Bed

Affordable Housing (maximum asset limit of \$200,000)

Affordable Housing is no more than 80% of the local market rent, which is set out by CMHC.

Address	Building Information	Bedrooms	Housing Provider
<input type="checkbox"/> 7 Arthur St – Carleton Place		1, 2 Bed	LCHC

Alternate Contact Information

1) Name: _____

Relation to applicant: _____

Contact Phone Number: _____

2) Name: _____

Relation to applicant: _____

Contact Phone Number: _____

Declaration and Consent to Collect, Use, and Disclose Personal Information

I/we the undersigned declare, consent to, and understand the following:

1. That all information provided in this application is accurate and complete to the best of my knowledge. I will submit all supporting documents as required.
2. That all information I have provided in this application will be retained by Lanark County Housing Services and will be shared with the housing providers for the units I have selected.
3. That if information I have shared on this application requires further verification, I will provide that to the housing provider as requested. If information is false or inaccurate, my application may be cancelled and my ability to apply for Rent-Geared-to -Income housing may be prohibited for a minimum of two years under the Housing Services Act. 2011.
4. That ONLY the individuals listed on this application may live with me/us in any social housing unit.
5. That the housing providers for the selected units will use the information I have provided to assess my initial and ongoing eligibility for the program and to determine the amount to be paid once I am housed.
6. That all members of the household are legal residents of Canada.
7. That any arrears owing to any Ontario social housing provider must be paid in full or that a repayment schedule is being maintained in order that my application be added to the Rent-Geared-to-Income waitlist.
8. That I must contact Lanark County Housing Services to advise of any changes to my application information.
9. That I must complete and return an annual update form as issued to me by Lanark County Housing Services.
10. That information provided in my application package, including supporting documents, may require further verification. I/we authorize any relevant person, agency, or business with knowledge of that information to release or confirm it to Lanark County Housing Services.
11. That I/we give consent for Lanark County Housing Services to exchange information electronically with any relevant person, agency or business as required, regarding this application.
12. That I/we understand that personal information may be collected and shared in accordance with the Housing Services Act, 2011.



Rent-Geared-to-Income Housing Application

I/we allow the information on this application and any attachment to be given, without further notice, to:

1. Social Services offices, other municipal service managers or district social services administration boards and housing providers, 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.
2. The Government of Canada, a department, ministry, or agency of it, if the information is necessary for the purpose of administering or enforcing the Income Tax Act (Canada) or the Immigration Act.
3. Any government or body with whom an agreement has been made under the Housing Services Act, 2011, for the purpose of conducting research, reporting and policy related to a social benefit program or social housing or rent-geared-to-income assistance program.

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. 1990c F31) 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.

****Signatures of Household Members****

This application, declaration, and consent MUST be signed by the applicant and all non-dependent members of the household.

Applicant: _____

Member: _____

Member: _____

Member: _____

Member: _____

Date: _____