



## Application for Rent-Geared-to-Income Assistance - PART A

### General Eligibility Rules:

1. At least one person of your household must be 16 years of age or older and able to live independently with or without support services.
2. Each member of your household must be a Canadian Citizen or have made application for status as a permanent resident of Canada or have made a claim for Refugee Protection (copy of appropriate documentation must be attached – see page 19 of this application form for the list of acceptable documents).
3. If you owe money for rent or damages to any federally, provincially or municipally funded housing provider in Ontario you must pay the money owing to the housing provider or have a repayment agreement in place with the housing provider to whom you owe the money. The repayment agreement must be in good standing and you must supply a copy of the Repayment Agreement to the Social Housing Registry Program (The Registry).
4. If you own residential property, you will be required to sign an “Agreement to Sell Residential Property” form.
5. Your total household income must be under the income limit (see below), depending upon your unit size eligibility.

Unit Size	Income Limit
Bachelor	\$25,000
1 bedroom	\$31,000
2 bedroom	\$37,500
3 bedroom	\$40,500
4 bedroom	\$50,000

### How to Complete this Application Form:

- a) Complete all sections of the application form in full.
- b) Please read and understand the declaration and consent section before signing the form.
- c) This application form and consent **must** be signed by **each** member of your household 16 years of age or older, or a person authorized in writing, on his or her behalf.

- d) If a member of your household who is 16 years of age or older is unable for any reason to sign the application and consent, please have his or her parent, guardian, power of attorney or legally authorized person sign the application and give consent on his or her behalf. Proof must be provided.
- e) If you do not indicate your preference for the size of unit, housing project and location by geographic area, you shall be deemed to have indicated preference for the largest unit for which you are eligible under the occupancy standards and for all applicable housing projects.
- f) Request for Special Priority Status (see question 9), Request for a Modified Unit (see question 10) and Agreement to Sell Residential Property (see question 7) are available from The Registry, any Access Point or The City's website at <http://www.cityofkingston.ca/housing>

**Complete and return the application to The Registry or any of the Access Point Locations.**

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**The Social Housing Registry Program**

362 Montreal Street, Kingston, ON K7K 3H5

Telephone: 613-546-2695

Office Hours: Monday, Wednesday to Friday 8:30 a.m. to 4:30 p.m.

Tuesday 8:30 a.m. to 5:30 p.m.

**Rural Access Point at Loughborough Housing Corporation**

4377 William Street, Box 400, Sydenham, ON K0H 2T0

Telephone: 613-376-3686

Office Hours: Monday to Thursday 9:00 a.m. to 4:00 p.m.

**Rural Access Point at Rural Frontenac Community Services**

1020 Elizabeth Street, Sharbot Lake, ON K0H 2P0

Telephone: 613-279-3366 Office Hours: Monday to Friday 8:00 a.m. to 4:00 p.m.

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**Inquiries can be directed to: Phone 613-546-2695 Toll Free 1-888-778-4531**

**E-mail: [theregistry@cityofkingston.ca](mailto:theregistry@cityofkingston.ca)**

In order to remain on the eligible waiting list, you must inform The Registry of changes to any information provided on this form including your address, phone number, source and amount of income and any change to membership of the household, within thirty (30) business days OR your application may become ineligible.

**1. Your name and current address and telephone number:**

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**Applicant:**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ Unit Number: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Number: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Voice mail box at Housing Help Center: \_\_\_\_\_ (3 digit extension number). You may contact Housing Help Center at 613-531-3779 to find out about Voice Mail Box.

**2. List persons who may be contacted in the event that the housing provider or The Registry is trying to reach you and you cannot be reached at your phone numbers listed. Note that this contact person is not authorized to access information from your file unless you sign an additional consent form. Inability to reach you could result in you not receiving an offer of housing.**

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**Contact One:**

Relationship: \_\_\_\_\_ Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

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**Contact Two:**

Relationship: \_\_\_\_\_ Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

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**Contact Three:**

Relationship: \_\_\_\_\_ Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

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3. List all the people who will be living with you, starting with YOU and including any Foster Children.

**NOTE:** See "General Eligibility Rule 2" on page 1 of this application and "List of Acceptable Documentation" on page 19 of this application. Residency Status documentation must be provided for all household members 16 years of age and older.

Last Name	First Name	Date of Birth (M/D/Y)	Male or Female	Relationship to applicant	Social Insurance Number	Sources of Income	Status in Canada Canadian Citizen, Landed Immigrant, Refugee Claimant

4. Do all household members listed above live at the same address now? YES  NO

If NO, please provide the name and address of the household member who lives elsewhere.

Name: \_\_\_\_\_ Address: \_\_\_\_\_

If there are custody or visitation arrangements, you will be required to provide proof. (A list of acceptable documentation for proof is available at The Registry)

5. Is anyone on this list expecting a baby? YES  NO

If YES, please provide the due date: \_\_\_\_\_

You must notify The Registry **in writing** to advise the date that your child is born, name and birth certificate.

**Total household income** is the total amount of all payments from any source. That could include: GROSS salary (before deductions), overtime, commissions, self-employment, employment insurance, Worker's Compensation, pensions (i.e. Private, OAS, and CPP), annuities, inheritance, social assistance (Ontario Works Benefits/ODSP), alimony or support payments, interest income from savings and/or chequing accounts, interest from investments, term deposits, grants, scholarships, etc. For a complete listing contact The Registry.

6. **What is the Total Monthly Gross (before deductions) household income for all members listed in question 3?** \$\_\_\_\_\_

**NOTE:** Further income verification and your most recent Income Tax Assessment will be requested at a later date.

7. **Do you, or any member of your household listed on this application, own residential property suitable for year-round occupancy?** (i.e. house, cottage, mobile home, condo, etc.) **YES**  **NO**

If **YES**, you must sign an Agreement to Sell Residential Property Form available from The Registry, at any Access Point or The City's website at <http://www.cityofkingston.ca/housing>

8. **Current or Previous Social Housing Information**

Do you currently live in Rent-Geared-to-Income (subsidized) housing?

**YES**  **NO**

Have you or anyone listed in your application ever lived in a social housing project (market or subsidized unit), in Ontario.

**YES**  **NO**

If **YES**, list all details on the following page of each of the housing project locations in which you have lived.

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Name of person or persons who has lived in social housing: \_\_\_\_\_

Name of housing provider: \_\_\_\_\_

Please provide full address where you lived:

Street Address: \_\_\_\_\_ Unit or Apartment number: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Date moved in: (month/year) \_\_\_\_\_ Date moved out: (month/year): \_\_\_\_\_

Do you owe money for rent or damage to this social housing provider? **YES**  **NO**

If **YES**, what is the amount owing? \_\_\_\_\_

Do you have a repayment agreement? **YES**  **NO**

If **YES**, please attach a copy of the repayment agreement.

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Name of person or persons in social housing: \_\_\_\_\_

Name of housing provider: \_\_\_\_\_

Please provide full address where you lived:

Street Address: \_\_\_\_\_ Unit or Apartment number: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Date moved in: (month/year) \_\_\_\_\_ Date moved out: (month/year): \_\_\_\_\_

Do you owe money for rent or damages to this social housing provider? **YES**  **NO**

If **YES**, what is the amount owing? \_\_\_\_\_

Do you have a repayment agreement? **YES**  **NO**

If **YES**, please attach a copy of the repayment agreement.

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Name of person or persons in social housing: \_\_\_\_\_

Name of housing provider: \_\_\_\_\_

Please provide full address where you lived:

Street Address: \_\_\_\_\_ Unit or Apartment number: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Date moved in: (month/year) \_\_\_\_\_ Date moved out: (month/year): \_\_\_\_\_

Do you owe money for rent or damages to this social housing provider? **YES**  **NO**

If **YES**, what is the amount owing? \_\_\_\_\_

Do you have a repayment agreement? **YES**  **NO**

If **YES**, please attach a copy of the repayment agreement.

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## 9. Application for Special Priority Status (Domestic Abuse or Human Trafficking)

Special Priority is reserved for individuals eligible for Rent-Geared-to-Income assistance who are victims of abuse or trafficking as defined below.

**“Abuse” means one or more incidents of: physical or sexual violence, controlling behaviour; OR intentional destruction of or intentional injury to property; OR words, actions or gestures that threaten an individual to fear for his or her safety; OR trafficking of the member done by any individual.**

**“Trafficking” means, with respect to a member of a household, one or more incidents of recruitment, transportation, transfer, harbouring or receipt of the member by improper means, including force, abduction, fraud, coercion, deception and repeated provision of a controlled substance, for an illegal purpose, including sexual exploitation or forced labour.**

The *Housing Services Act, 2011*, Ontario Regulation 367/11, Section 52 – 58 (“Special Priority Household Category”), gives priority ranking to social housing applicants **whose personal safety, or whose family’s safety** is at risk because of abuse by an individual **with whom they currently live or have recently lived with or who is sponsoring the member as an immigrant**. This special priority is to enable the household to separate permanently from the abuser.

Social housing applicants are also eligible for special priority **if a member of the household is being or has been trafficked**.

Special Priority Policy does not apply to those who simply want to separate from someone because their relationship is not working.

Do you or any member wish to apply for special priority status? **YES**  **NO**

If **YES**, you must complete a “Special Priority application form” available from The Registry, at any Access Point or The City’s website at <http://www.cityofkingston.ca/housing>

## 10. Some social housing units have been modified to accommodate people with physical disabilities, such as widened doorways, lowered counters, grab-bars, etc. Detailed information for these modified units is available at <http://www.cityofkingston.ca/housing>

Do you, or any member of your household listed on this application require any special housing unit modifications for a physical disability? **YES**  **NO**

If **YES** you must complete a “Request for Modified Unit Form” available from The Registry, at any Access Point or The City’s website at <http://www.cityofkingston.ca/housing>

**11. Some units have stairs inside and some buildings have stairs up to the 2<sup>nd</sup> floor of the building. Are you able to climb stairs?** YES  NO

**12. Eligibility requirements for rent-gearred-to-income assistance state that at least one adult member of your household listed on this application must be able to live independently with or without support services.**

Please confirm that at least one member can live independently YES  NO

Some housing providers (Home Base Housing and Kaye Healey Homes) offer supportive housing. Are you interested in applying for housing which includes some level of support in relation to substance abuse, relationships, mental health, budgeting, legal issues, etc.? YES  NO

If **Yes** – indicate below which housing providers you are interested in applying to.

**Home Base Housing** Supportive Housing – Single Adults, over 25 years of age and requiring supportive Services. YES  NO

**Home Base Housing** Youth Services – For Youth 16 – 24 years of age, requiring short term shared accommodations (up to 12 months) YES  NO

**Kaye Healey Homes** Support Services for Women and their families who demonstrate an economic and social need YES  NO

You will be contacted by the housing provider to determine whether you will be eligible for supportive housing. Eligibility for supportive services is determined by the housing provider.





**Social Housing Registry Program  
Housing and Social Services Department**

## List of Housing Locations – Part A

Prior to making your selection of housing unit size, please note that local occupancy standards are:

The smallest unit a household may request is:

- One bedroom per two household members;
- Spouses or same sex partners may accept a bachelor unit;
- As may be permitted based on the municipal occupancy standards

The largest unit a household may request is:

- One bedroom for any two household members who are spouses of each other, and one bedroom for each additional household member.

These are the housing unit sizes you can choose. Choose at least one of the following depending upon your family size.

Bachelor  1 Bedroom  2 Bedroom  3 Bedroom   
4 Bedroom  5 Bedroom

If you do not select from the choices above, your name will be placed on the waiting list for the largest unit for which you qualify under the local occupancy standards.

### **Additional Bedroom Requirements**

**Medical:** Should you require additional bedroom or bedrooms for medical reasons, you must complete a “Request for Additional Bedroom Form” available from The Registry, at any Access Point., or at the City’s website at <http://www.cityofkingston.ca/housing>

**Custody:** Should you require additional bedroom or bedrooms for custody or child visitation arrangements, contact The Registry to find out what must be provided as acceptable custody documentation.

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Please review the attached list of addresses and select where you prefer to live so we can include your name on the appropriate waiting lists. Housing preferences are limited by eligibility requirements and occupancy standards.

**NOTE:**

- Before making your selection on the list of addresses, review the definitions on the last page
- Utilities, appliances, parking, balcony, etc. may not be included in some addresses. Further information on the features of these addresses is available from The Registry.
- **If you refuse 3 offers** from the addresses you have selected, your name may be removed from the centralized waiting list. However, should an applicant refuse an offer of a rent supplement address, the applicant will not be offered that address again so that no further refusal for that building will be counted.

**City Central – South of Concession/Stephen Street & Princess Street at Bath Road**

<b>Project or Housing Provider</b>	<b>Address</b>	<b>Specific Housing Mandate</b>	<b>Bedroom Size(s) at this location</b>	<b>Bedroom size(s) with modified units at this location</b>	<b>Type of Unit</b>	<b>I choose the following addresses</b>
Kingston and Frontenac Housing Corporation (KFHC)	205 Bagot Street/Johnson Street	None	1	1	Apartment with elevator	<input type="checkbox"/>
KFHC	381 Bagot Street	None	1	1	Apartment with elevator	<input type="checkbox"/>
KFHC	645 Brock Street	None	Bachelor and 1	Bachelor and 1	Apartment with elevator	<input type="checkbox"/>
KFHC	36 Cliff Crescent	None	1	None	Apartment – 2 storey building – no elevator	<input type="checkbox"/>
KFHC	40 Cliff Crescent	None	1	1	Apartment with elevator	<input type="checkbox"/>
KFHC	111 Van Order Drive	None	1	None	Apartment – 2 storey building – no elevator	<input type="checkbox"/>
KFHC	123 Van Order Drive	None	1	None	Apartment – 2 storey building – no elevator	<input type="checkbox"/>
KFHC	125 Van Order Drive	None	1	None	Apartment – 2 storey building – no elevator	<input type="checkbox"/>
KFHC	1-71 Curtis Crescent	None	3, 4 and 5	None	Townhouse with stairs	<input type="checkbox"/>

## City Central continued

<b>Project or Housing Provider</b>	<b>Address</b>	<b>Specific Housing Mandate</b>	<b>Bedroom Size(s) at this location</b>	<b>Bedroom size(s) with modified units at this location</b>	<b>Type of Unit</b>	<b>I choose the following addresses</b>
KFHC	2-72 Nickle Drive	None	3, 4 and 5	None	Townhouse with stairs	<input type="checkbox"/>
KFHC	28 Cliff Crescent	None	2, 3, 4 and 5	None	Townhouse with stairs	<input type="checkbox"/>
KFHC	Rent Supplement various locations	None	1, 2 and 3	1	Apartment with elevator	<input type="checkbox"/>
KFHC	Rent Supplement Senior various locations	Seniors	1	None	Apartment with elevator	<input type="checkbox"/>
Royal Canadian Legion Villa	671 Princess Street	Seniors	1 and 2	1 and 2	Apartment with elevator	<input type="checkbox"/>
Kingston Co-operative Homes	1338 Princess Street	Co-op	1, 2, 3 and 4	1 and 2	Townhouse with stairs	<input type="checkbox"/>
Home Base Housing	Various Locations	Supportive Alternative	Shared, 1	None	Shared, Apartment with stairs	<input type="checkbox"/>
Kaye Healey Homes/Elizabeth Fry	Various Locations	Supportive Alternative	1, 2 and 3	1	Apartment with stairs, Duplex, Triplex with stairs	<input type="checkbox"/>
Kingston Municipal NPHC (Town Homes Kingston)	257 Rideau Street	None	2, 3 and 4	2	Townhouse with stairs	<input type="checkbox"/>
Town Homes Kingston	205 Rideau Street	Seniors	1 and 2	1 and 2	Apartment with elevator	<input type="checkbox"/>

**City North – North of Concession/Stephen Street and Princess Street at Bath Road**

<b>Project or Housing Provider</b>	<b>Address</b>	<b>Specific Housing Mandate</b>	<b>Bedroom Size(s) at this location</b>	<b>Bedroom size(s) with modified units at this location</b>	<b>Type of Unit</b>	<b>I choose the following addresses</b>
KFHC	176 Wilson Street	None	1	None	Apartment – 2 storey building – no elevator	<input type="checkbox"/>
KFHC	1130 Montreal Street	None	1 and 2	None	Apartment – 2 storey building – no elevator	<input type="checkbox"/>
KFHC	300 Conacher Drive	None	1 and 2	None	Apartment with elevator	<input type="checkbox"/>
KFHC	312 Conacher Drive	None	3	None	Townhouse with stairs	<input type="checkbox"/>
KFHC	1130 Montreal Street	None	3 and 4	None	Townhouse with stairs	<input type="checkbox"/>
KFHC	Townhouses scattered: Weller Avenue, Wilson and Compton Street	None	2, 3 and 4	None	Townhouse with stairs	<input type="checkbox"/>
KFHC	Semi-detached scattered: Weller Avenue, Wilson and Ford Street, Butler Street, Drennan and Barbara Avenue	None	3 and 4	None	Semi-Detached with stairs	<input type="checkbox"/>

## City North continued

<b>Project or Housing Provider</b>	<b>Address</b>	<b>Specific Housing Mandate</b>	<b>Bedroom Size(s) at this location</b>	<b>Bedroom size(s) with modified units at this location</b>	<b>Type of Unit</b>	<b>I choose the following addresses</b>
KFHC	Rent Supplement Various Locations	None	1, 2 and 3	None	Elevators and stairs	<input type="checkbox"/>
Town Homes Kingston	37 Cassidy Street	None	2, 3 and 4	3	2 Storey apartment with stairs	<input type="checkbox"/>
Town Homes Kingston	710 Division Street	None	2 and 3	None	Townhouse with stairs	<input type="checkbox"/>
Town Homes Kingston	375 Patrick Street	None	2, 3 and 4	1 and 2	Townhouse with stairs	<input type="checkbox"/>
Weller Arms Non- Profit Inc.	65 Daly Street	Seniors	1 and 2	1 and 2	Apartment with elevator	<input type="checkbox"/>
Porto Village Non- Profit	700 Division Street	None	1, 2 and 3	2	Apartment with elevator	<input type="checkbox"/>
Home Base Housing	Various Locations	Supportive /Alternative	Shared, 1	1	Shared – stairs Apartment – mix of stairs and no stairs	<input type="checkbox"/>
Kaye Healey Homes/Elizabeth Fry	Various Locations	Supportive /Alternative	1, 2, 3 and 4	1	Apartment duplex and triplex – mix of stairs and no stairs	<input type="checkbox"/>
Lois Miller Co-op	234 Guthrie Drive	Co-op	1, 2 and 3	2	Apartment with elevator	<input type="checkbox"/>

## City North continued

<b>Project or Housing Provider</b>	<b>Address</b>	<b>Specific Housing Mandate</b>	<b>Bedroom Size(s) at this location</b>	<b>Bedroom size(s) with modified units at this location</b>	<b>Type of Unit</b>	<b>I choose the following addresses</b>
Lois Miller Co-op	242 Guthrie Drive	Co-op	1, 2 and 3	2	Apartment with elevator	<input type="checkbox"/>
Lois Miller Co-op	298 Guthrie Drive	Co-op	1, 2 and 3	2	Apartment with elevator	<input type="checkbox"/>
Cataraqui Co-op	416 Elliott Avenue	Co-op	2 and 3	None	Townhouse with stairs	<input type="checkbox"/>

## City West - West of Cataraqui Creek

<b>Project/Housing Provider</b>	<b>Address</b>	<b>Specific Housing Mandate</b>	<b>Bedroom Size(s) at this location</b>	<b>Bedroom size(s) with modified units at this location</b>	<b>Type of Unit</b>	<b>I choose the following addresses</b>
Marion Community Homes	480 Days Road	Seniors	1	None	Apartment with elevator	<input type="checkbox"/>
St. Andrew – Thomas Senior Citizen	760 Front Road	Seniors	1	1	Apartment with elevator	<input type="checkbox"/>
KFHC	Rent Supplement	None	1	None	Apartment with stairs	<input type="checkbox"/>
KFHC	Rent Supplement Senior	Seniors	1	None	Apartment with elevator	<input type="checkbox"/>

## Rural

Note: There is no public transportation to the rural locations. For further information on these rural locations please contact the housing provider at the number listed below or The Registry at 613-546-2695.

Project/Housing Provider	Address	Specific Housing Mandate	Bedroom Size(s) at this location	Bedroom size(s) with modified units at this location	Type of Unit	I choose the following addresses
KFHC (613) 546-5591	6094 Carlton Drive – Highway 38 (Verona), South Frontenac- Portland Township – 40KM north of Kingston	None	1	None	Apartment – 2 storey walk up building no elevator	<input type="checkbox"/>
KFHC (613) 546-5591	Rent Supplement Seniors, Sharbot Lake	Seniors	1	None	Apartment – no stairs	<input type="checkbox"/>
Loughborough Housing Corp. (613) 376-3686	4377 William Street (Mapleridge) 4361 William Street (Meadowbrook) Sydenham – 25KM north of Kingston	Seniors	1	2	Apartment with elevator	<input type="checkbox"/>
Town Homes Kingston (613) 542-0443	Country Pines, 2075 Battersea Road – 5KM north of Kingston	Seniors	1 and 3	1 and 2	Apartment with elevator	<input type="checkbox"/>
North Frontenac Non- Profit Housing Corp. (613)279-3322 Sharbot Lake 85 km north of Kingston	Wagner Road, Clement Road, Hwy 7, Hwy 38, Sharbot Lake	None	1,2,3 and 4	2	Apartment – no stairs, Duplex/Townhouse with stairs	<input type="checkbox"/>



Do you have any additional comments regarding your household circumstances? Add extra pages if you need more space to explain.

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### **Declaration and Consent**

I/We declare that all information given in this application is correct and complete. I/We agree that the application and any supporting documents become the property of The Registry and copies of the application and supporting documents may be given to housing providers that I/we have selected for placement in locations where I/we prefer to live.

I/We agree to provide any supporting material as may be required.

I/We understand and agree that if accommodation is provided to me/us the unit will be occupied by me/us and the persons listed on this application.

Personal information collected by The Registry, pursuant to the *Housing Services Act, 2011*, will be used to determine eligibility for housing applied for, placement on the waiting list and to determine my/our housing subsidy.

Pursuant to the Provincial/Municipal Freedom of Information and Protection of Privacy Act, I/we give my/our consent:

- To verify information given in this application and I/we authorize any person, corporation or any social agency having knowledge of any such required information to release the information to The Registry.
- To exchange electronic data via email for the purposes of sharing personal information relating to my/our initial and ongoing eligibility between myself/ourselves and authorized representatives of the City of Kingston, Housing and Social Services Department.
- To verify any supporting documents as required for my/our application.
- To disclose the information given on this form to non-profit housing corporations, co-operatives, the Housing Services Corporation and other Service Managers in the province participating in the Provincial Former Tenant Arrears database, municipal departments and agencies that assist in the provision of affordable housing, private landlords for the purpose of the rent supplement programs, and social agencies providing social assistance to me/us and persons listed in this application.

Personal information as defined by the Municipal Freedom of Information and Protection of Privacy Act (MFIPPA), including (but not limited to), names, addresses, and phone numbers, 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.F31) or the Municipal Freedom of Information and Protection of Privacy Act (R.S.O. 1990 C.m.56).

Questions about this collection should be directed to the Manager of The Registry, 362 Montreal Street, Kingston, ON K7K 3H5 or at 613-546-2695.

**The Declaration and Consent must be signed by the applicant and each member of the household who is 16 years of age or older; or authorized person on the member's behalf.**

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**Date Signed: (month/day/year)** \_\_\_\_\_

**Applicant Signature:** \_\_\_\_\_

Household member signature: \_\_\_\_\_

Household member signature: \_\_\_\_\_

Household member signature: \_\_\_\_\_

Household member signature: \_\_\_\_\_

Household member signature: \_\_\_\_\_

Household member signature: \_\_\_\_\_

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**For Office Use Only**  
**File or Application #** \_\_\_\_\_

STAMP

### **List of Acceptable Documentation**

A **Photocopy** of ONE of the following ACCEPTABLE Personal Identification Documents must be attached to your Application for Rent-Geared-to-Income Assistance - Part "A" for each member of your household 16 years of age or older.

Please provide the appropriate documentation as outlined below according to each household member's citizenship and or residency status.

#### **Canadian Citizens:**

- Canadian Birth Certificate
- Hospital Birth Records
- Canadian Passport
- Certificate of Indian Status
- Social Insurance Number Card
- Confirmation by Registrar General of Notice of Registration of Birth

#### **Permanent Residents:**

- Permanent Resident Card
- Confirmation of Landing
- Record of Landing
- Social Insurance Number Card
- Returning Resident permit
- Canada Certificate of Identify
- Canadian Travel Document. The status must indicate "Landed"
- Foreign passport – this document must be stamped "permanent resident" by Citizenship and Immigration Canada

#### **Refugee Claimants**

- Letter of acknowledgement of the claim issued by Citizenship and Immigration Canada (CIC)

## **Definitions of Terms**

**Cascading Age Wait list:** Under the Cascading Age Policy housing providers with a seniors mandate must first make offers of accommodation to applicants on their waiting list where at least one household member is 65 years of age or older. If there are no households on the providers' waiting list willing to accept the vacant unit, providers will then refer to the cascading age wait list which lists household members under 65 years of age who have selected that project or geographical area.

**Co-Operative Housing:** The household members who live in the project are all members of the cooperative corporation. They are democratic communities where the residents actively participate and make decisions on how the co-op operates.

**Mandate:** The approved policy statement by which a specific client group is served by the housing provider.

**Modified Unit:** A unit that has been modified to be accessible for an individual with physical disabilities to assist in living independently with or without support services.

**Rent Supplement:** City of Kingston has agreements with landlords, where specified units in their buildings are reserved for applicants from the Rent-Geared-to-Income waiting list. Kingston & Frontenac Housing Corporation (KFHC) administers the programs. When a vacancy occurs, KFHC refers the top two (2) applicants from the waiting list to the landlord where a final selection of tenant is made. Under the agreement the tenant pays the Rent-Geared-to-Income portion of the rent to the landlord and the balance of the rent is subsidized. Applicants selecting rent supplement may be offered various buildings depending on availability and vacancies within that geographic location.

**Rural:** Outside of the city centre. (Note: there is no public transportation to the rural locations.)

**Senior:** Applicants must be 65 years or older. Applicants under the age of 65, selecting senior housing, will be added to the Cascading Age Wait list.

**Supportive/Alternative:** These are housing providers who are mandated to provide support services in relation to substance abuse, relationships, mental health, budgeting, legal issues, etc.