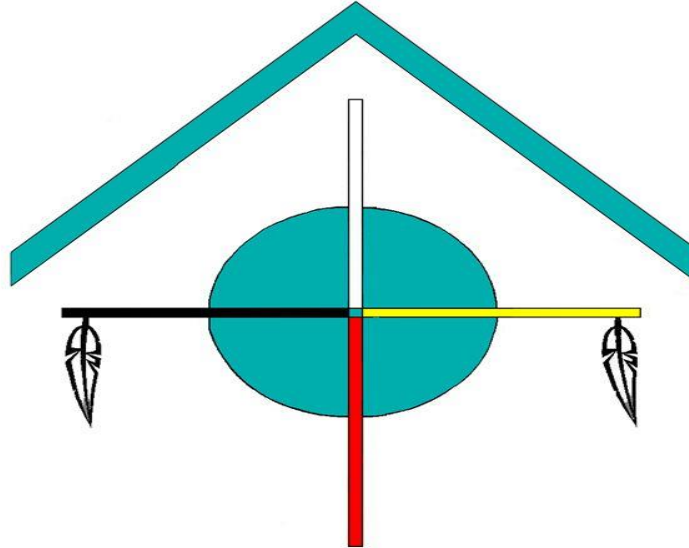


TIMMINS NATIVE NON-PROFIT



HOUSING CORPORATION

**101 Business Complex
U145-38 Pine Street North
Timmins, Ontario, P4N 6K6**

Phone: 705-268-0222 Fax:705-264-9767
timminsnativehousing@gmail.com

FOR OFFICE USE ONLY

Applicant Name	Bedroom Count	Date Received
Primary Applicant	<input data-bbox="695 1556 878 1650" type="text"/> Bedrooms	
Secondary Applicant	Initial Intake	

NOTE TO APPLICANTS – Please read thoroughly

Who is Eligible for Housing?

To qualify for housing with Timmins Native NP Housing Corp you must meet the following criteria:

- At least 50% of all family members occupying a unit must be of Native ancestry. Proof is required
- Families must contain at least one dependent child and consist of either couples both of whom must be aged 18 years or more or single parent aged 18 years or more. A dependent child is a person under 18 years of age. Those attending learning institutions on a full-time basis and living at home are considered dependents, even if they over 18 years of age. A person who is the child of the applicant and who, while over 18 years of age, is considered dependent due to some medically documented disability will be considered a dependent child for the purposes of this program. (Definition of full time Attendance in school will be as follows: A student carrying the equivalent of three or more courses in a term is a full-time student. A student carrying less than the equivalent of three courses in a term is a part time student). Single parents must have, at minimum, shared custody of any child/children residing (50% of the time) with them (proof required). This criteria must be met throughout your entire tenancy.
- Meet the Housing Suitability and the National Occupancy Standards developed by CMHC, at all times
- All applicants must meet CMHC income guidelines
- All applicants must have an address in Timmins and have been a resident of Timmins for the previous six months
- Applicants who have outstanding arrears with Timmins Native NP Housing Corp. or any other social housing provider will not be accepted unless the outstanding arrears are paid in full.

If and once you are granted a unit with Timmins Native NP Housing Corp. the criteria above must still be followed to remain qualified for a unit. Should you fail to meet any one of these criteria's while you are a tenant with TNNPHC, you can be evicted for no longer qualifying for housing

Priority Housing and Waiting List

Please note that Timmins Native NP Housing Corp. does not have any housing deemed as emergency housing. Our operating agreements with Canada Mortgage and Housing Corporation do not provide funding for units to be set aside for this type of housing. We therefore can't keep any of our homes set aside strictly for emergency use.

All eligible applicants for housing are registered on our data base. Applicants are contacted at the addresses and/or phone numbers that they provide on their application. It is the responsibility of the applicant to provide us with any changes or updates to their applications. Applicants are served according to their date of application. We do not "bump" any applicant to the front of the waiting list. Also, it is policy set out by the Board of Directors that nobody is to be informed of where they are on the waiting list. The average waiting time for 3-bedroom units is 1 - 1 1/2 years and for the 2-4 bedrooms, 4-5 years. Please note that this is an average, which means that it could be a shorter or longer waiting time period. Never can an accurate waiting time be given.

NOTE: When applying for housing, Timmins Native Non-Profit Housing Corp. requires a copy of the following documents (for each member of your household):

- Status Cards
- latest income tax returns/assessments
- Latest income statements showing your gross income (paystubs, UI summary, O.W. Stubs, etc.)
- All other total household income (i.e., child support, alimony, etc.)

1. Applicant

Last Name: _____ First Name: _____

Street Address: _____ Apt #: _____

Box #: _____ City: _____ Postal Code: _____

Phone #: _____ Alternate Contact: _____

SIN #: _____ Date of Birth: _____

Mobility Impaired?: _____

2. Co-Applicant

Last Name: _____ First Name: _____

SIN #: _____ Date of Birth: _____

Mobility Impaired?: _____

3. Other family members to reside in accommodation applied for:

FULL NAME	AGE	DATE OF BIRTH	SEX	RELATIONSHIP	EMPLOYED

4. Income Source (do not include Child Tax Benefit)-Gross Monthly Income (before deductions:

Source Of Income	Applicant	Co-Applicant	Other Member	Other Member
Employment	\$	\$	\$	\$
Municipal Welfare	\$	\$	\$	\$
Ontario Disability	\$	\$	\$	\$
Provincial Family Benefits	\$	\$	\$	\$
Pension Benefits	\$	\$	\$	\$
Other	\$	\$	\$	\$
TOTAL	\$	\$	\$	\$

If your family is a recipient of Ontario Works and/or Ontario Disability, please complete the following information:

Type of Benefits: _____ Worker: _____

Worker #: _____ Phone Extension: _____

5. Employment of Applicant

Occupation: _____ Employer Name: _____

Employer Address: _____ Phone #: _____

Length of Employment: _____ Full time: _____ Part time: _____

Comments: _____

Employment of Co-Applicant

Occupation: _____ Employer Name: _____

Employer Address: _____ Phone #: _____

Length of Employment: _____ Full time: _____ Part time: _____

Comments: _____

6. Assets

TYPE	VALUE
Bank Balance	\$
Mortgage	\$
Stock	\$
Bonds	\$
Other: _____	\$
Rent for Band Housing	\$
TOTAL	\$

Do you presently own property? _____ Type: _____ Approx. Value: _____

Do you have an automobile? _____ Make: _____ Model: _____

Do you own interest in a business? _____ If yes, explain: _____

Do you own band housing on your reserve? _____

If so, are you renting it out? _____

How much money are you receiving in monthly rent? \$ _____

7. Present Location of Family Members

Do all members listed on the application reside in your present accommodations? _____

If no, please give address and reason for separation: _____

Will the members of your family, listed on the application form, be coming to live with you once you obtain a unit from Timmins Native Non-Profit Housing Corp? _____

8. Present Accommodations of Family

Type of Accommodations presently lived in:

Room: _____ Apt. _____ House: _____ Other: _____

Condition of present accommodation? _____

of Bedroom(s): _____ Do you have a lease? _____ Lease Expiry Date: _____

Cost of Present Accommodation

EXPENSES	PER WEEK	PER MONTH
Rent	\$	\$
Heat	\$	\$
Hydro	\$	\$
Water	\$	\$
Child Care	\$	\$
	\$	\$

Present Landlord's Name: _____ Phone #: _____

Present Landlord's Address: _____

How long have you lived at your current address? _____

List your last 3 landlord references, complete with dates, address, and name of landlord

LANDLORD NAME	PHONE NUMBER	ADDRESS (YOU RESIDED AT)	FROM	TO

9. Previous Application (i.e., applicant, spouse, or any other member)

Have you or your spouse previously applied for subsidized rental accommodation with Timmins Native NP Housing Corp? _____

If yes, what was the name that was used on the application? _____

Have you or your spouse previously resided in subsidized rental accommodation in Ontario? _____ Name of the Agency? _____

Reason for leaving? _____

10. Contact Person/Interpreter

Person to contact in your absence, to act as an interpreter and/or in case of emergency

Name: _____ Phone #: _____

11. Confirmation of Native Status

I confirm that at least one half (50%) of the occupants of my unit are of Native Ancestry. I am aware that I must provide proof of status or Native ancestry upon request

Signed: _____ Signed: _____

All the information provided in this Housing Application is true to my best knowledge and belief and no information required to be given has been concealed or omitted.

I understand that if any rental accommodations are provided to me by Timmins Native NP Housing Corp., the said accommodation will be occupied only by myself and those members of my family whom I listed in Section 3 of this application.

I understand that I have the responsibility to inform the office of Timmins Native NP Housing Corp. of any changes to be made to my application (i.e., change of address, phone number, etc.) to not interfere with any chances of receiving a unit. I confirm that I read and understand page 1 (Note to Applicants) of this application.

I hereby authorize Timmins Native N.P. Housing Corp., to make all inquiries necessary to verify the accuracy of this application.

Signature of Applicant

Signature of Co-Applicant

Date: _____

TIMMINS NATIVE NON-PROFIT HOUSING CORPORATION

101 Business Complex, U145-38 Pine Street North, Timmins, Ontario, P4N 6K6, 705-268-0222

CONSENT FORM
FOR COLLECTION, USE AND DISCLOSURE OF PERSONAL INFORMATION
Personal Information Protection and Electronic Documents Act

What is "Personal Information?"

Personal information includes any factual or subjective information, recorded or not, about an identifiable individual.

This includes information in any form such as:

- Age, name, ID numbers, income, assets, household composition, residency status, rent payment record, etc.;
Opinions, evaluations, comments, social status or disciplinary actions; and
Employee files, credit records, loan records, medical records, existence of a dispute between a landlord and tenant, intentions (for example, to acquire goods and services, or change jobs).

Personal information does not include the name, title, business address, or telephone number of an employee of an organization.

Collection and Use of Your Personal Information

The Timmins Native Non Profit Housing Corporation will collect, retain and use the personal information provide by you in this form and its attachments for the following purposes:

- Considering your application for tenancy;
Verifying the information that you have provided in your application and its attachments relating to the administration and processing of your application for tenancy
Meeting legal and regulatory requirements arising out of or relating to your application
For the use of Timmins Native Non Profit Housing Corporation auditor to verify our records
For the purpose of contacting necessary services or your next of kin in case of emergency

Disclosure of Your Personal Information

The Timmins Native Non Profit Housing Corporation will disclose the personal information provided by you in this form to the following parties for the purposes described above:

- To any social agency providing any form of assistance to you, or other government subsidy under the Ontario Works Act, 1997, the Ontario Disability Support Program Act, 1997, or any government department responsible for social housing programs under the Social Housing Reform Act, or the Timmins Native Non Profit Housing Corp. operating agreement;
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;
To any agent working on behalf of Timmins Native Non Profit Housing Corporation for the purposes of complying with the Social Housing Reform Act;
To relevant agencies or next of kin in case of emergency; and
To a third party in connection with potential or actual sale, reorganization, merger, consolidation or disposition of the business of the Timmins Native Non Profit Housing Corporation;

Consent

I authorise and agree that the Timmins Native Non Profit Housing Corporation may collect, use and disclose the personal information that I have provided in this form and its attachments as described above. I understand and acknowledge that, in addition to the foregoing, the Timmins Native Non Profit Housing Corporation will also collect, use and disclose my personal information as required or permitted by law.

Dated this _____ of _____, 20_____.

Signature

Signature

Name (Print)

Name (Print)

*** This form will be valid from the date of signature (signed above) until the end of tenancy. To be signed by all household members living in the unit who are sixteen years and older***

Timmins Native Non-Profit Housing Corporation
Credit Release Form

I/We certify that all the information contained in the attached application is true and includes a complete representation of all material facts as of this date. In addition, I/We give permission to Timmins Native Non-Profit Housing Corporation and/or its representatives of staff to request and receive information required to verify employment, depository accounts and credit history. This includes permission to run credit check reports and obtain all the information necessary to complete the application for service requested

Applicant

Co-Applicant

Signature

Signature

Print Name (first last)

Print Name (first last)

Social Security #

Social Security #

Date of Birth MM/DD/YYYY

Date of Birth MM/DD/YYYY

Street Address

Street Address

City/Province/Postal Code

City/Province/Postal Code

Mailing Address if Different

Mailing Address if Different

City/Province/Postal Code

City/Province/Postal Code

Telephone Number

Telephone number

Driver's License Number

Driver's License Number