

# **MARKET RENT WAITLIST CLOSED EXCEPT FOR 360 King Street East - 55 years of age or over**



## **Instructions for Application for Market Rent Units**

**Please read the following instructions carefully**

This application is for Market Rent accommodation. Market Rent is NOT geared to your income and accepting a Market Rent unit will NOT shorten your wait for subsidized housing. The last pages of this application list CityHousing properties that currently have an open waitlist with the amount of rent payable at those properties.

Please do not select any properties that would require you to pay more than 50% of your gross monthly household income. CityHousing Hamilton will not place you on the waitlist for any properties that would require this.

If you cannot afford to pay market rent please go to Access to Housing (ATH) located at #110 - 350 King Street East and obtain an application for subsidized housing.

**If your application is not COMPLETELY filled in or any requirements listed on page 2 are not met, your application will be shredded and WILL NOT be processed.**

**CityHousing Hamilton has a two-refusal policy on our market rent units.** This means that you can refuse up to two offers of housing before being removed from the waiting list. If you have two refusals or if you do not respond to an offer of housing for a property that you have selected (on two different occasions) your application will be cancelled and you will have to reapply, with a new application date. You will then wait until your name reaches the top of the wait list before receiving another offer.

**Please remember if your information changes it is up to you to notify CityHousing Hamilton to update your information.**

Before submitting your application, please ensure you have included the following:

### **Application Form**

Your application form must be completely filled out and signed by every member of your household who is 18 years of age and over.

**If you need additional space add additional paperwork to application.**

### **Rental History**

You must provide a minimum of 5 years detailed information about your rental history. You must provide enough information so that CityHousing Hamilton can contact the landlords you have listed on your application form for more information about your rental history.

## **Credit References**

The Market Rent Division of CityHousing Hamilton may obtain a credit check from **TransUnion**. If we are unable to obtain any information, we may request additional information from you.

## **Assessment of Ability to Pay Rent - Income Verification**

You must include proof of current income for all household members listed on the application form.

**Current income documentation must include ONE of the following:**

- a)** Minimum 3 month of recent paystubs for each employed member of your household, showing their gross income; **or**,
- b)** a recent cheque stub from social assistance; **or**,
- c)** letter from Service Canada listing pensions; **or**,
- d)** most recent Notice of Assessment from Revenue Canada; **or**,
- e)** for self-employed members of the household income verification from a certified accountant or a certified copy of your most recent tax assessment including your T2125; **or**,
- f)** a letter of employment for each employed member of your household, stating
  1. the name, address and phone number of the employer
  2. gross annual salary
  3. length of employment

## **Personal Identification**

You must provide **two (2)** pieces of identification for each household member 18 years of age and over.

1. Copy of documentation that provides proof of Status in Canada.
2. One copy of photo identification.

## **Contact Information**

**General Inquiries:** 181 Main St. W., Hamilton, ON L8P 4S1

**Email:** chhmarketrent@hamilton.ca

## **Important Information**

1. If your application is accepted, it is **your responsibility** to notify CityHousing Hamilton of any changes (i.e. contact information, income, household composition, etc.)
2. Units are rented on a first come first serve basis, when your **completed** application is received in our office, we will date stamp it and your application will become active.
3. Some properties may have waiting lists for parking spots or may not provide parking at all.
4. There are **no** applicable priority status options available to applicants.
5. Rental amounts are subject to change each year.

### **CityHousing Hamilton – Smoke Free Policy**

All CityHousing Hamilton properties are now non-smoking.

**You may not smoke or vape** within 9 metres of any CityHousing building / property including **within your own units**, balconies and front & back yards of townhouses

**Please keep pages 1 to 3 for your records**

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# **MARKET RENT WAITLIST CLOSED EXCEPT FOR 360 King Street East - 55 years of age or over**



## **Market Rent Application**

**Applicant:** First & Last Name \_\_\_\_\_

Address \_\_\_\_\_ Unit #: \_\_\_\_\_

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

Phone Number \_\_\_\_\_ Alternate Phone \_\_\_\_\_

Email: \_\_\_\_\_

Gender: Female  Male  Other

Preferred pronouns: he / him  she / her  Other (please specify) \_\_\_\_\_

Date of Birth \_\_\_\_\_ Status in Canada \_\_\_\_\_  
(month/day/year) \_\_\_\_\_ (Citizen, Landed Immigrant, etc.)

### **Co-Applicant/Other Household Member:**

First & Last Name \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_

Phone Number \_\_\_\_\_ Alternate Phone \_\_\_\_\_

Gender: Female  Male  Other

Preferred pronouns: he / him  she / her  Other (please specify) \_\_\_\_\_

Date of Birth \_\_\_\_\_ Status in Canada \_\_\_\_\_  
(month/day/year) \_\_\_\_\_ (Citizen, Landed Immigrant, etc.)

### **Address if different than Applicants**

Address \_\_\_\_\_ Unit #: \_\_\_\_\_

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

## **Rental History – Minimum 5 years of history**

**Applicant - Current Address** \_\_\_\_\_ Unit #: \_\_\_\_\_

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

Landlord Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Monthly Rent \_\_\_\_\_ Utilities extra..... yes  no

Date you moved in \_\_\_\_\_ Date you plan to move out \_\_\_\_\_

Reason for moving out \_\_\_\_\_

**Applicant - Former Address** \_\_\_\_\_ Unit #: \_\_\_\_\_

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

Landlord Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Monthly Rent \_\_\_\_\_ Utilities extra..... yes  no

Date you moved in \_\_\_\_\_ Date you moved out \_\_\_\_\_

Reason for moving out \_\_\_\_\_

**Applicant - Former Address** \_\_\_\_\_ Unit #: \_\_\_\_\_

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

Landlord Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Monthly Rent \_\_\_\_\_ Utilities extra..... yes  no

Date you moved in \_\_\_\_\_ Date you moved out \_\_\_\_\_

Reason for moving out \_\_\_\_\_

**Co-Applicant/Other** Same as above: yes  no  - if no, complete below

### **Co-Applicant/Other - Current Address**

**Address** \_\_\_\_\_ Unit #: \_\_\_\_\_

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

Landlord Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Monthly Rent \_\_\_\_\_ Utilities extra..... yes  no

Date you moved in \_\_\_\_\_ Date you plan to move out \_\_\_\_\_

Reason for moving out \_\_\_\_\_

**Co-Applicant/Other - Former Address** \_\_\_\_\_ Unit #: \_\_\_\_\_

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

Landlord Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Monthly Rent \_\_\_\_\_ Utilities extra..... yes  no

Date you moved in \_\_\_\_\_ Date you moved out \_\_\_\_\_

Reason for moving out \_\_\_\_\_

**Co-Applicant/Other - Former Address** \_\_\_\_\_ Unit #: \_\_\_\_\_

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

Landlord Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Monthly Rent \_\_\_\_\_ Utilities extra..... yes  no

Date you moved in \_\_\_\_\_ Date you moved out \_\_\_\_\_

Reason for moving out \_\_\_\_\_



**Income / Employment History – This section MUST be completed, or your application will be shredded**

Verification documents for **all declared** income sources must be provided.

**Applicant** Name: \_\_\_\_\_

**Monthly Sources of Income** Total monthly Income \$ \_\_\_\_\_

Employment \$ \_\_\_\_\_  ODSP / OW \$ \_\_\_\_\_

Self Employed \$ \_\_\_\_\_  Private Pension(s) \$ \_\_\_\_\_

Child Tax Benefit \$ \_\_\_\_\_  CPP & OAS \$ \_\_\_\_\_

Mthly Support payment(s) \$ \_\_\_\_\_  Housing Allowance \$ \_\_\_\_\_

Other \$ \_\_\_\_\_ **please specify** \_\_\_\_\_

**Co-Applicant/Other** Name: \_\_\_\_\_

**Monthly Sources of Income** Total monthly Income \$ \_\_\_\_\_

Employment \$ \_\_\_\_\_  ODSP / OW \$ \_\_\_\_\_

Self Employed \$ \_\_\_\_\_  Private Pension(s) \$ \_\_\_\_\_

Child Tax Benefit \$ \_\_\_\_\_  CPP & OAS \$ \_\_\_\_\_

Mthly Support payment(s) \$ \_\_\_\_\_  Housing Allowance \$ \_\_\_\_\_

Other \$ \_\_\_\_\_ **please specify** \_\_\_\_\_

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**PLEASE ENSURE THE FOLLOWING IS COMPLETE OR YOUR APPLICATION WILL NOT BE PROCESSED AND WILL BE SHREDDED:**

All information entered on application form .....

Building selection form .....

Verification of Income .....

5 years of landlord history .....

Application form signed by all household members 18+ years .....

2 pieces of identification for all household members 18+ years .....

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**RELEASE AND CONSENT**

**Here is your legal agreement with us. Read it carefully and sign.**

I understand that there are laws that allow CityHousing Hamilton **to collect personal information about me**. I understand that CityHousing Hamilton will use the information I give them to see if I qualify for Market Rent housing.

**I give CityHousing Hamilton permission to check the information** that I have given them with the person or agency who can confirm the information. If I receive social assistance, live or have lived in subsidized housing, I allow CityHousing Hamilton to give the information on this form to the social assistance office.

**Declaration**

I give my word that everything I have written in this application is correct and complete. I understand that all information I give to CityHousing Hamilton will belong to them. If something on this application form is incorrect or not true, CityHousing Hamilton may cancel my application; take legal action; or both. I understand that only the people I have listed here may live with me. I give my word that I am in Canada legally. Before I can receive housing, I understand that I must pay back or make arrangements to pay any money I owe to any private landlord or subsidized housing agency.

Applicant Name: (please print) \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Witness: Name (Print Please) \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **Declaration - Cont'd**

Co-Applicant/Other Name: (please print) \_\_\_\_\_

Co-Applicant/Other Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Witness: Name (Print Please) \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The information on this form will be used to determine your eligibility and suitability for housing with CityHousing Hamilton and is collected in accordance with the Municipal Freedom of Information and Protection of Privacy Act (MFIPPA). Questions about this collection may be made to the MFIPPA Coordinator, 181 Main Street West 23<sup>rd</sup> floor, Hamilton, Ontario.

If your income decreases after moving into a market rent unit, you may apply to have your name put on Access to Housing's waiting list for subsidized housing.

If you owe any money to a private landlord or to a non-profit housing agency, including CityHousing Hamilton we will not be able to accept your application until payment in full is shown or you can provide proof that you have made arrangements to pay back the landlord.

## Building Selection Form

- The units on this page are for **seniors aged 55 and over** only.
- Check the box beside the unit type you would like to apply for.
- Please circle Am if you require a modified or barrier free apartment.

**A = apartment / Am = modified or barrier free apartment**

<b>Seniors</b>					
<b>Check Box</b>	<b>Address</b>	<b>Unit Type</b>	<b>Unit Sizes</b>	<b>2026 Monthly Rent</b>	<b>Notes</b>
<input type="checkbox"/>	360 King St. E. (1 <sup>st</sup> Place) ( <b>Age 55+</b> )	A	Bachelor	\$548	
<input type="checkbox"/>		A	1 bdrm	\$858	
<input type="checkbox"/>		Am	1 bdrm	\$877	