

# Safe Apartment Buildings By-law Registration Form

This is a sample copy of the online form to register an apartment building in Hamilton under City of Hamilton By-law 24-054.

This document is provided for reference only. Visit [my.hamilton.ca](http://my.hamilton.ca) to complete your registration.

Only the following property types need to register under By-law 24-054:

- Purpose-built apartment buildings with two or more storeys, and
- Six or more units sharing at least one common space

Properties that do not meet this definition or are registered as a condominium, long-term care home, licensed residential care facility, licenced retirement home, lodging home or housing co-operative aren't required to register.

If you're unsure if registration is required for your property, email [safeapartments@hamilton.ca](mailto:safeapartments@hamilton.ca) for assistance.

## Apartment Building Information

### Address

Note: Building Addresses may only be in the Hamilton Area

### Legal Description of the Building

### Property Type

Select one:

- Market rate rental apartments
- Social housing provider (e.g. a non-profit housing provider or a provider receiving a rent supplement from the City of Hamilton)
- Other

### Number of rental units supplemented under the HSA

### Number of market rate rental units

### Building Year of Construction

### Number of storeys in the apartment building:

Note: This number should not include storeys without any residential units (if the storey includes commercial units only) or the basement (if the ceiling of the basement is below grade) even if the basement level includes rental units.

Note: Only buildings with 2 or more storeys and 6 or more rental units are required to register.

### **Total number of rental units in the apartment building**

Note: This number should include rental units located in the basement (if any).

Note: Only buildings with 2 or more storeys and 6 or more rental units are required to register.

## Types of Rental Units

### **Bachelor Units**

- Total number of bachelor units
- Number of vacant bachelor units

### **One Bedroom Units**

- Total number of 1 bedroom units
- Number of vacant 1 bedroom units

### **Two Bedroom Units**

- Total number of 2 bedroom units
- Number of vacant 2 bedroom units

### **Three Bedroom Units**

- Total number of 3 bedroom units
- Number of vacant 3 bedroom units

**Do you have more unit types to add?** i.e. 4 or 5 bedroom units

## Building Contacts

### **Primary Building Contact**

First Name

Last Name

Address

Unit or Suite Number

Email Address

Phone Number

### **Secondary Building Contact**

First Name

Last Name

Address

Unit or Suite Number

Email Address

Phone Number

## Building Security Features

**Provide information about the apartment building's security features.**

Note: If "yes" is selected for any security feature below, you will be prompted to provide details (e.g. how many, location or layout)

**Does the building have an automatic locking system?**

**Does the building have cameras?**

**Does the building have security services or guard(s)?**

**Does the building have self-closing external doors?**

**Does the building have an intercom system?**

**Does the building have other security features?**

## Building Features and On-site Amenities

**Does the building have any of the following features or amenities?**

Check all that apply:

- Accessory Buildings (e.g. stand alone maintenance, storage or utility shed)
- Balconies
- Clothing or textile donation bin
- Dumpsters
- Exterior landscaped areas that include features such as trees, shrubs, garden beds, fencing, etc.
- Indoor waste sorting/disposal area and/or dumpster
- Outdoor waste sorting/disposal area and/or dumpster
- Waste compactor
- Waste chutes
- Laundry room
- Elevators
- Indoor bike parking
- Outdoor bike parking
- Indoor car parking area
- Outdoor car parking area
- Tenant storage area or lockers
- Community room
- Fitness room/gym
- Indoor or outdoor children's play area
- Indoor or outdoor pool
- None of the above

## Property Management Information

**Does the building have a property manager? If yes, provide:**

Property Management Company Name

Full Address if the Management Company  
Unit Number  
Representative's First Name  
Representative's Last Name  
Email Address  
Phone Number

## Building Ownership Information

**Is the Building owned by a:**

- Individual/Sole Proprietorship
- Partnership
- Corporation

If owned by an Individual/Sole Proprietorship, provide  
Building Owner Information:

### **Building Owner**

First name  
Last name  
Company and position title  
Address  
Email Address  
Phone Number

If owned by a Partnership, provide Partnership  
Information:

**Registered partnership number**

### **Business Name**

**Upload a list of all Partners, including: full name, mailing address, email address and phone number**

Accepted file types: DOC, DOCX, DOT, PDF, PPT, PPTX, TXT, WPS, XLS, XLSX, XLT  
up to 10 MB in size.

**Is there a building operator? If yes, provide:**

Operator First name  
Operator Last name  
Company and position title  
Address  
Suite/Unit Number  
Email Address

Phone Number

## If owned by a Corporation, provide Corporation Information:

**Registered corporation number**

**Business Name**

**Head Office Address**

**Unit Number or Suite**

**Corporation Local Contact**

First Name

Last Name

Mailing Address

Suite/Unit Number

Email Address

Phone Number

**Upload list of all Directors or Officers of the Corporation, including: full name, mailing address, email address and phone number**

Accepted file types: DOC, DOCX, DOT, PDF, PPT, PPTX, TXT, WPS, XLS, XLSX, XLT up to 10 MB in size.

## Required Documents for all Applicants

**Upload proof of general liability insurance for the Apartment Building that has a minimum per occurrence limit of \$2,000,000.**

Accepted file types: DOC, DOCX, DOT, PDF, PPT, PPTX, TXT, WPS, XLS, XLSX, XLT up to 10 MB in size.

**Upload integrated pest management plan**

Accepted file types: DOC, DOCX, DOT, PDF, PPT, PPTX, TXT, WPS, XLS, XLSX, XLT up to 10 MB in size.

**Upload cleaning plan**

Accepted file types: DOC, DOCX, DOT, PDF, PPT, PPTX, TXT, WPS, XLS, XLSX, XLT up to 10 MB in size.

**Upload state of good repair plan**

Accepted file types: DOC, DOCX, DOT, PDF, PPT, PPTX, TXT, WPS, XLS, XLSX, XLT up to 10 MB in size.

### **Upload electrical maintenance plan**

Accepted file types: DOC, DOCX, DOT, PDF, PPT, PPTX, TXT, WPS, XLS, XLSX, XLT up to 10 MB in size.

### **Upload waste management plan**

Accepted file types: DOC, DOCX, DOT, PDF, PPT, PPTX, TXT, WPS, XLS, XLSX, XLT up to 10 MB in size.

### **Upload vital service disruption plan**

Accepted file types: DOC, DOCX, DOT, PDF, PPT, PPTX, TXT, WPS, XLS, XLSX, XLT up to 10 MB in size.

## **Applicant Confirmation**

**I have the authority to register the apartment building and/or bind the Corporation (if applicable):**

- I am the Building Owner
- I have been authorized by the Building Owner to complete the registration on their behalf

**If Registration is completed by someone authorized by the Building Owner, provide:**

**Letter signed by the building owner confirming the person completing this form has authority to register the building.**

Accepted file types: DOC, DOCX, DOT, PDF, PPT, PPTX, TXT, WPS, XLS, XLSX, XLT up to 10 MB in size.

## **Acknowledgement**

I certify the accuracy, truthfulness and completeness of this application. I furthermore acknowledge it is my responsibility to ensure compliance with City of Hamilton Safe Apartment Buildings By-law 24-054, which includes without limitation: notifying the City of Hamilton in writing of any changes pertaining to this registration in the information provided, within seven (7) days of the change, during the course of this application for registration and during the one-year period of registration; applying for building registration annually; paying the required registration fee annually and any other applicable program fees (Note: Social housing providers are exempt from registration and renewal fees. A social housing provider refers to a non-profit housing provider or a provider receiving a rent supplement from the City of Hamilton.); implementing the mandatory maintenance plans as provided to support this registration; maintaining records and logs to demonstrate compliance; providing information about the mandatory

plans, building evaluation results and any other information related to the Safe Apartments program to building Tenants upon request or before any planned/unplanned maintenance or repair activities; and, providing any other supplementary documents to confirm the details in this application as requested by the Director, Licensing and By-Law Services.\*

- I Agree

## Notice of Collection

The City of Hamilton collects information under authority of Sections 10 and 227 of the Municipal Act, 2001 in conjunction with the Safe Apartment Buildings By-law 24-054. Any personal information collected for will be used for the Safe Apartment Buildings program will be used to support various activities required under the Safe Apartment Buildings By-law, including providing information about program requirements, registering the building in the program, confirming building ownership, and issuing invoices for payment of program fees. By providing your email address and telephone number, you are consenting to receiving emails and phone calls from the City of Hamilton and/or their agents/contractors for the purposes of contacting the building owner and/or operator to schedule and complete the on-site building evaluation, to address concerns submitted by tenants or residents about building conditions or safety, and to ensure that the building, its owner and/or operator are in compliance with the Safe Apartment Buildings By-law. Questions about the collection of this personal information can be directed to the Manager Rental Compliance, Planning and Economic Development, 330 Wentworth St. N., Hamilton, L8L 5W3 Ontario, [safeapartments@hamilton.ca](mailto:safeapartments@hamilton.ca)

## Business Identity Information

Business Identity Information collected on this application form will be maintained as a business record. Information such as the name, title, contact information or designation of an individual that identifies the individual in a business, professional or official capacity is not personal information pursuant to section 2(2.1) of the Municipal Freedom of Information and Protection of Privacy Act. Business identity information may be publicly available. Providing false or incomplete information could result in the refusal of this application.

## Risks of Using Electronic Communication Notice

The City of Hamilton will use reasonable means to protect the security and confidentiality of information sent and received using electronic communication.

However, due to risks such as accidental disclosure or interception by parties not intended to receive the information, we cannot guarantee the security and confidentiality of electronic communication and will not be liable for the improper disclosure of confidential information that is not the direct result of intentional misconduct of the City and/or its staff.

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