

**COUNTY OF SIMCOE SOCIAL HOUSING DIVISION
APPLICATION FOR SUBSIDIZED HOUSING**

Eligibility Requirements

1. At least one member in your household must be 16 years or older. The application must be signed by all members of the household 16 years and older.
2. You must be a Canadian Citizen, Landed Immigrant, or have Refugee Claimant Status and have no deportation order under the *Immigration Act* (Canada) against any member of the household or no departure order or exclusion order under the *Immigration Act* (Canada) has become effective with respect to any member of the household.
3. You must not owe arrears to any social housing provider or have misrepresented your household income.
4. If you own a house, you must agree to sell it within six months of being housed.
5. You may not have assets worth more than \$50,000. You can be placed on a waiting list for housing but you will be ineligible if you have more than \$50,000 at the time of being offered a unit.

Completing the Application

1. Please PRINT all information in ink.
2. **Copies of Birth certificates, proof of Canadian Citizenship or Landed Immigrant status, for all members of the household must be provided with the application.**
3. Complete all sections of the application and mail it to the address below.
4. Before signing the form, please read and understand the “Declaration, Release and Consent to Information”.
5. It is the applicant’s responsibility to notify our office within 20 business days of any changes in your circumstances.
6. If we are unable to contact you at the telephone number and/or the address provided on the application your file **will be cancelled.**

**County of Simcoe Social Housing Division
136 Bayfield St. 4th Floor, Barrie ON L4M 3B1
(705) 725-7215 option 7**

EMERGENCY HOUSING IS NOT AVAILABLE

Questions and Answers for Social Housing

How are people chosen for housing?

WHEN YOUR NAME GETS TO THE TOP OF THE LIST.

The list is kept in order of the date we receive your **completed** application. Due to the large volume of applications, we cannot inform you of your status on the list.

How much rent can I expect to pay?

Rent-geared-to-income is based on 30% of your gross monthly income, or if you are receiving Ontario Works or the Ontario Disability Support Program, a social assistance rent scale. Additional charges may apply depending on the project.

Can I choose where I want to live?

Yes. When you apply for housing, you will be asked where you want to live. You can choose one or many with your name added only to the waiting lists of the properties you choose.

Do I get to choose the unit size I want?

You can indicate what type of unit you want to live in. However your choice will be subject to occupancy standards that apply to households of your size.

How long will it take me to get a unit?

The length of time before a unit comes available will vary depending on the locations you choose. It may take some time because of the small number of vacancies.

How do I know that my application has been received?

Within 7 business days after your application is received, it will be reviewed to ensure that it is complete. You will receive written notice informing you whether it is complete or not.

What happens while I am waiting for housing?

It is very important that you keep your file up to date. You **must** notify us within 20 business days if any information you provide in this application in regards to:

- * you change your address or phone number
- * you want to live in locations other than those you chose on your application
- * the number of persons in your family changes
- * the contact person on your application changes

We will send you an update at least once per year. **Your name may be removed from the waiting list if we cannot contact you.**

How will I be contacted for an offer?

Since units are rented promptly, housing providers require a daytime telephone number so that they can call you when a unit becomes available. If you do not have a telephone or cannot be reached during the day, it would be helpful for you to provide a contact number for someone who is available during the day that could pass a message to you.

IT IS VERY IMPORTANT THAT YOU CONTACT OUR OFFICE OF ANY CHANGES TO YOUR ADDRESS, TELEPHONE NUMBER, YOUR CONTACT PERSON OR THE NUMBER OF PERSONS IN YOUR HOUSEHOLD. FAILURE TO DO SO MAY RESULT IN OUR BEING UNABLE TO CONTACT YOU, THEREBY REMOVING YOU FROM THE WAITING LIST

1. Applicant

Last Name		First Name		Date of Birth (MM/DD/YY)	Gender _M _F	Social Insurance No.
Apt. No.	Street No.	Street Name		City/Town	Province	Postal Code
Home Phone No.	Business Phone No.	Marital Status	Citizenship (attach birth certificate/proof of citizenship) _ Canadian Citizen _ Landed Immigrant			
Person to contact in your absence or to act as interpreter: (Must be completed)		Name	Address _____ Town/City _____ Postal Code _____ Relationship _____			Phone Number

2. Co-Applicant

Last Name		First Name		Date of Birth (MM/DD/YY)	Gender _M _F	Social Insurance No.
Apt. No.	Street No.	Street Name		City/Town	Province	Postal Code
Home Phone No.	Business Phone No.	Marital Status	Citizenship (attach birth certificate/proof of citizenship) _ Canadian Citizen _ Landed Immigrant			
Relationship to Applicant:						

3. List all other persons including dependents to live in accommodation applied for. This field will affect the unit size you are eligible for. If you are expecting a baby, please indicate "Baby" and Due Date in one of the boxes.

Last Name	First Name	Date of Birth MM/DD/YY	Gender Male/Female	Relationship

4. Does everyone listed above live in your present accommodation? Yes No
If "No", please give address and explanation: _____

5. Previous Applications for Subsidized Housing

Have you or any other persons listed on this application lived in subsidized rental accommodation in Ontario? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If "Yes", give name of housing provider: _____				
If "Yes" please give name of person, subsidized address and occupancy dates:				
Name	Address	Occupancy Dates		
_____	_____	From	To	
_____	_____	____/____	____/____	

6. All households requesting an accessible unit are required to complete a housing application; provide their physician's written verification of disability and complete a Housing Preference Availability Form. The Housing Preference Availability Form can be found on The County of Simcoe website or through this link [Housing Preference Availability Form \(click to view \)](#)

I/We require a wheelchair accessible unit: Yes No

Do you own a vehicle Yes No

Do you require main floor/elevator Yes No

YOU MUST HAVE THE TWO (2) DOCUMENTS OUTLINE ABOVE, COMPLETE AND ATTACHED TO THIS APPLICATION TO BE CONSIDERED FOR ANY/ALL ACCESSIBLE UNITS.

7. Present Landlord: (name and phone number must be provided for eligibility)

Name: _____ Phone Number: _____

8. Previous Address for the past 5 years: (Must be completed)

Previous Address (most recent first)	From (mm/yyyy)	To (mm/yyyy)	Reason for Leaving

9. Additional Requirements (Optional)

Check one or more of the boxes that apply to you or other persons on this application:

If you require a ground floor apartment or a building with an elevator for health related issues, complete the next box. If you require this, you will be excluded from offers for housing that requires the use of stairs.

I/We require a ground floor or elevator access for health reasons.

Some "senior" designated buildings have extremely limited parking. If you own a car and are applying for a seniors unit, please indicate if parking is mandatory for you. If you require parking, you will be excluded from offers for housing where parking is not available. If you are willing to find alternate parking for your car and do not wish to be excluded from building choices, do not check the next box.

I/We require a parking space; please exclude me from offers where parking is unavailable.

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10. Monthly income before deductions received by all persons/family members to live in the accommodation. ALL SOURCES OF INCOME MUST BE REPORTED. (GST or Child Tax Credit should not be included as a source of income)

List of Sources of Income	Gross Monthly Total (before deductions)		
	Applicant	Co-Applicant	Others on Application
Ontario Works (Social Services)	\$	\$	\$
Ontario Disability Support Program (O.D.S.P)	\$	\$	\$
Full/Part Time Employment	\$	\$	\$
Employment Insurance (E.I.)	\$	\$	\$
Workplace Safety Insurance Benefits (W.S.I.B.)	\$	\$	\$
Old Age Security (O.A.S)	\$	\$	\$
Gains – Aged	\$	\$	\$
Canada Pension Plan (C.P.P.)	\$	\$	\$
Private Pensions	\$	\$	\$
Student Grants	\$	\$	\$
Ontario Student Assistance Program (O.S.A.P.)	\$	\$	\$
Other Income	\$	\$	\$

11. Detailed Statement of Assets

Statement of Assets	VALUE		
	Applicant	Co-Applicant	Others on Application
Bank, Trust Company, Credit Union (savings and chequing)	\$	\$	\$
Stocks, Bonds, GIC's, Debentures, Term Deposits, etc.	\$	\$	\$
RRSP, Annuities	\$	\$	\$

Rent Revenue	\$	\$	\$
Business Assets	\$	\$	\$
Monies owed to you over \$500	\$	\$	\$
Other Assets (specify)	\$	\$	\$
Do you or any other person listed on this application own property ie. house, farm, land, mobile home, cottage? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", indicate type of property, address and estimated value:			
Have you or any person listed on this application transferred assets? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", indicate amount and date of transfer: \$ _____ Date: _____			

12. Special Priority

If You Are Applying for Special Priority, please read and complete this section!

Any member of a household who is 16 years of age or older may request special priority status for the household on the social housing waiting list. 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 who is sponsoring her/him as an immigrant. In order to qualify for special priority status the following information and verification is required:

PLEASE CHECK HERE IF WE MAY CONTACT YOU AT HOME - yes no

Mandatory Requirements

1. A letter outlining the nature of the abuse and timeframes of when the abuse occurred, the timeframes in which you co-resided and your current plans of reconciliation or permanent separation.
2. Proof of co-residency
3. Written Verification of Abuse on letterhead by a by a professional such as a doctor, a lawyer, a law enforcement officer, a community health care worker, a social service worker, etc.

Verification Provided with Application

9 Attached by Letter

9 Proof Attached

9 Proof Attached

YOU MUST HAVE ALL 3 SECTIONS COMPLETE AND VERIFICATION ATTACHED TO THIS APPLICATION TO BE CONSIDERED FOR SPECIAL PRIORITY STATUS

13. Additional Comments



County of Simcoe Social Housing Division
 136 Bayfield St. 4th Floor
 Barrie, ON L4M 3B1

HOUSING CHOICES

Applicant Name: _____

NOTE: You will be given three (3) offers of housing only. Refusal of all three offers will result in your application being cancelled from the waiting list.

The maximum number of bedrooms allowed is one bedroom per couple and one additional bedroom for each family member. In the boxes below, you may choose units with only the maximum number of bedrooms for your family size or you may also choose units with fewer bedrooms. The more choices made, the sooner you will likely be housed. Occupancy standards apply, so you should not choose a one bedroom if you have four children. **If you are offered a unit that is a Rent Supplement property and you turn it down, this will be taken as a refusal. A Rent Supplement unit is a rent geared-to-income assisted unit in a privately-owned building.** A Senior is not limited to Senior properties only, but may choose any property.

Provider:

NP = Non-Profit **CO-OP**= Co-operative Housing **RS**= Rent Supplement **SCH**= Simcoe County Housing
 If you select 'Co-op' housing, you must be willing to volunteer your time and/or services.

CHECK (T) as many as you wish



= Some Handicapped Unit(s) Available (apply directly to property for unit)

Number of Bedrooms
 (T open box to select choice)

ALLISTON					Ba ch	Number of Bedrooms				Elevator
Provider	Tenant Type	Bldg. Type	# of Units			1	2	3	4	
109 Wellington St	SCH	Adult	Apts.	30						
111 Nelson St	SCH	Senior	Apts.	16						
219 King St N (Nottawasaga Co-Op) map	CO-OP	Adult/Family	Apts.	53						YES
ANGUS					Ba ch	Number of Bedrooms				Elevator
Provider	Tenant Type	Bldg. Type	# of Units			1	2	3	4	
257 Centre St (Angus Legion) map	NP	Senior	Apts.	45						YES



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Number of Bedrooms
(T open box to select choice)

BARRIE	Provider	Tenant Type	Bldg. Type	# of Units	Ba ch	1	2	3	4	Elevator
380 Duckworth Street (Summit View)	NP	Adult/Family	Apts.	99						YES
1 Blake Street	SCH	Senior	Apts.	91						YES
10/20 Golfdale Rd (Cundles Heights) map	NP	Adult/Family	Apts.	50						
Rent Supplement	RS	Adult/Family	Apts.	22						
101/111 D'Ambrosio Dr (Deerhurst Glen) map	NP	Adult/Family	Apts.	50						
108 Anne St N (Ad Astral) map	NP	Adult/Family	Apts.	50						
108 Burton Avenue	SCH	Adult	Apts.	30						
Rent Supplement	RS	Adult	Apts.	4						
131 Berczy St (Berczy Glen)	NP	Adult/Family	Apts.	24						
Rent Supplement	RS	Adult	Apts.	1						
14 Worsley St (Coral Non Profit) map	NP	Adult/Family	Apts.	115						YES
18 Sophia Street East	SCH	Adult	Apts.	30						
186 Grove Street East	NP	Adult/Family	Apts.	27						YES
BARRIE	Provider	Tenant Type	Bldg. Type	# of Units	Ba ch	1	2	3	4	Elevator
191/193 Edgehill Drive map	NP	Adult/Family	Apts.	70						
205 Kozlov St (North Barrie Heights)	NP	Family	Houses	64						
225 Kozlov St (Northfields) map	NP	Adult/Family	Apts.	53						
Rent Supplement	RS	Adult	Apts.	1						
31 Penetang St (Penetang Crt)	NP	Adult/Family	Apts.	56						
33 Brooks Street	SCH	Senior	Apts.	53						
339 Essa Rd (Timbercrest)	NP	Adult/Family	Apts.	50						
393 Blake Street	SCH	Family	Houses	15						
Rent Supplement	RS	Adult	Apts.	1						
49 Coulter St (Coulter Glen) map	NP	Adult/Family	Apts.	125						YES
54 & 58 Peel St (We Care TH)	NP	Family	Houses	16						
549 Yonge Street (Millcreek)	NP	Family	Houses	118						
56 Peel Street (We Care Apts)	NP	Family	Apts.	14						
75 Amelia St (St. Mary's) map	NP	Senior	Apts.	60						YES
80-100 Little Ave (Allanview) map	NP	Adult/Family	Apts.	100						
90 Edgehill Drive (Gateway Co-Op) map	CO-OP	Adult/Family	Apts.	217						YES
Alfred Street	SCH	Family	Houses	1						
Bothwell Crescent	SCH	Family	Houses	1						
Carol Road (Southfields) map	NP	Adult/Family	Apts.	67						
Chaucer Crescent	SCH	Family	Houses	7						



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Number of Bedrooms
(T open box to select choice)

Christie Crescent	SCH	Family	Houses	3							
Codrington Street	SCH	Family	Houses	1							
Cook Street	SCH	Family	Houses	24							
Grove Street East	SCH	Family	Houses	13							
Heath Street	SCH	Family	Houses	22							
Lakeview Cres	SCH	Family	Houses	1							
Melrose Ave.	SCH	Family	Houses	1							
Napier Street	SCH	Family	Houses	1							
Newton Street	SCH	Family	Houses	1							
Oakley Park Square	SCH	Family	Houses	2							
Queen Street	SCH	Family	Houses	2							
Rose Street	SCH	Family	Houses	2							
St. Vincent Street	SCH	Family	Houses	5							
Wellington Street	SCH	Family	Houses	1							
BEETON	Provider	Tenant Type	Bldg. Type	# of Units	Ba ch	1	2	3	4	Elevator	
50 Tecumseth Street	SCH	Senior	Apts.	24							
BEETON	Provider	Tenant Type	Bldg. Type	# of Units	Ba ch	1	2	3	4	Elevator	
Rent Supplement	RS	Senior	Apts.	7							
BRADFORD	Provider	Tenant Type	Bldg. Type	# of Units	Ba ch	1	2	3	4	Elevator	
100 Miller Park Court	SCH	Senior	Apts.	51							
220 Holland St (Quaker Hill) map	CO-OP	Adult/Family	Apts.	46							YES
Rent Supplement	RS	Adult/Family	Apts.	3							
COLDWATER	Provider	Tenant Type	Bldg. Type	# of Units	Ba ch	1	2	3	4	Elevator	
11 Mill St (Coldwater Seniors) map	NP	Senior	Apts.	62							YES
COLLINGWOOD	Provider	Tenant Type	Bldg. Type	# of Units	Ba ch	1	2	3	4	Elevator	
150 Albert Street	SCH	Adult	Apts.	16							
201 Matthew Way (Matt Co-Op Apt) map	CO-OP	Adult/Family	Apts.	16							
201 Matthew Way (Matt Co-Op TH)	CO-OP	Family	Houses	64							
Rent Supplement	RS	Adult	Apts.	1							
233 St. Paul Street	SCH	Adult	Apts.	33							
25 Napier Street	SCH	Adult	Apts.	53							
250 Erie St (Collingwood Non Profit) map	NP	Adult/Family	Apts.	45							YES
Rent Supplement	RS	Adult	Apts.	1							
Rent Supplement	RS	Family	Houses	1							



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Number of Bedrooms
(T open box to select choice)

Eighth Street	SCH	Family	Houses	6							
High Street	SCH	Family	Houses	10							
Murray Court	SCH	Family	Houses	6							
Second Street	SCH	Family	Houses	14							
Seventh Street	SCH	Family	Houses	6							
Walnut Street Apts	SCH	Adult	Apts.	4							
Walnut Street Twnhs	SCH	Family	Houses	4							
ELMVALE	Provider	Tenant Type	Bldg. Type	# of Units	Ba ch	1	2	3	4	Elevator	
8 Flos Crescent	SCH	Adult	Apts.	14							
32 Yonge Street	SCH	Senior	Apts.	20							
INNISFIL	Provider	Tenant Type	Bldg. Type	# of Units	Ba ch	1	2	3	4	Elevator	
2049 Victoria Street	SCH	Senior	Apts.	40							
MIDLAND	Provider	Tenant Type	Bldg. Type	# of Units	Ba ch	1	2	3	4	Elevator	
407 Midland Avenue	SCH	Adult	Apts.	22							
Rent Supplement	RS	Adult	Apts.	1							
MIDLAND	Provider	Tenant Type	Bldg. Type	# of Units	Ba ch	1	2	3	4	Elevator	
551 Hugel Ave (Knox Price)	NP	Senior	Apts.	20							YES
559 King Street	SCH	Adult	Apts.	49							
615 William Street (Javelin) map	CO-OP	Adult/Family	Apts.	72							YES
661 King St (Mountainview Co-Op)	CO-OP	Family	Houses	50							
810 Bay Street	SCH	Senior	Apts.	40							
854-860 Hartman Dr (Mt. Lakeview) map	NP	Adult/Family	Apts.	106							YES
946 Yonge Street	SCH	Senior	Apts.	22							
Beauchamp Court	SCH	Family	Houses	6							
Borden Street	SCH	Family	Houses	10							
Dominion/Seventh Street	SCH	Family	Houses	10							
Donalda Street	SCH	Family	Houses	30							
Fitton Street	SCH	Family	Houses	10							
William Street	SCH	Family	Houses	2							
Yonge Street	SCH	Family	Houses	6							
ORILLIA	Provider	Tenant Type	Bldg. Type	# of Units	Ba ch	1	2	3	4	Elevator	
125 Fittons Rd (Mariposa Place) map	NP	Adult/Family	Apts.	88							YES
Rent Supplement	RS	Adult	Apts.	1							
Rent Supplement	RS	Adult/Family	Apts.	19							YES



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Number of Bedrooms
(T open box to select choice)

18 Peter St N (St. James Court) map	NP	Adult/Family	Apts.	37							YES
Rent Supplement	RS	Adult	Apts.	10							YES
246 Oxford Street	SCH	Family	Houses	32							
250/252 Barrie Rd (Fellowship Twrs) map	NP	Adult/Family	Apts.	106							YES
26 Fittons Rd (Elizabeth Overend Pl) map	NP	Adult/Family	Apts.	55							YES
Rent Supplement	RS	Adult	Apts	2							
335 Peter Street	SCH	Adult	Apts.	16							
397 Regent Street	SCH	Adult	Apts.	11							
401 Regent Street	SCH	Senior	Apts.	70							
Rent Supplement	RS	Adult/Family	Apts.	11							YES
Rent Supplement	RS	Adult	Apts,	3							
Rent Supplement	RS	Adult	Twhs	5							
472 High St (Fellowship Villa)	NP	Family	Apts.	24							
5 Rosemary Rd (Fellowship Heights) map	NP	Family	Apts.	52							YES
70/80 Fittons Rd W (Legioncrest Srs)	NP	Senior	Apts.	114							YES
75/80 Walker Ave (Walker Village) map	NP	Family	Houses	76							
Hilda/Forest Street	SCH	Family	Houses	2							
ORILLIA	Provider	Tenant Type	Bldg. Type	# of Units	Ba ch	1	2	3	4	Elevator	
Simcoe/High Street	SCH	Family	Houses	14							
PENETANGUIHENE	Provider	Tenant Type	Bldg. Type	# of Units	Ba ch	1	2	3	4	Elevator	
26 Giganc Drive	SCH	Adult	Apts.	15							
46 Maria Street	SCH	Senior	Apts.	40							
69 Harriet Street	SCH	Adult	Apts.	20							
Chatham Street	SCH	Family	Houses	2							
Gignac Drive	SCH	Family	Houses	22							
John Street	SCH	Family	Houses	4							
Sheridan Street	SCH	Family	Houses	4							
STAYNER	Provider	Tenant Type	Bldg. Type	# of Units	Ba ch	1	2	3	4	Elevator	
239 Brock Street	SCH	Adult	Apts.	15							
WASAGA BEACH	Provider	Tenant Type	Bldg. Type	# of Units	Ba ch	1	2	3	4	Elevator	
30 Seventh Lane	SCH	Adult	Apts.	41							



DECLARATION AND CONSENT TO DISCLOSURE OF INFORMATION AND DOCUMENTS

Social Housing Reform Act, 2000

1. I declare that all information given by me in this document is, to the best of my knowledge and belief, correct and complete.
2. I consent to the disclosure of information and documents to an authorized representative of The County of Simcoe , Simcoe County Housing Corporation, or the following Social Housing Provider or Lead Agency:

_____ (name of Housing Provider)

for the purposes of determining and reviewing my eligibility for rent-gear-to-income (RGI) assistance and/or special needs housing, including my placement on any applicable waiting lists, for the purposes of determining and reviewing the size and type of unit in respect of which my household is eligible to receive RGI assistance and/or special needs housing, for the purposes of determining and reviewing the amount of RGI payable by my household, and, if applicable, for the purpose of making a determination about inclusion in the special priority household category on the centralized waiting list under section 68 of the *Social Housing Reform Act 2000*.

3. Without restricting the generality of the consent in section 2 above, I consent to the release of information regarding any assets held in any financial institution by or on behalf of me and any dependents in my household, for the purposes of determining and reviewing my eligibility for RGI assistance and/or special needs housing, including my placement on any applicable waiting lists, and for the purposes of determining and reviewing the amount of RGI payable by my household.

Information which is collected about you may be shared as necessary for the purpose of making decisions or verifying eligibility for assistance under the *Social Housing Reform Act* ("the Act"), the *Ontario Disability Support Act, 1997*, the *Ontario Works Act, 1997*, or the *Day Nurseries Act*, or as authorized by an agreement under section 163 or 164 of the Act.

Consent to the disclosure of personal information and documents for the purpose of determining whether a household should be included in the special priority household category on the centralized waiting list under section 68 of the Act must be given by the abused household member. Information and documents collected for such a purpose may be disclosed or shared under section 163, 164 or 165 of the Act only for the purpose of determining whether the household should be included in the special priority household category on the centralized waiting list under section 68 of the Act.

Name of applicant/tenant/member	Signature*	Date
Name of applicant/tenant/member	Signature*	Date
Name of applicant/tenant/member	Signature*	Date
Name of applicant/tenant/member	Signature*	Date
Names of dependents (who are less than 16 years old)	Signature*	Date

If the applicant/tenant/member is unable for any reason to sign the consent or to give a valid consent, or if the person to whom the personal information and documents relate is less than 16 years old, the consent may be signed on the person's behalf by another individual who is the parent or guardian of the person, or who is an attorney of the person under a power of attorney that authorizes the attorney to give the consent on the person's behalf, or who is otherwise authorized to give the consent on the person's behalf.

This information is collected under the legal authority of the *Social Housing Reform Act 2000* (the Act), for the purpose of administering the social housing programs prescribed in the Act and its associated regulations. The information collected is further collected and protected under the *Freedom of Information and Protection of Privacy Act* and/or the *Municipal Freedom of Information and Protection of Privacy Act*.

**If you have any question or complaints about the collection, use or disclosure of your personal information, please contact:
The County of Simcoe Social Housing Division 136 Bayfield Street 4th Floor Barrie ON L4M 3B1 (705) 725-7215 option 7**