

Instructions for Application for Market Rent Units

Please read the following instructions carefully

If your application is not completely filled in or documents are missing, it will be returned to you for further information and your application WILL NOT be processed.

Before submitting your application, please make sure that you have included the following information:

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 (except the witness' signature).
If you need additional space add additional paperwork to application.

Assessment of Ability to Pay Rent - Income Verification

You must include proof of current income and 5 year history for all household members listed on the application form. **Current income documentation**

must include ONE of the following:

- a) 1 month of recent paystubs for each employed member of your household, showing their gross income;
- b) a recent cheque stub / bank statement showing deposits from social assistance, pensions or other sources of income;
- c) for self-employed members of the household income verification from a certified accountant or a certified copy of your most recent tax assessment;
- d) 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

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.

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
Phone: **905-523-8496 ext. 7874** / cell: 289-921-RENT (7368)

360 King St. E.: 181 Main St. W., Hamilton, ON L8P 4S1
(1st Place) Phone: **905-523-8496 ext. 7437**

Important Information

1. If your application is accepted, we will keep it on file for one year. It is your responsibility to contact the Market Rental office to keep the application active.
2. Units are rented on a first come first served 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 list for parking spots or may not provide parking at all.
4. A guarantor will be required for rent that is deemed higher than you can afford. Guarantor forms are available from CityHousing Hamilton

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

Applicant

Social Insurance Number _____

First Name _____ Last Name _____

Current Address _____ Postal Code _____

Phone Number _____ Work / Other Phone _____

Gender: Female Male Other Preferred pronouns: he / him she / her Other (please specify) _____Date of Birth _____ Status in Canada _____
(day/month/year) (Citizen, Landed Immigrant, etc.)**Co-Applicant**

Social Insurance Number _____

Relationship to Applicant _____

First Name _____ Last Name _____

Current Address _____ Postal Code _____

Phone Number _____ Work Phone _____

Gender: Female Male Other Preferred pronouns: he / him she / her Other (please specify) _____Date of Birth _____ Status in Canada _____
(day/month/year) (Citizen, Landed Immigrant, etc.)**Other Members of Household**

First & Last Name _____

Relationship to Applicant _____ Social Insurance Number _____

Gender: Female Male Other Preferred pronouns: he / him she / her Other (please specify) _____Date of Birth _____ Status in Canada _____
(day/month/year) (Citizen, Landed Immigrant, etc.)

Other Members of Household – Cont'd

First & Last Name _____
Relationship to Applicant _____ Social Insurance Number _____
Gender: Female Male Other
Preferred pronouns: he / him she / her Other (please specify) _____
Date of Birth _____ Status in Canada _____
(day/month/year) (Citizen, Landed Immigrant, etc.)

First & Last Name _____
Relationship to Applicant _____ Social Insurance Number _____
Gender: Female Male Other
Preferred pronouns: he / him she / her Other (please specify) _____
Date of Birth _____ Status in Canada _____
(day/month/year) (Citizen, Landed Immigrant, etc.)

First & Last Name _____
Relationship to Applicant _____ Social Insurance Number _____
Gender: Female Male Other
Preferred pronouns: he / him she / her Other (please specify) _____
Date of Birth _____ Status in Canada _____
(day/month/year) (Citizen, Landed Immigrant, etc.)

First & Last Name _____
Relationship to Applicant _____ Social Insurance Number _____
Gender: Female Male Other
Preferred pronouns: he / him she / her Other (please specify) _____
Date of Birth _____ Status in Canada _____
(day/month/year) (Citizen, Landed Immigrant, etc.)

Rental History – Minimum 5 year of history

Applicant

Current Address _____ 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 _____

Former Address _____ Postal Code _____
Landlord Name _____ Phone Number _____
Monthly Rent _____ Utilities extra yes no
Date you moved in _____ Date you move out _____
Reason for moving out _____

Former Address _____ Postal Code _____
Landlord Name _____ Phone Number _____
Monthly Rent _____ Utilities extra yes no
Date you moved in _____ Date you move out _____
Reason for moving out _____

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

Current Address _____ 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 - Cont'd

Former Address _____ Postal Code _____
Landlord Name _____ Phone Number _____
Monthly Rent _____ Utilities extra..... yes no
Date you moved in _____ Date you move out _____
Reason for moving out _____

Former Address _____ Postal Code _____
Landlord Name _____ Phone Number _____
Monthly Rent _____ Utilities extra..... yes no
Date you moved in _____ Date you move out _____
Reason for moving out _____

Income / Employment History

Applicant Name _____

Source of Income: Employment Pensions Self Employed Benefits Other

Current Monthly Income _____ Start date of current income _____

a) If Employed complete below – 5 year history

Current Employer _____ Position Held _____
Address _____ Start Date _____
Contact Name _____ Phone Number _____

Former Employer _____ Position Held _____
Address _____ Start Date _____ End Date _____
Contact Name _____ Phone Number _____

Applicant - Cont'd

Former Employer _____ **Position Held** _____
Address _____ **Start Date** _____ **End Date** _____
Contact Name _____ **Phone Number** _____

b) All Others – Submit Proof of Income – See Page 1

Co-Applicant Name _____
Source of Income: Employment Pensions Self Employed Benefits Other
Current Monthly Income _____ Start date of current income _____

a) If Employed complete below – 5 year history

Current Employer _____ **Position Held** _____
Address _____ **Start Date** _____
Contact Name _____ **Phone Number** _____

Former Employer _____ **Position Held** _____
Address _____ **Start Date** _____ **End Date** _____
Contact Name _____ **Phone Number** _____

Former Employer _____ **Position Held** _____
Address _____ **Start Date** _____ **End Date** _____
Contact Name _____ **Phone Number** _____

b) All Others – Submit Proof of Income – See Page 1

CHECK LIST – See page 1 for instructions / information

- 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.....
-

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 Name: (please print) _____

Co-Applicant Signature: _____ Date: _____

Witness: Name (Print Please) _____

Signature: _____ Date: _____

Signatures of household members age 18 years and over.

Household Member Name: (please print) _____

Signature: _____ Date: _____

Household Member Name: (please print) _____

Signature: _____ Date: _____

Household Member Name: (please print) _____

Signature: _____ Date: _____

Pursuant to the Housing Services Act, 2011, 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 23rd floor, Hamilton, Ontario.

If you have any questions regarding this application, please call the Market Rent Dept. at 289-921-RENT (7368).

If, at first, you get an apartment that is not subsidized and later your income decreases, 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

Instructions: **There are two separate forms one for Senior bldgs. AND one for all other buildings**

- Check the box beside the address you would like to apply for.
- Check the box for each size of bedroom you are requesting.
- Parking – some properties may have waiting lists for parking spots or may not provide one at all.

This is a list of all the market rent properties CHH owns and manages. If the address is not on this list, please do not add it as we do not manage a wait list for it.

Senior Buildings - must be 59½ to apply				# of Bedrooms				
Check Box	Address	Unit Type	Bach	Studio	1	2	Notes	
<input type="checkbox"/>	280 Fiddler's Green	TH	<input type="checkbox"/>		<input type="checkbox"/>			
<input type="checkbox"/>	360 King St. E. (1 st Place)	Apt	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	1100 Limeridge Rd. E.	Apt			<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	25 Lynden Ave.	Apt			<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	65 - 90 Macassa Ave.	Apt			<input type="checkbox"/>		No elevator	
<input type="checkbox"/>	557 Queenston Rd.	Apt			<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	725 - 727 Upper Sherman	Apt			<input type="checkbox"/>		No elevator	

Building Selection Form – Cont'd

Other Buildings

Apt = apartment / semi = semi-detached / TH = townhouse

Check Box	Address	Unit Type	# of Bedrooms				Notes
			1	2	3	4	
<input type="checkbox"/>	96-110 Ashley St.	TH			<input type="checkbox"/>	<input type="checkbox"/>	4 bdrm - Modified
<input type="checkbox"/>	4 Bridgewater	TH		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Stacked TH's
<input type="checkbox"/>	101 Broadway	Apt	<input type="checkbox"/>	<input type="checkbox"/>			No elevator
<input type="checkbox"/>	10 Brock	TH			<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	89, 93 Century	TH			<input type="checkbox"/>		
<input type="checkbox"/>	430 Cumberland Ave.	Apt	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	170 East Ave.	Apt	<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/>	7 – 23 Gurnett Dr.	TH			<input type="checkbox"/>		Electric heat
<input type="checkbox"/>	122 Hatt St.	TH		<input type="checkbox"/>	<input type="checkbox"/>		Electric heat
<input type="checkbox"/>	89 King St. E.	Apt	<input type="checkbox"/>				No parking
<input type="checkbox"/>	95 King St. E.	Apt	<input type="checkbox"/>				No parking
<input type="checkbox"/>	211 King St. E.	Apt	<input type="checkbox"/>				
<input type="checkbox"/>	1781 King St. E.	Apt	<input type="checkbox"/>	<input type="checkbox"/>			No elevator
<input type="checkbox"/>	162 King William	Apt	<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/>	580 Limeridge Rd. E.	TH		<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	1150 Limeridge Rd. E.	TH		<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	1884 Main St. W.	Apt	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	1900 Main St. W.	Apt	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	67 Ossington Dr.	TH			<input type="checkbox"/>		
<input type="checkbox"/>	1081 Rymal Rd. E.	TH			<input type="checkbox"/>		
<input type="checkbox"/>	470 Stone Church Rd. E.	TH		<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	680 Stone Church Rd. W.	Apt	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<ul style="list-style-type: none"> • 1 bdrm – modified only • Electric heat
<input type="checkbox"/>	700 Stone Church Rd. W.	TH			<input type="checkbox"/>		Electric heat
<input type="checkbox"/>	25 Towercrest Dr.	TH		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	1285 Upper Gage Ave.	TH		<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	772 Upper Paradise	TH		<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	75 Wentworth St. N.	Apt		<input type="checkbox"/>	<input type="checkbox"/>		No elevator