



Request for Addition to RGI Household

SECTION 1 - Current RGI Tenant Information

First Name: _____	Last Name: _____
Address: _____	Unit: _____ City: _____
Phone Number: _____	Current number of Bedrooms: _____

SECTION 2 – Person Requesting to be Added to the Household

First Name: _____	Middle Name: _____
Last Name: _____	Alternate/Maiden Name: _____
What is your status in Canada? (Attach proof to the application):	
Canadian Citizen <input type="checkbox"/> Permanent Resident <input type="checkbox"/> Sponsored Immigrant <input type="checkbox"/> Refugee <input type="checkbox"/>	
Refugee Claimant <input type="checkbox"/> First Nations <input type="checkbox"/> Other (Please specify) _____	
Gender: Male <input type="checkbox"/> Female <input type="checkbox"/> Date of Birth _____ Marital Status _____	
Social Insurance Number (optional) _____	
Address: _____ Unit: _____ City: _____	
Province: _____ Postal Code: _____ E-mail: _____	
Home Phone: _____ Work Phone _____ Cell Phone: _____	
Present Accommodation: Own/co-own <input type="checkbox"/> Rent <input type="checkbox"/> Temporary <input type="checkbox"/> Staying with relative or friend <input type="checkbox"/>	
What is your relationship to the current tenant(s)? _____	

SECTION 3 – Housing History

List all previous address for the last 3 years for the person to be added to the household.

Previous Address: _____	
Move In Date: _____	Move Out Date: _____
Name of Landlord: _____	Landlord's Phone Number: _____

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Move In Date: _____	Move Out Date: _____
Name of Landlord: _____	Landlord's Phone Number: _____

Have you ever lived in rent-geared-to-income housing anywhere in Ontario? Yes No

If 'yes', please fill in the following chart.

Name of person listed on the lease: _____

Address: _____ Name of Housing Provider: _____

Move out Date: _____ Arrears Owing: \$: _____

Name of person listed on the lease: _____

Address: _____ Name of Housing Provider: _____

Move out Date: _____ Arrears Owing: \$: _____

If you owe money to a housing provider, you **MUST** attach a current copy of the repayment schedule, signed by the Provider. If you have outstanding arrears with no repayment agreement, your application will not be processed.

SECTION 4 – Declaration and Consent

I understand:

1. The information given on this Application shall be true, accurate, and complete. If not, my Application may be cancelled and my request to be added to an existing rent-geared-to-income household will be denied.
2. All required supporting material or documents needed by the Region of Waterloo, its representative(s), or housing providers, will be provided.
3. The application must be signed, but where the person required to sign does not have the capacity, it can be signed by an approved person who has power of attorney or the legal authority to complete/sign the application on behalf of the individual.

Consent and Authorization

All persons who sign this application consent to the exchange of personal information between the Region of Waterloo and any relevant persons, housing providers, Access Sites or institutions for the purpose of verifying the information supplied in this application, for determining eligibility for housing assistance.

All persons who sign this application and who receive Ontario Works (OW) or Ontario Disability Support Program (ODSP) assistance or child care subsidy consent to the exchange of personal information between the Region of Waterloo and OW, ODSP or child care subsidy offices for the purpose of verifying eligibility and the level of housing benefits or assistance.

If you sign with a mark (e.g. "X"), the signature must be witnessed. The witness must also sign this Application.

Date: _____ Signature of Applicant: _____

Signature of current RGI Tenant requesting addition to Household: _____

The Region of Waterloo Coordinated Access System follows the Ontario Human Rights Code to provide equal treatment and opportunity for all Ontario residents. The Region recognizes that an inclusive climate is essential to the future prosperity and social well-being of this province.

For Administration Use Only

Is the additional household member eligible for rent geared-to-income subsidy (housing provider to complete Eligibly Screening form for determination)? Yes No

Does the additional household member meet the Housing Provider Suitability requirements?
Yes No

If yes, after updated RGI calculation the household continues to be eligible for RGI: Yes No

Date Household Notified: _____

Approved by Provider: Yes No Date Provider Notified: _____