Who Can Apply?

1. At least one member of the household must be 16 years of age or older and able to live independently.
2. Each member of the household must be a Canadian citizen **or** has made an application for status as a permanent resident under the *Immigration and Refugee Protection Act* (Canada) **or** has made a claim for refugee protection under the *Immigration and Refugee Protection Act* (Canada) **and** no removal order has become enforceable against any member of the household.
3. No member of the household may owe money to any social housing provider in Ontario. For any amounts owing, the member must pay the amount owed, or make a payment agreement with the provider to pay the outstanding arrears. **Arrears must be paid in full at the time of offer; otherwise, the offer will be considered a refusal.**
4. No member of the household has been convicted of misrepresenting their income for the purpose of receiving rent-geared-to-income assistance in the past two years.
5. *O. Reg. 370/11* prescribes household income limits to determine eligibility for rent-geared-to-income assistance only (i.e. does not apply to affordable housing).
6. Household assets must be within the limit as per the Asset Limit Policy established by the United Counties of Leeds and Grenville.

How to Complete the Application:

1. Complete all sections of the application. If your application is incomplete, it will be kept on file for 30 days for receipt of outstanding information. **Eligibility will be determined once all required information is received and your chronological ranking date is based on the date the application is complete.**
2. The application must be signed by the applicant, co-applicant, and all non-dependent members of the household, or a person authorized to sign on behalf of any member who is unable to sign. Please read the declaration and consent before signing the application form.
3. Submit the completed application and all supporting documentation to:

Attention: Social Housing Registry
The United Counties of Leeds and Grenville
Community and Social Services Division – Housing Department
25 Central Avenue West, Suite 200
Brockville, ON K6V 4N6

4. Applications may also be submitted to any non-profit/co-operative housing provider.
5. **Your application will be acknowledged in writing once eligibility has been determined** (applications may take up to 30 days to process).

Application for Subsidized Housing

Personal information contained on this form or in attachments is collected, pursuant to the *Housing Services Act, 2011. Sections 169, 170, 171, 172, 173, 174, 175 and 176,* or the *Municipal Freedom of Information and Protection of Privacy Act, (R.S.O. C.M. 56).* The information collected in this application is for the purpose of determining eligibility for rent-geared-to-income assistance and affordable housing. Rent is based on net household income for rent-geared-to-income assistance and affordable rent is 80 per cent of the Average Market Rent for the area as published periodically by Canada Mortgage and Housing Corporation (CMHC). This housing is considered subsidized housing because it was built and is maintained with government funding.

If you have any questions or require assistance completing this application, please contact the Social Housing Registry at 613-342-3840 ext. 2450.

1. Applicant

Last Name		**Gender Identity*** ☐ Male ☐ Female ☐ _____ *Used to determine occupancy standards
First Name		
Middle Name		
Birthdate (mm/dd/yyyy)		

Status in Canada - Attach Documentation ☐ Canadian Citizen ☐ Landed Immigrant ☐ Refugee Claimant	***Office Use Only*** **Document Received** ☐	**Social Insurance Number**

Current Address

Apt. No.	**Street Address**

P.O. Box (if applicable)	**City**	**Postal Code**

Home Telephone	**Work Telephone**	**Alt. Telephone (cell, etc.)**	**May we contact you at work?** ☐ Yes ☐ No

Mailing Address if Different	**Email Address**

Alternate Contact Name	**Relationship to Applicant**	**Contact Telephone Number**

2. Co-Applicant				
Last Name				**Gender Identity*** ☐ Male ☐ Female ☐ _____ *Used to determine occupancy standards
First Name				
Middle Name				
Birthdate (mm/dd/yyyy)				
Status in Canada - Attach Documentation ☐ Canadian Citizen ☐ Landed Immigrant ☐ Refugee Claimant		***Office Use Only*** **Document Received** ☐	**Social Insurance Number**	
Current Address				
Apt. No.	**Street Address**			
P.O. Box (if applicable)	**City**			**Postal Code**
Home Telephone	**Work Telephone**	**Alt. Telephone (cell, etc.)**	**May we contact you at work?** ☐ Yes ☐ No	
Mailing Address if Different			**Email Address**	
Alternate Contact Name	**Relationship to Applicant**	**Contact Telephone Number**		

3. Other Household Members to Reside in Accommodation Applied for:

Last Name	First Name	Social Insurance Number	Gender Identity	Birth Date (mm/dd/ yyyy)	Relationship to Applicant	Status in Canada Canadian Citizen, Landed Immigrant, Refugee Claimant *(Office Use Only* Document Received)
						☐
						☐
						☐
						☐
						☐

A. Are all household members currently residing at the same address? ☐ Yes ☐ No

If "No" give reason for separation. *Copies of documentation of custody/visiting arrangements must be provided.*

_____

_____

_____

B. Is any member of the household expecting a baby? ☐ Yes ☐ No If yes, date expected: _____

(mm/dd/yyyy)

Please contact the Social Housing Registry when the baby is born.

4. Income from All Sources

Definition of Income - Income includes money of every kind and source such as employment or self-employment income (e.g. salary, overtime premiums, commissions), rental income, pension income from any public or private source, any government income (e.g. Employment Insurance, Worker's Compensation, Ontario Works, Ontario Disability Support Program), annuities, inheritance, alimony/support payments, interest from saving accounts, investments and term deposits, grants, scholarships, etc. **If no income is received indicate "NIL".**

Source of Income	Net Monthly Income	
	Applicant/Tenant	Other Household Member(s)
Employment or Self-employment	**$**	**$**
Employment Insurance (EI)	**$**	**$**
Workplace Safety and Insurance Board (WSIB)	**$**	**$**
Ontario Works (OW)	**$**	**$**
Ontario Disability Support Program (ODSP)	**$**	**$**
Spousal Support	**$**	**$**
Pension Income(s):		
Canada Pension Plan (CPP)/Canada Pension Plan-Disability (CPP-D), Provincial Pension (QPP)	**$**	**$**
Old Age Security (OAS)	**$**	**$**
Guaranteed Income Supplement (GIS)	**$**	**$**
Guaranteed Annual Income Support (GAINS)	**$**	**$**
Private Pension	**$**	**$**
Foreign Pension(s) including U.S. Social Security	**$**	**$**
Registered Retirement Income Fund (RRIF)	**$**	**$**
Other (specify):	**$**	**$**

5. ASSETS

All assets must be declared for each household member, including assets that are jointly owned with others outside of your household. Up-to-date documentation of all assets is required.
Note: If your household owns more accounts then there are spaces on the form, or assets of any kind that are not listed on the form, please ensure this information is noted and attached for all accounts. Attach additional pages if required.

Transferred Assets: If a member of your household has disposed of or transferred any assets within the past 12 months, you must provide the details of this information. For example: if you have sold a house, transferred investments to someone outside of your household, or sold a vehicle.
Add details of transferred assets:

Source of Income	Net Monthly Income	
	Applicant/Tenant	**Other Household Member(s)**
Bank Account(s) Provide the last three (3) consecutive months with an up-to-date balance. Examples: chequing accounts, savings accounts, overseas or foreign accounts. Provide current bank statements showing the account balance for **all** accounts.	**Applicant/Tenant**	**Other Household Member(s)**
	$	**$**
Bank Name Account Number	**$**	**$**
Bank Name Account Number	**$**	**$**
Bank Name Account Number	**$**	**$**
Investments Provide a current statement from the bank or financial institution showing the amount of the investment.	**Applicant/Tenant**	**Other Household Member(s)**
Term Deposits, Guaranteed Income Certificates (GICs)	**$**	**$**
Stocks, Shares, Bonds	**$**	**$**
Mutual Funds	**$**	**$**
Overseas or foreign investments	**$**	**$**
Tax-Free Savings Accounts (TFSA)	**$**	**$**
Registered Accounts/Investments Examples: RRSP, RESP, RRIF, LIRA, LIF, RDSP Provide a current statement showing the value of the account, ownership and beneficiary.	**Applicant/Tenant**	**Other Household Member(s)**
Registered Retirement Savings Plans (RRSP)	**$**	**$**
Registered Education Savings Plans (RESP)	**$**	**$**
Registered Retirement Income Fund (RRIF)	**$**	**$**

Source of Income	Net Monthly Income	
	Applicant/Tenant	Other Household Member(s)
Registered Disability Savings Plan (RDSP)	**$**	**$**
Locked-In Retirement Account (LIRA)	**$**	**$**
Locked-in Income Fund (LIF)	**$**	**$**
Term or Life Annuity	**$**	**$**

Other Assets	Applicant/Tenant	Other Household Member(s)
Life Insurance The amount of the cash surrender value is an asset. Provide the insurance policy that states the current cash surrender value.	**$**	**$**
Trust Account Trust fund documents to show the amount and beneficiary	**$**	**$**
Real Estate Equity (House, Land, or other property). Includes property in Canada or other countries. Provide the following: • The value of the property according to your MPAC assessment, minus mortgages, lines of credit of liens secured on the property. Provide your MPAC Assessment and current mortgage statement.	**MPAC Assessment Value**	**MPAC Assessment Value**
	$	**$**
	Total Loans/Mortgages	**Total Loans/Mortgages**
	$	**$**
Personal Vehicle • Car, truck, motorcycle Vehicle Ownership papers **and** provide loan documents only if your household owns more than one vehicle **and** if your vehicle is valued above $15,000.	**$**	**$**
Recreational Vehicles Vehicle Ownership papers, **and** verification of any debts owing. Example: boat, snowmobile, all-terrain vehicle, camper	**$**	**$**

Business Assets • Business Bank Accounts • Business property • Business vehicle • Taxi license	**Applicant/ Tenant**	**Other Household Member(s)**
Provide supporting documents to verify the value of business assets.	**$**	**$**

6. Social Housing History

Have you or any member of your household previously lived in rent-geared-to-income (subsidized) or social housing in the province of Ontario? ☐ Yes ☐ No

If **Yes** complete the following:

I.	Housing Provider Name and Address	From (date)			To (date)		
		mm	dd	yyyy	mm	dd	yyyy
	Name on Lease or Tenancy Agreement	**Rental or Damage Arrears Owing**					
		$					

II.	Housing Provider Name and Address	From (date)			To (date)		
		mm	dd	yyyy	mm	dd	yyyy
	Name on Lease or Tenancy Agreement	**Rental or Damage Arrears Owing**					
		$					

III.	Housing Provider Name and Address	From (date)			To (date)		
		mm	dd	yyyy	mm	dd	yyyy
	Name on Lease or Occupancy Agreement	**Rental or Damage Arrears Owing**					
		$					

7. Social Housing Arrears

Eligibility for rent-geared-to-income assistance requires that monies owed to any social housing provider in Ontario be paid in full or have an active payment agreement in place. **Arrears must be paid in full at the time of offer; otherwise, the offer will be considered a refusal.**

Does any member of the household owe money (i.e. unpaid rent or damages) to any social housing provider in Ontario? ☐ Yes ☐ No

If yes, attach a copy of your payment agreement with the housing provider.

☐ Payment Agreement attached. Must be making payments per the agreement to be on the waitlist.

8. Previous Evictions

Have you, or any member of your household, been found guilty of misrepresenting your income for the purpose of receiving rent-geared-to-income assistance under the Criminal Code (Canada), the Landlord and Tenant Board, or a court of law within the last two years? ☐ Yes ☐ No

Have you, or any member of your household, been evicted from a "social housing" unit for a serious illegal act within the last five years? ☐ Yes ☐ No

9. Housing Benefits	Yes	No
a) Is your household currently in receipt of any type of Housing Allowance Benefit?	☐	☐
b) Is your household currently in receipt of the Portable Housing Benefit or Portable Housing Benefit Special Priority Placement (SPP)?	☐	☐
c) Has your household received Home Ownership or Ontario Renovates assistance?	☐	☐
d) Does your household owe monies to the Housing Allowance, Home Ownership or Ontario Renovates programs in Leeds Grenville?	☐	☐

10. Health Factors to be Considered

All households requiring a modified unit must submit a Verification of Disability or Medical Condition form completed by his/her medical doctor.

Do you require barrier-free access? ☐ Yes ☐ No (No entry stairs; require ramp, lift, or elevator)	Are you hearing impaired? ☐ Yes ☐ No
Are you able to climb stairs? ☐ Yes ☐ No	Are you sight impaired? ☐ Yes ☐ No

Do you use a powered mobility device, such as a mobility scooter or powered wheelchair? ☐ Yes ☐ No
If yes, please request and submit a completed Powered Mobility Device Registration Form with your application.

☐ **Other (Please specify):** _____

☐ **Other (Please specify):** _____

11. Number of Bedrooms Required

The number of bedrooms your household is eligible for is determined by local occupancy standards for rent-geared-to-income assistance. Generally, spouses/same-sex partners are expected to share a bedroom and an additional bedroom is allowed for each additional member of the household. Dependents of the same gender with an age difference of five years or less may share a bedroom if preferable. Notify the Social Housing Registry of special circumstances (medical conditions, custody or visitation agreements) that may impact on eligible unit size and attach supporting documentation.

Unit Size Required:

☐ Bachelor ☐ 1 Bedroom ☐ 2 Bedroom ☐ 3 Bedroom ☐ 4 Bedroom ☐ No Preference

Note: Each household must complete the **Building Selection** form attached to indicate their preferred housing locations. If the household does not submit a completed Building Selection form, applicant household will be added to every location which has units with the number of bedrooms for which you qualify. Specific unit eligibility is also determined by age and family composition.

12. Special Priority Status

Any applicant or member of the household whose personal safety is at risk because of abuse by a person with whom they live in a familial relationship may apply for the special priority household category. To be considered for Special Priority, you must submit a Request for Special Priority Household Category.

Do you intend to submit a Request for Special Priority Household Category? ☐ **Yes** ☐ **No**

13. Transfer Requests

If you are currently a social housing tenant, are you requesting a transfer because you are:

☐ Overhoused (eligible for fewer bedrooms) ☐ Underhoused (eligible for more bedrooms)

☐ Other (please explain)		

Have you submitted an Internal Transfer Request form? ☐ **Yes** ☐ **No**
If yes, was the internal transfer approved or denied? ☐ **Approved** ☐ **Denied**

The following sections are not required to determine eligibility, but may be helpful when selecting building location preferences.

14. Parking

Parking spaces are limited at many buildings. You may want to inquire about parking availability and consider it when choosing building preferences. If you refuse an offer due to parking not being available, your application will be made ineligible and will need to re-apply, unless you agree to be removed from that buildings waitlist.

Do you require parking? ☐ **Yes** ☐ **No**

Note: Parking spots are for Tenants only. The vehicle must be registered in the Tenant's name and the Tenant must have a valid driver's permit.

15. Pets

Do you have Pets? ☐ Yes ☐ No

Type of Pet(s): _____ **No. of Pets:** _____

Number and type of pets must comply with local municipal bylaws governing pets.

Documentation Requirements (submit copies with completed Application)

Proof of citizenship for each household member (i.e. birth certificate, citizenship, or landed immigrant or refugee status documents.	☐

Most recent Notice of Assessment (NOA) for each member of the household. To obtain a copy of your Notice of Assessment, contact Canada Revenue Agency at 1-800-959-8281.	☐
Canada Child Benefit (CCB) and Ontario child benefit (OCB) Notice for all dependents under 18 years of age.	☐
Custody/visitation Agreement for any dependents with a parent that does not live with the household.	☐
Verification of school status for applicants/tenants attending school who are over the age of 18.	☐
Documentation of assets for all household members, as outlined in the "Assets" section.	☐
Copy of an active payment agreement for amounts owing to any social housing provider in Ontario (if applicable).	☐
Consent to Email Form (if applicable) (attached)	☐
Powered Mobility Device Registration Form (if applicable)	☐
Completed Building Selection Form (attached)	☐

Declaration and Consent

I/we, the undersigned, understand and declare,

1. That all information given in this application and any supporting documentation is correct and complete.
2. That the Social Housing Registry/Housing Department and/or housing providers selected will use the information provided to determine initial and ongoing eligibility for rent-geared-to-income assistance, and/or social housing and to determine the amount of assistance for which I/we are eligible.
3. That if any information in this application is incorrect or not true, the Social Housing Registry/Housing Department and/or the housing providers selected in this application may request additional information, cancel this application, or both, and I/we may be prohibited from re-applying for assistance for a minimum period of two years under the *Housing Services Act, 2011*.
4. That only the individual members included in this application may live with me/us in subsidized housing.
5. That all members of the household are residing in Canada legally.
6. That any money owed to any social housing provider in Ontario must be paid, or have an active payment agreement in place, before this application is eligible for rent-geared-to-income assistance, and included on the centralized waiting list. An active payment agreement means that payment amounts, and dates, agreed to in the payment agreement are upheld.
7. That any changes to this application must be reported to the Social Housing Registry and/or directly to the housing provider, within 30 days of the change.
8. That an Update/Change of Information form must be completed and returned at least once each year and as requested by the Social Housing Registry. Failure to return the Update/Change of Information form may result in my/our application being cancelled.
9. That any information provided in this application and any supporting documentation may be verified, and I/we authorize any person, corporation or any social agency having knowledge of the information provided, to release that information to the Social Housing Registry/Housing Department and/or other social housing provider within the United Counties of Leeds and Grenville for the purpose of determining initial or ongoing eligibility for rent-geared-to-income assistance.
10. That the Social Housing Registry/Housing Department may complete a consumer credit enquiry for all adult members included in this application for the purpose of verifying sources of income and/or property.

Further, I/we understand that certain laws allow personal information to be collected or shared with others, and that any information in this application and any supporting documentation which is given to a body listed herein is confidential and will only be given in accordance with the Housing Services Act, 2011 and associated regulations.

Specifically, I/we consent to the information in this application and any supporting documentation to be given, without further notice, to:

1) Social services offices, other municipal service managers or district social services administration boards and housing providers, if the information is necessary for the purpose of making decisions or determining eligibility for assistance under the *Housing Services Act, 2011*, the *Ontario Works Act, 1997*, the *Ontario Disability Support Program Act, 1997*, or the *Day Nurseries Act*.
2) The government of Canada, a department, ministry, or agency of it, if the information is necessary for the purpose of administering or enforcing the *Income Tax Act* (Canada) or the *Immigration Act*.
3) Any government or body with whom an agreement has been made under the *Housing Services Act, 2011*, for the purpose of conducting research related to a social benefit program or social housing or rent-geared-to- income assistance program.
4) Employees of the Community and Social Services Division of the United Counties of Leeds and Grenville, once eligibility has been established for at least one program, if the information relates to ongoing eligibility with any program provided by the Community and Social Services Division.

Signatures of Household Members

This Application and Declaration and Consent must be signed by the applicant, co-applicant and all non-dependent members of the household.

Non-Dependent means any member of the household that is not dependent on another member of the household and whose income is included for the purposes of calculating rent-geared-to-income assistance. An adult child of another member of the household, under the age of 21, in full time attendance at school, and living away from the household during the school year, is considered a **dependent** if he/she resides with the household during school breaks.

Applicant Household Member	_____	**Co-applicant Household Member**	_____
Date (mm/dd/yyyy)	_____		

Personal information contained in this Application or any attachments hereto is collected by the Social Housing Registry pursuant to the *Housing Services Act, 2011 Sections 169, 170, 171, 172, 173, 174, 175 and176,* and the *Municipal Freedom of Information and Protection of Privacy Act*, *(R.S.O. C.M. 56)* for the purpose of determining initial or ongoing eligibility for subsidized housing, and may be used to calculate the applicable rent-geared-to-income charge. Questions about this collection should be directed to the United Counties of Leeds and Grenville, Clerk's Department, 25 Central Avenue West, Suite 100, Brockville, ON K6V 4N6 or telephone 613-342-3840 ext. 2307.

For Office Use Only	
Arrears/Misrepresentation/Criminal Act: ☐ **Rent Café** ☐ **Voyager PM** ☐ **Provincial Database** ☐ **No Misrepresentation Confirmed** ☐ **No Arrears Confirmed** ☐ **No eviction due to serious criminal act (N6)**	**Receipt of Other Housing Benefits:** Note: circle the applicable program sub-type (e.g. IAH). ☐ **Portable Housing Benefit** ☐ **Portable Housing Benefit (SPP)** ☐ **Housing Allowance (IAH, OPHI)** ☐ **Ontario Renovates (IAH or SIF)** ☐ **Home Ownership (IAH)** ☐ **Canada-Ontario Housing Benefit (COHB)**
Date Application determined Complete (mm/dd/yyyy):	
Application Determined: ☐ **Eligible** ☐ **Not Eligible**	**Reason Not Eligible:**
Date: _____	
Eligibility Date Entered in Rent Cafe: _____	
Entered By: _____	

Types of Housing in the United Counties of Leeds and Grenville

Affordable Housing

Affordable housing is not rent-geared-to-income; however, you must be eligible for rent-geared-to-income assistance to qualify for affordable housing units. Household income limits for rent-geared-to-income units do not apply to affordable housing. Rent for affordable housing units is approximately 80% of average market rent as published annually by the Canada Mortgage and Housing Corporation (CMHC).

Affordable housing is available in Elgin, Prescott, and Oxford Mills. To apply for affordable housing units, complete an Application for Subsidized Housing, and submit it to the Social Housing Registry.

Market Rent Housing

Market rent housing refers to units with rent at the low end of private market rents and is provided by some non-profit housing providers.

Apply directly to the non-profit/co-operative housing corporation for a market rent unit.

Rent-Geared-To-Income (RGI) Housing

- **Public housing –** The United Counties of Leeds and Grenville (the Counties) owns and maintains the public housing portfolio. Public housing consists of 667 rent-geared-to-income units – 488 apartment units in 15 multi-residential buildings throughout Leeds Grenville, and 179 family units in Brockville and Prescott. All public housing units are designated smoke free.
- **Non-profit housing –** Owned and maintained by a non-profit corporation and managed by a volunteer Board of Directors. Some non-profit housing units are designated smoke free.
- **Rent supplement housing –** Rent-geared-to-income units provided by private landlords through an agreement with the Counties. A rent supplement subsidy is paid directly to the landlord by the Counties. The rent supplement subsidy is equal to the difference between the full monthly rent for the unit and the geared-to-income rent payable by the tenant.
- **Co-operative housing –** Requires membership and participation in managing, governing and maintaining the co-operative.

Apply to the Social Housing Registry or directly to the housing provider. The housing provider will forward your application to the Social Housing Registry.

Waitlists for the following non-profit providers are managed by the housing administrator; apply directly to the non-profit housing administrator:

- Marguerita Residence Corporation http://www.margueritaresidence.ca

For additional information about each building and location, refer to the Social Housing Brochure available at www.leedsgrenville.com or at any Community and Social Services office.

Building Selection Form

Applicant/Tenant Name(s): _____

Address: _____

This form is completed in support of:
- ☐ An application for subsidized housing, or
- ☐ Determination that the household is overhoused
- ☐ Internal Transfer Request
- ☐ Secondary Suite Unit

Number of Bedrooms:

Indicate the number of bedrooms required for your household. Occupancy standards state that spouses are expected to share a bedroom, and another bedroom can be provided for each additional member of the household; however, you may choose fewer bedrooms if two members of the same gender who have a difference in age of five years or less share a bedroom. For example, a household with two boys aged 10 and 13 are eligible for a 3-bedroom unit, but could choose a 2-bedroom if preferred. If a 2-bedroom is selected, the two boys would be required to share a bedroom.

☐ Bachelor (BAC) ☐ 1 Bed (1br) ☐ 2 Bed (2br) ☐ 3 Bed (3br) ☐ 4 Bed (4br)

Smoke-Free - All public housing units are owned and administered by the United Counties of Leeds and Grenville, Community and Social Services Division – Housing Department and many other Housing Providers are designated smoke-free. Note that multi-residential buildings are still transitioning, and the Counties cannot guarantee that the building will be 100% smoke-free, or that the unit offered was not previously smoked in.

Parking - There are waitlists for parking spaces at a number of our buildings. A unit may be offered without parking space. If you refuse an offer due to parking not being available, your application will be made ineligible and you will need to re-apply, unless you agree to be removed from that buildings waitlist.

Units/Buildings:

Adult buildings are designated to accommodate one or more adults and designed to meet the needs of an adult household. Applicants who identify as roommates or couples without children *(under 18 years of age)* are suitable to occupy an adult unit.

Family units are designated to accommodate a family household, including households with children or dependents. Roommates are not considered to be a family household for the purpose of occupying a designated family unit where the housing provider is United Counties of Leeds and Grenville.*(identified by *)*

Seniors Buildings are designated to accommodate one or more adults 65 years or older. Applicants who identify as roommates or couples over the age of 65 years are suitable to occupy a senior unit. Applicants may apply to the waiting list for seniors-only buildings at age 50 as per Policy HDPOL37 Cascading Age Policy.

Family Units:

Check	Household Type	Provider	Region	Address	Building Type	Bedroom Type at Building	Description
	Family	United Counties of Leeds and Grenville Housing Department	Brockville	5 1/2 Glengarry Road	Townhouse	2br, 3br, 4br	Smoke Free
	Family	United Counties of Leeds and Grenville Housing Department	Brockville	Bartholomew Street	Townhouse	2br, 3br	Smoke Free, Parking
	Family	United Counties of Leeds and Grenville Housing Department	Brockville	Bisley Crescent	House	2br,3br	Smoke Free
	Family	United Counties of Leeds and Grenville Housing Department	Brockville	Brighton Crescent	House	2br, 3br, 4br	Smoke Free
	Family	Brockville Municipal Non-Profit Housing Corporation	Brockville	Earlscourt - 12 Central Avenue	Townhouse	2br, 3br	Smoke Free
	Family	Shepherds Green Co-Operative Homes	Brockville	Liston Avenue	Townhouse	1br, 2br, 3br	
	Family	United Counties of Leeds and Grenville Housing Department	Brockville	Peden Blvd.	House	3br	Smoke Free
	Family	United Counties of Leeds and Grenville Housing Department	Brockville	Reynolds Drive	House	2br, 3br	Smoke Free

	Family	United Counties of Leeds and Grenville Housing Department	Brockville	Salisbury Avenue	House	2br, 3br	Smoke Free
	Family	Township of Bastard and South Burgess Non-Profit Housing Corporation	Delta	Delta Park	Semi Detached	3br	
	Family	South Crosby Non-Profit Housing Corporation	Elgin	Pineview - Maple / Cedar Street	Townhouse	1br, 2br, 3br	
	Family	Gananoque Family Housing	Gananoque	Hampton Heights - Victoria Avenue	Townhouse	2br, 3br, 4br	
	Family	Township of Bastard and South Burgess Non-Profit Housing Corporation	Portland	Family - Harlem Rd	Semi Detached	3br	
	Family	United Counties of Leeds and Grenville Housing Department	Prescott	Boundary Street	House	2br	Smoke Free
	Family	United Counties of Leeds and Grenville Housing Department	Prescott	Churchill Road	House	2br, 3br	Smoke Free, Modified Units
	Family	United Counties of Leeds and Grenville Housing Department	Prescott	Edward Street	House	3br	Smoke Free
	Family	United Counties of Leeds and Grenville Housing Department	Prescott	Fort Town Drive	Townhouse Duplex	2br, 3br, 4br	Smoke Free

	Family	United Counties of Leeds and Grenville Housing Department	Prescott	Roberta Crescent	House	2br, 3br	Smoke Free
	Family	United Counties of Leeds and Grenville Housing Department	Prescott	Victor Crescent	Townhouse Duplex	3br	Smoke Free
	Family	United Counties of Leeds and Grenville Housing Department	Prescott	Victor Road	House	2br, 3br	Smoke Free

Adult Buildings:

Check	Household Type	Provider	Region	Address	Building Type	Bedroom Type at Building	Description
	Adult	United Counties of Leeds and Grenville Housing Department	Brockville	11 Hastings Drive	Apartment	1br	Smoke Free, Limited Modified Units
	Adult	United Counties of Leeds and Grenville Housing Department	Brockville	55 Reynolds Drive	Apartment	1br, BAC	Smoke Free, Limited Modified Units, Parking Not Available, Waitlist for Space
	Adult	United Counties of Leeds and Grenville Housing Department	Brockville	100 Perth Street	Apartment	Partially furnished BAC	Smoke Free, Parking Not Available, Waitlist for Space
	Adult	United Counties of Leeds and Grenville Housing Department	Cardinal	240 Helen Street	Apartment	1br	Smoke Free

	Adult	United Counties of Leeds and Grenville Housing Department	Gananoque	150 Stone Street South	Apartment	1br	Smoke Free, Parking Not Available, Waitlist for Space
	Adult	United Counties of Leeds and Grenville Housing Department	Kemptville	15 Water Street	Apartment	BAC, 1br, 2br	Smoke Free, Limited Modified Units
	Adult	United Counties of Leeds and Grenville Housing Department	Kemptville	200 Bridge Street	Apartment	1br	Smoke Free
	Adult	United Counties of Leeds and Grenville Housing Department	Kemptville	201-203 Prescott Street	Apartment	BAC, 1br, 2br, 3br	Smoke Free, Parking Not Available, Waitlist for Space
	Adult	United Counties of Leeds and Grenville Housing Department	Mallorytown	3 Miller Drive	Apartment	1br	Smoke Free, Parking Not Available, Waitlist for Space
	Adult	United Counties of Leeds and Grenville Housing Department	Merrickville	105 Lewis Street	Apartment	1br	Smoke Free
	Adult	United Counties of Leeds and Grenville Housing Department	Merrickville	318 Brock Street	Apartment	1br	Smoke Free
	Adult	United Counties of Leeds and Grenville Housing Department	Prescott	275 Water Street	Apartment	1br	Smoke Free, Parking Not Available, Waitlist for Space

	Adult	United Counties of Leeds and Grenville Housing Department	Prescott	503 Fort Town Drive	Apartment	1br	Smoke Free
	Adult	United Counties of Leeds and Grenville Housing Department	Prescott	523 Hyde Street	Apartment	1br	Smoke Free
	Adult	United Counties of Leeds and Grenville Housing Department	Spencerville	33 Bennett Street	Apartment	1br	Smoke Free
	Adult	United Counties of Leeds and Grenville Housing Department	Westport	56 Bedford Street	Apartment	1br	Smoke Free, Parking Not Available, Waitlist for Space

Expected availability – October 2027							
	Adult	Municipality of North Grenville	Kemptville	15 Campus Drive	Apartment	1br	Smoke Free

Seniors Buildings:

Check	Household Type	Provider	Region	Address	Building Type	Bedroom Type at Building	Description
	Senior	Athens & District Non-Profit Housing Corporation	Athens	8 Charleston Lake Road, Athens	Apartment	1br	Seniors 65+

	Senior	United Counties of Leeds and Grenville Housing Department	Brockville	80 Water Street West	Apartment	1br, BAC	Smoke Free, Seniors 65+, Limited Modified Units, Parking Not Available, Waitlist for Space
	Senior	Legion Village 96 Seniors Residence	Brockville	Charlotte Place	Apartment	1br	Seniors 65+
	Senior	Gananoque Housing Incorporated	Gananoque	Stocking Hill - Emma Street	Apartment	1br	Seniors 65+
	Senior	United Counties of Leeds and Grenville Housing Department	Lansdowne	43 Centre Street	Apartment	1br	Smoke Free, Seniors 65+, Parking Not Available, Waitlist for Space
	Senior	Township of Bastard and South Burgess Non-Profit Housing Corporation	Portland	Portland - Mill Bay Court - Campbell Road	Apartment	1br	Seniors 65+
	Senior, Rent Supplement	United Counties of Leeds and Grenville Housing Department	Brockville	Wall Street Village - 11 James Street West	Apartment	1br	Seniors 65+
	Senior, Rent Supplement	South Crosby Non-Profit Housing Corporation	Elgin	Rideau Lakes - 48 Main Street	Apartment	1br	Seniors 60+

Rent Supplement Units:

Check	Household Type	Provider	Region	Address	Building Type	Bedroom Type at Building	Description
	Rent Supplement	United Counties of Leeds and Grenville Housing Department	Brockville	RS Brockville - North	Scattered Units	1br, 2br	
	Rent Supplement	United Counties of Leeds and Grenville	Brockville	RS Brockville - South	Scattered Units	1br	

		Housing Department					
	Rent Supplement	United Counties of Leeds and Grenville Housing Department	Kemptville	RS Kemptville	Scattered Units	1br, 2br, 3br	
	Rent Supplement	United Counties of Leeds and Grenville Housing Department	Prescott	RS Prescott	Scattered Units	1br	

Affordable Units:

Check	Household Type	Provider	Region	Address	Building Type	Bedroom Type at Building	Description
	Affordable	Elgin Seniors Housing Board	Elgin	Harry Seeley	Single Detached	1br	Senior 60+
	Affordable	Private Developer Oxford Mills	Oxford Mills	Oxford Mills (Affordable) - Water Street	Townhouse	2br	Smoke Free, No Pets
	Affordable	United Counties of Leeds and Grenville Housing Department	Prescott	Churchill Road - Affordable Churchill Road	Semi Detached	2br	Smoke Free, Must be 55+, Require a 2 Bedroom Modified Unit

Applicant/Tenant Signature _____ Date _____

Applicant/Tenant Signature _____ Date _____

Email
Information Sheet

As we continue to move to a paperless environment, the United Counties of Leeds and Grenville (Leeds Grenville) has introduced the ability to communicate with applicants and tenants through email. In order for authorized staff to communicate with you through email, you must provide consent. Please review the following conditions and risks, and sign the consent to indicate you agree to receive future communication from the United Counties of Leeds and Grenville Housing Department, by email.

It is important for you to know that Counties' staff will only use email to communicate information of value for the delivery of housing programs. Email will be used to communicate housing offers, eligibility decisions, appointments, sharing of relevant information, annual reviews, etc.

All communications may become part of your file. You have the same right of access to such communications as you do to the remainder of your file. If you have signed consent to share information with other programs administered by the Counties, your email messages may be forwarded to another Counties' staff member as needed to deliver service. Your messages and/or information may be shared with external service providers, for programs you are currently receiving. We will not share your messages externally unless you have consented, or authorized by provincial or federal law.

Conditions for use:

- Messages should be brief. Please telephone the office or make an appointment to discuss more involved matters.
- If you need to discuss something urgently or to communicate time sensitive matters, please call our office.
- It is your responsibility to follow up with Counties' staff if required.
- It is your responsibility to notify the Counties of any changes to your email address.
- Messages may be printed and retained on your file.
- Email privileges will be removed for frivolous messaging, threatening or inappropriate messages, spamming or excessive messaging resulting from impatience.
- Emails to Counties' staff must include the name of the staff to which you are sending the email, and the sender's full name.

What can email messaging be used for?

- Schedule, re-schedule, cancel or confirm appointments.
- Sharing information – e.g. change of address, phone number or other personal documents.
- Sending notice of decisions.
- General inquiries - request a form, a referral, etc.
- Attempt to contact when unable to contact by phone.

The Counties will reply to your email within one business day during business hours. If response is not received within one business day, the staff may be out of office; please call the office to ensure your needs are met.

Risks of using email:

There are some risks with using email. These risks include, but are not limited to:

- Messages can be accidentally sent to the wrong person by mistyping or using inaccurate email address.
- It is possible for a third party to breach the confidentiality of email and intercept messages without authorization or detection.
- Email messages can be altered, forwarded or circulated; stored electronically or on paper; and broadcast to unintended recipients.
- If you share your email address, information may be inadvertently communicated to others.
- Messages may be read on cell phones and laptops, which are vulnerable to being stolen or lost.
- Email is vulnerable to hacking, spam, viruses or someone trying to access your information.

Risks can be reduced by ensuring you do not open email messages and attachments from unknown contacts and keeping your email address up-to-date with Leeds Grenville. Ensure your phone is password protected. We recommend you also add Leeds Grenville as a "contact" so you can readily recognize emails coming from our office, and Leeds Grenville emails will not be sent to Junk Mail.

The United Counties of Leeds and Grenville will make every effort to maintain the security and confidentiality of email information sent and received, but full security and confidentiality cannot be guaranteed. The United Counties of Leeds and Grenville Housing Department is not liable for breaches of confidentiality caused by yourself.

Consent to Email

I hereby agree and give consent to the United Counties of Leeds and Grenville Housing Department, to communicate with me by email. I understand my email address will not be shared, sold, or used for any purpose other than to support the delivery of services to me by the United Counties of Leeds and Grenville Housing Department, except where required by law. In giving consent, I acknowledge I have reviewed and understand the risks and conditions for communicating by email with the United Counties of Leeds and Grenville Housing Department.

This consent is provided voluntarily and will remain valid as long as I am receiving services from the United Counties of Leeds and Grenville Housing Department, or until such time that I withdraw my consent, or email privileges are removed by UCLG.

EMAIL CONSENT:

I give consent to the use of email by and with the United Counties of Leeds and Grenville Housing Department to support program delivery. ☐ No ☐ Yes

Email address to use for email messaging: _____

☐ I have received a copy of, and have read, the "Information Sheet" and the "Consent to Email"

Name of recipient (please print)	Signature	Date
Name of spouse, if applicable	Signature	Date

**** Please note, it is your responsibility to notify us of any changes to your contact details****

Notice with Respect to the Collection of Personal Information

Personal information provided in this consent and through email messages between applicants and/or tenants and authorized representatives of the United Counties of Leeds and Grenville is collected and used in accordance with the provisions of the *Municipal Freedom of Information and Protection of Privacy Act*, or as otherwise required or permitted by law.

This consent applies to information shared in the form of electronic data exchanges for the delivery of housing programs.

For Office Use Only

Where Information Sharing consent has been signed, forward copies of completed email consent to the Housing Department.