Social Housing Registry Program
Housing and Social Services Department

Application for Rent-Geared-to-Income (RGI) Housing

How to Complete the Application:

1. Complete all sections of the application. Answer all questions.
2. The application and consent must be signed by each member of your household 16 years of age or older, or a person authorized in writing, on their behalf. Please read the declaration and consent before signing the application.
3. Submit the completed application **and all supporting documentation** to the Social Housing Registry (The Registry), Access Point Locations, or E-mail: theregistry@cityofkingston.ca

The Registry

- Mail to 362 Montreal Street Kingston K7K 3H5.
- Drop off Available 24hr (drop box located at entrance)
- Office Hours Mon-Fri 8:30 am - 4:30 pm

Date Received by The Registry

Rural Access Point Loughborough Housing Corporation

- Phone: 613-376-3638
- Drop off: 4377 William Street, Sydenham Mon-Thurs 9:00 am - 4:00 pm

Rural Access Point Rural Frontenac Community Services

- Please call ahead to ensure they are open. Phone: 613-279-3366
- Drop off: 11109 Garrett Street, Sharbot Lake Office Mon-Fri 8:00 am - 4:00 pm

General Eligibility Rules

1. At least one member of the household must be 16 years of age or older and be able to live independently without support services or can arrange their own support. A Household is defined as all people who will be living in the same RGI unit.
2. Each member of the household must be a Canadian Citizen, a Permanent Resident of Canada, a Refugee Claimant or has made an application to become a Permanent Resident and no removal order has become enforceable against any member of the household. **See Pg. 2 for list of acceptable documents.**
3. No member of the household owes money to any social housing provider in Ontario. You can apply if there is a repayment agreement which is in good standing.
4. No member of the household has been convicted of misrepresenting their income for the purpose of receiving RGI assistance in the past 2 years.
5. If any member of your household owns residential property suitable for year-round occupancy, they must agree to sell the property within 6 months of moving into subsidized housing.
6. Your total household income must be under the household income limits, these limits can be found here www.cityofkingston.ca/socialhousing.

Application Checklist

Please use this page to ensure that your application is complete when you submit it. Eligibility will only be determined once all required documents are received

☐ Signed Declaration and Consent (final page).
All household members 16 years of age and older must sign.

☐ Proof of age and status in Canada for all household members 16 or older (one of the Documents listed below).

- Canadian birth certificate
- Canadian passport
- Canadian Citizenship Card
- Religious records (i.e., Baptismal certificate) if born in Canada and noted on record.
- Notice of Birth Registration or Statement of Live Birth from Canadian provincial entity responsible for birth registration
- Indian Status Card
- Native band records
- Permanent Resident Card
- Record of Landing
- Immigrant or Permanent Resident Status
- Convention Refugee/Protected Person/Refugee Claimant status document
- Letter from the appropriate department of the Government of Canada stating the status of the application or date of hearing.
- Lawyer's letter indicating status under appeal and the section of Immigration Act under which the appeal falls.
- Canadian National Defence card
- A record of application for any of the above from applicable federal or provincial office
- Do not supply original documents – please photocopy or scan (both sides of document)
- **Health card or driver's license or SIN card or Photo ID card cannot be used for ID**

☐ Custody paperwork - legal court document/private agreement for custody or visitation rights (if applicable)

☐ Notice of Assessment (Income Tax) from Canada Revenue Agency for all household members 18 years or older – if not available or if it does not reflect current income, most recent paystubs etc.

☐ Declaration of all Assets

☐ Most recent statement of OW or ODSP (if applicable)

☐ Agreement to Sell Residential Property (if applicable)

☐ Building Preferences – chosen at end of application

☐ Copy of an active repayment agreement for amounts owing to any social housing provider in Ontario (if applicable)

Incomplete Applications may cause a delay in determining eligibility of an application

Section A: Main Applicant Information

First Name: Last Name:

Former Name(s): Preferred Name:

Date of Birth: Month: Day: Year:

Social Insurance Number:

Current Street Address: Unit #

City: Province: Postal Code:

Phone Number: Alternate Phone Number:

Email Address:

Do you give your consent to communicate by email? ◯ Yes ◯ No

Preferred method of communication: ☐ Phone ☐ Mail ☐ Email

Provide Mailing address if different from Current address above

Street Address: P.O. Box

City: Province: Postal Code:

Status in Canada (Mandatory Document)

◯ Canadian Citizen ◯ Permanent Resident ◯ Sponsored Immigrant
◯ Refugee Claimant ◯ Other_____

Preferred Language

◯ English ◯ Other _____(please specify)

Do you require an interpreter? ◯ Yes ◯ No

School Status

Are you enrolled in school full-time? ◯ Yes ◯ No If yes, name of school _____

Alternative Contact Information:
If you wish to add someone who we can discuss your application with

First & Last Name:

Relationship:

Agency/Shelter Name:

Phone Number: Email Address:

I understand that by providing an alternate contact, I am authorizing the release of personal information about my application and receipt of housing offers to this alternate contact or agency.

Section B: Household Information

List information about all adults & children including foster children that will live with you full or part - time. **If there are children who live with you part-time, please include custody documents**.

If there are more than 4 members in your household, include an **Additional Household Members for RGI Application** form available from The Registry or at www.cityofkingston.ca/socialhousing/.

Household Member #2 Information

First Name: Last Name:

Former Name(s): Relationship to Applicant:

Date of Birth: Month: Day: Year:

Social Insurance Number:

Household Member #2 is: ◯ Full-time Household member ◯ Part-time Household member

Status in Canada: ◯ Canadian Citizen ◯ Permanent Resident ◯ Sponsored Immigrant ◯ Refugee Claimant ◯ Other_____

Enrolled in school full-time? ◯ Yes ◯ No If yes, name of school _____

Household Member #3 Information

First Name: Last Name:

Former Name(s): Relationship to Applicant:

Date of Birth: Month: Day: Year:

Social Insurance Number:

Household Member #3 is: ◯ Full-time Household member ◯ Part-time Household member

Status in Canada: ◯ Canadian Citizen ◯ Permanent Resident ◯ Sponsored Immigrant ◯ Refugee Claimant ◯ Other_____

Enrolled in school full-time? ◯ Yes ◯ No If yes, name of school _____

Household Member #4 Information

First Name: Last Name:

Former Name(s): Relationship to Applicant:

Date of Birth: Month: Day: Year:

Social Insurance Number:

Household Member #4 is: ◯ Full-time Household member ◯ Part-time Household member

Status in Canada: ◯ Canadian Citizen ◯ Permanent Resident ◯ Sponsored Immigrant ◯ Refugee Claimant ◯ Other_____

Enrolled in school full-time? ◯ Yes ◯ No If yes, name of school _____

Household Information Cont'd	
Does any member of your household own residential property suitable for year- round occupancy? If yes, name of household member_____ **If yes, please complete Agreement to Sell form available from The Registry or at www.cityofkingston.ca/housing/**	◯ Yes ◯ No
Is any member of the household expecting a baby? If yes, date expected:_____ **Please contact The Registry when the baby is born.**	◯ Yes ◯ No
Answering the following voluntary, self-identification question informs the design of programs and services for specific populations. The answers will not directly impact access to RGI assistance. Do you or any household members identify as Indigenous?	◯ Yes ◯ No
Do you or any household member identify as having a Intellectual/Developmental Disability?	◯ Yes ◯ No

Section C: Current and Previous Housing Information

Current Living Situation

◯ Own/Co-own ◯ Rent ◯ Temporary Shelter ◯ Transitional ◯ Other

Current Subsidy Information

Is this a subsidized unit?	◯ Yes ◯ No
If yes, what type of subsidy?	

◯ Rent-Geared-to-Income ◯ Community Agency ◯ Portable Housing Benefit
◯ Ministry Housing Benefit ◯ Not sure

Rental Arrears

Do you or any household member have any rental arrears owed for current or past subsidized housing?	◯ Yes ◯ No
If yes, do you have a repayment agreement?	◯ Yes ◯ No

Misrepresentation

Have you, or any member of your household, been found guilty of misrepresentation of your income for the purpose of receiving RGI assistance under the Criminal Code (Canada), the Landlord and Tenant Board, or a court of law within the last **2 years**?	◯ Yes ◯ No

Section D: Monthly Income Information

Provide the monthly income for all members of the household who are 16 years or older. Provide the most recent Notice of assessment issued by the Canada Revenue Agency for all household members 18 years and older. If this is not available or if this is not reflective of current income, please provide other documentation such as the most recent Ontario Works or Ontario Disability Support Program monthly statement, or copies of recent pay stubs.

INCOME SOURCE	Applicant	Household Member #2	Household Member #3	Household Member #4
Household Member Name				
OW - Ontario Works	$	$	$	$
ODSP- Ontario Disability Support Program	$	$	$	$
Employment Income (full/part- time)	$	$	$	$
EI - Employment Insurance	$	$	$	$
Spousal Support	$	$	$	$
OAS - Old Age Security	$	$	$	$
GIS - Guaranteed Income Supplement	$	$	$	$
GAINS - Guaranteed Annual Income	$	$	$	$
CPP - Canada Pension Plan - Please note type i.e., disability, retirement	$	$	$	$
WSIB - Workplace Safety and Insurance Board	$	$	$	$
Any other Pensions - Specify:	$	$	$	$
Other Income - Specify:				

Section E: Assets

Asset Level Limits: Single $50,000 and Family $75,000.
Indicate the current value/balance of assets held by household members, including children.
Verification of Assets may be required

ASSET SOURCE	Applicant	Household Member #2	Household Member #3	Household Member #4
Household Member Name				
Bank Accounts – chequing	$	$	$	$
Bank Accounts - savings	$	$	$	$
Tax Free Savings Account	$	$	$	$
Registered Savings Plans (RRSP, RDSP, RESP) Please specify	$	$	$	$
Locked-in retirement account (LIRA)	$	$	$	$
Life income fund (LIF)	$	$	$	$
Retirement Income Fund (RIF)	$	$	$	$
Investments i.e. Stocks/Bonds/Mutual Funds	$	$	$	$
Real Estate (house, land, or property)	$	$	$	$
Life Insurance – cash surrender value	$	$	$	$
Personal Vehicle – car, truck, motorcycle	$	$	$	$
Recreational Vehicle – boat, snowmobile, all- terrain vehicle	$	$	$	$
Business Assets – bank accounts, property, vehicle, tools of the trade	$	$	$	$
Trust Funds	$	$	$	$
Other Assets Please specify	$	$	$	$

Section F: Special Priority Status

Special Priority Household Category gives priority ranking on the Social Housing Waitlist to applicants whose personal safety is at risk due to **domestic violence** or **human trafficking**.

Do you or any member of your household wish to apply for Special Priority status?

◯ Yes ◯ No

If yes, please complete a Special Priority Application found at www.cityofkingston.ca/socialhousing/.

Section G: Housing Needs and Preferences

Some units have stairs inside, and some buildings have stairs up to the 2nd floor of the building. Are you able to climb stairs?	◯ Yes ◯ No
There is at least one household member listed on this application that can live independently with or without supports?	◯ Yes ◯ No

Additional Bedroom – Medical

Do you require an extra bedroom to store medical equipment such as a scooter or electric wheelchair?	◯ Yes ◯ No

Modified Unit – roll in shower/lower countertops/larger doorways etc.

Do you require a modified unit?	◯ Yes ◯ No

If you answer yes to either, please complete a **Verification of Medical Condition for a Modified or Additional Bedroom** available from The Registry or at www.cityofkingston.ca/socialhousing/.

Housing Preferences

Please review the list of addresses over the next few pages and check the box for each location that you want to apply to. Housing Preferences are limited by eligibility requirements and occupancy standards.

City Central = South of Concession St/ Stephen Street & Princess at Bath Road
City North = North of Concession St /Stephen Street & Princess at Bath Road
City West = West of Cataraqui Creek
KFHC = Kingston Frontenac Housing Corporation

Co-operative Housing: The household members who live in the project are all members of the co-operative corporation. They are democratic communities where the residents actively participate and make decisions on how the co-op operates.

Modified Unit: A unit that has been modified to be accessible for an individual with physical disabilities to assist in living independently with or without support.

Occupancy Requirements (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, couples are expected to share a bedroom, and an additional bedroom is allowed for each additional member of the household. The smallest number of bedrooms allowed is one bedroom per two household members and couples can apply for a bachelor unit.

What size unit would you like to move into? Check all that apply:

☐ Bachelor ☐ One (1) bedroom ☐ Two (2) Bedroom ☐ Three (3) Bedroom

☐ Four (4) Bedroom ☐ Five (5) Bedroom

All household members over the age of 16 are required to sign below to confirm they have read the following:

1. Many providers are changing over Smoking units to Non-Smoking units as units become available. (See point 3)
2. When offered a unit by a Housing Provider, there will be a requirement to obtain Tenant Insurance.
3. If you refuse 1 offer from the addresses you have selected, your name will be removed from the centralized wait list.

Please, only select those addresses you are willing to move to.

Applicant Signature: _____

Household Member Signature: _____

City Central					
Select	**Housing Provider & Address**	**# of Bedrooms**	**Modified Unit # of Bedrooms**	**Building Type**	**Elevator/ Stairs**
☐	KFHC 205 Bagot St.	1	1	Apt.	Elevator
☐	KFHC 381 Bagot St.	1	1	Apt.	Elevator
☐	KFHC 645 Brock St.	Bach & 1	Bach & 1	Apt.	Elevator
☐	KFHC 28 Cliff Cr.	2,3,4,5	N/A	Town House	Stairs Only
☐	KFHC 36 Cliff Cr.	1	N/A	Apt. 2 Story	Stairs Only
☐	KFHC 40 Cliff Cr.	1	1	Apt.	Elevator
☐	KFHC 111 Van Order Dr.	1	N/A	Apt. 2 Story	Stairs Only
☐	KFHC 123 Van Order Dr.	Bach &1	N/A	Apt. 2 Story	Stairs Only
☐	KFHC 125 Van Order Dr.	1	N/A	Apt. 2 Story	Stairs Only
☐	KFHC 1-215 Curtis Cr.	3,4,5	N/A	Town House	Stairs Only
☐	KFHC 27 Wright Cr.	Bach,1	1	Apt.	Elevator
☐	KFHC 257 Rideau St.	2,3,4	2	Town House	Stairs Only
☐	Kingston Co-operative Homes 1338 Princess St.	1	1	Town House	Main Floor and Stairs
☐	KFHC 1316 Princess St.	1	1	Apt.	Elevator

City North					
Select	**Housing Provider & Address**	**# of Bedrooms**	**Modified Unit # of Bedrooms**	**Building Type**	**Elevator/ Stairs**
☐	KFHC 176 Wilson St	1	N/A	Apt. 2 story	Stairs Only
☐	KFHC 1130 Montreal St.	1 & 2	N/A	Apt. 2 Story	Stairs Only
☐	KFHC 1130 Montreal St	3 & 4	N/A	Town House	Stairs Only
☐	KFHC 300 Conacher Dr	1 & 2	N/A	Apt.	Elevator
☐	KFHC 312 Conacher Dr.	3	N/A	Town House	Stairs Only
☐	KFHC Scattered Weller Ave., Wilson St., Butler St., Drennan Ave., Barbara Ave.	3 & 4	N/A	Semi-detached	Stairs Only
☐	KFHC Scattered Weller Ave., Wilson St., Compton St.	2,3,4	N/A	Town House	Stairs Only
☐	KFHC 37 Cassidy St.	2,3,4	3	Apt. 2 Story	Stairs Only
☐	KFHC 710 Division St.	2 & 3	N/A	Town House	Stairs Only
☐	KFHC 375 Patrick St.	2,3,4	2	Town House	Stairs Only
☐	Porto Village Non-Profit 700 Division St.	1,2,3	2	Apt.	Elevator
☐	Lois Miller Co-operative 234 Guthrie Dr.	1,2,3	2	Apt.	Elevator
☐	Lois Miller Co-operative 242 Guthrie Dr.	1,2,3	2	Apt.	Elevator
☐	Lois Miller Co-operative 298 Guthrie Dr.	1,2,3	2	Apt.	Elevator

Rent Supplements

The City of Kingston has agreements with private landlords, where specified units in their buildings are reserved for applicants from the Rent-Geared-to-Income waiting list. Under the agreement, the tenant pays the Rent- Geared-to-Income portion of the rent to the landlord and the balance of the rent is subsidized by the City. Applicants selecting rent supplements may be offered various buildings depending on availability and vacancies within that location.

Select	Housing Provider & Address	# of bedrooms	Modified Unit # of bedrooms	Building Type	Elevators/ Stairs
☐	Various Landlords **(City Central)** Various Locations	1,2,3	1	Apt Town House	Elevator or Stairs Town House
☐	Various Landlords **(City West)** Various Locations	1	N/A	Apt	Stairs
☐	Various Landlords **(City North)** Various Locations	1,2,3	N/A	Apt	Elevator or Stairs

Supportive Housing

In Kingston, the Supportive Housing providers are Home Base Housing and Elizabeth Fry/Kaye Healey Homes.

Supportive Housing provides varying levels of support in relation to substance abuse, relationships, and mental health etc. Elizabeth Fry/Kaye Healey Homes supports women and their families specifically. Supportive Housing units include shared accommodations and one bedroom up to four-bedroom units depending on the Housing Provider and the address.

If you are interested in Supportive Housing, please indicate below which Housing Provider/Address you are interested in applying to. You must also contact the Housing Provider to fill out their application form at:

Elizabeth Fry/Kaye Healey Homes: contact 613-544-1744
Kingston Home Base Housing: contact 613-542-6672

Select	Housing Provider & Address	# of bedrooms	Modified Unit # of bedrooms	Building Type	Elevators/ Stairs
☐	Kaye Healey / Elizabeth Fry **(City Central)** Various Locations	1,2,3	1	Apt. Duplex Triplex	Stairs
☐	Kaye Healey /Elizabeth Fry **(City North)** Various Locations	1,2,3,4	1	Apt. Duplex Triplex	Stairs or NO Stairs
☐	Home Base Housing **(City Central)** Various Locations	Shared & 1	N/A	Apt.	Stairs
☐	Home Base Housing **(City North)** Various Locations	Shared & 1	1	Apt.	Stairs or NO Stairs

Seniors Buildings (65 or older)

Senior Buildings are reserved for households that have at least one household member who is 65 years old or older. You may list these buildings as part of your choices if you are 55-65 years of age which will place you on a **Cascading Age Wait list**. If there are no other households on the seniors' wait list willing to accept a vacant unit, providers will then refer to the cascading age wait list.

Select	Housing Provider & Address	# of bedrooms	Modified Unit # of bedrooms	Building Type	Elevators/ Stairs
☐	Various Landlords Rent Supplement **(City Central)** Various Locations	1	N/A	Apt.	Elevator
☐	KFHC **(City Central)** 205 Rideau St.	1 & 2	1 & 2	Apt.	Elevator
☐	Various Landlords Rent Supplement **(City West)** Various Locations	1	N/A	Apt.	Elevator
☐	Weller Arms Non-Profit **(City North)** 65 Daly St.	1 & 2	1 & 2	Apt.	Elevator
☐	St. Andrew-Thomas Senior Citizen **(City West)** 760 Front Rd.	1	1	Apt.	Elevator
☐	Royal Legion Villa **(City Central)** 671 Princess St.	1	1	Apt.	Elevator
☐	Marion Community Homes **(City West)** 480 Days Rd.	1	N/A	Apt.	Elevator
Seniors Buildings (60 or older)					
☐	Zion Seniors Housing Rent Supplement **(City Central)** 106 Pine St.	1	N/A	Apt.	Elevator

Rural – Note: there is NO PUBLIC TRANSPORTATION to rural locations.					
Select	**Housing Provider Address**	**# of bedrooms**	**Modified Unit # of bedrooms**	**Building Type**	**Elevators / Stairs**
☐	Central Frontenac Housing Corporation Rent Supplement (**Seniors**) 1096B Clement Rd. Sharbot Lake	1	N/A	Apt.	No Stairs
☐	KFHC – Country Pines (**Seniors**) 5 km north of Kingston 2075 Battersea Rd.	1 & 2	1 & 2	Apt.	Elevator
☐	Loughborough Housing Corp. (**Seniors**) 25km north of Kingston 4377 & 4361 William Street	1	1	Apt.	Elevator
☐	North Frontenac Non- Profit 75 km north of Kingston Various locations Sharbot Lake	1,2,3,4	1	Duplex / Town House	No Stairs/ Stairs

Portable Housing Benefit (PHB)

A PHB is a monthly subsidy (housing allowance) provided to a household to assist with housing costs (rent). A PHB is tied to household not a physical housing unit. The household can move anywhere within the City of Kingston or County of Frontenac, and the benefit will still be issued if household remains eligible for RGI assistance.

Would you like to include the PHB as a choice?	◯ Yes	◯ No

Please note that this is not an application to the Canada-Ontario Housing Benefit (COHB).

All forms can be found on The City of Kingston Website at www.cityofkingston.ca/socialhousing/ or can be requested from The Registry.

If you have any questions or require assistance completing the application, please contact The Registry at 613-546-2695 ext. 4769 or theregistry@cityofkingston.ca.

Declaration and Consent

I/We the undersigned understand and declare that:

1. All Information given in this application is correct and complete, including supporting documents.
2. The application and any supporting documents become the property of The Registry and copies of the application and supporting documents may be given to housing providers that I/we have selected for placement in locations preferred by me/us to live.
3. I/We agree to provide any supporting material that may be required at application and future updates. There will be a yearly review to update information from the application that I/we will provide. Failure to return the Annual Review Form may result in my/our application being cancelled.
4. If housing is provided to me/us, the unit will be occupied by me/us, and the persons listed in this application exclusively.
5. I/we will provide changes to any information provided in this application, including address and phone contact information to The Registry within 30 days of the change.

Pursuant to Provincial/Municipal Freedom Personal information as defined by the *Municipal Freedom of Information and Protection of Privacy Act* (MFIPPA), including (but not limited to), names, addresses, and phone numbers, collected by The Registry pursuant to the *Housing Services Act, 2011* (HSA), will be used to determine initial and ongoing eligibility for housing applied for and placement on the Social Housing Wait List, and may be used to calculate the applicable rent-geared-to-income charge.

Pursuant to the Provincial/Municipal Freedom of Information and Protection of Privacy Act, **I/we give my/our consent:**

- To verify information given in this application and I/we authorize any person, corporation or any social service agency having knowledge of any such required information to release the information to The Registry.
- To verify any supporting documents as required for my/our application.
- To disclose the information given on this form to non-profit housing corporations, co- operatives, the Housing Services Corporation and other service managers in the province participating in the Provincial Former Tenant Arrears database, municipal departments and agencies that assist in the provision of affordable housing and social service agencies providing social assistance to me/us and persons listed in this application pursuant to the Freedom of Information and Protection of Privacy Act (R.S.O. 1990 c.F31) or the Municipal Freedom of Information and Protection of Privacy Act (R.S.O. 1990 c.M.56).

This Application and Declaration and Consent must be signed by the applicant and each member of the household who is 16 years of age or older; or an authorized person on the member's behalf.

Applicant: Signature:_____Date: _____

Household member #2: Signature:_____Date: _____

Household member #3: Signature:_____Date: _____

Household member #4: Signature:_____Date: _____

Consent to Use & Disclose Personal Information

I/we _____ _____

(Full name of applicant/recipient – PLEASE PRINT) Date of Birth -(dd/mm/yyyy)

_____ _____

(Full name of adult household member – PLEASE PRINT) Date of Birth -(dd/mm/yyyy)

_____ _____

(Full name of adult household member – PLEASE PRINT) Date of Birth -(dd/mm/yyyy)

consent to the collection, use and disclosure of my personal information by and between all divisions of the City of Kingston Housing and Social Services Department (the "**Department**"), including:

- Ontario Works;
- Child Care;
- Housing; and
- Municipal Fee Assistance Program (MFAP).

I acknowledge that, as part of the Department's integrated service planning, my caseworker and I will assess my situation, needs, and goals, and the Department will collect, use, and disclose my personal information for the purpose of service planning and providing access to the supports and services offered by all programs within the Department. I hereby consent thereto.

I acknowledge that the Department collects my personal information under the authority of, and will use, disclose, and retain my personal information for the purposes of making decisions or verifying eligibility for assistance under the following legislation, as applicable:

- *Ontario Works Act, 1997*, S.O. 1997, c. 25, Sched. A.
- *Child Care and Early Years Act, 2014*, S.O. 2014, c. 11, Sched. 1; and
- *Housing Services Act, 2011*, S.O. 2011, c. 6, Sched. 1.

I understand that I may withdraw or limit my consent at any time.

☐ Verbal Consent received on (dd/mm/yyyy) by (H&SS staff person).

I have read or had read to me and understand the consent set out above regarding the collection, use and disclosure of personal information about me.

_____ _____

Signature of applicant/recipient Date (dd/mm/yyyy)

_____ _____

Signature of spouse Date (dd/mm/yyyy)

_____ _____

Signature of dependent adult Date (dd/mm/yyyy)

Notice with Respect to the Collection of Personal Information

*The personal information, as defined by the Municipal Freedom of Information and Protection of Privacy Act, R.S.O. 1990, c. M.56 ("**MFIPPA** ") contained in this form is collected and will be used in accordance with MFIPPA, in the provision of housing and social services under the authority of the Ontario Works Act, 1997, the Child Care and Early Years Act, 2014, and the Housing Services Act, 2011. Questions about the collection, use, and disclosure of the personal information may be directed to: Housing and Social Services Department, 362 Montreal St.*
Kingston, ON K7K 3H5, 613-546-2695

Information Regarding the Consent to Share Personal Information

Why is sharing personal information important?

- To determine which services will meet your needs.
- To share copies of identification
- To share copies of pertinent documents

What if I have questions or change my mind about giving consent?

- You may ask questions by speaking with your caseworker.
- You can limit or withdraw this consent at any time by speaking with your caseworker.
- Choosing to limit or withdraw your consent will in no way affect your eligibility.

*If required, additional adult household members may be included below:

Full name of adult member	Signature of adult member	Date (dd/mm/yyyy)
Full name of adult member	Signature of adult member	Date (dd/mm/yyyy)
Full name of adult member	Signature of adult member	Date (dd/mm/yyyy)