

Request for Market Rent-Geared-To-Income

Mailing Address:

Niagara Region
Housing Services
1815 Sir Isaac Brock Way P.O. Box 344
Thorold, ON L2V 4T7
niagararegion.ca

905-980-6000 Toll free: 1-877-263-7215
Fax: 905-935-0476
Email: housing@niagararegion.ca

Please complete and return this form.

Part A – Contact Information

Name of co-operative or non profit:

Household member #1

First name:

Last name:

Date of birth (mm/dd/yyyy):

Household member #2

First name:

Last name:

Date of birth (mm/dd/yyyy):

Part B – Dependents

First name	Last name	Date of birth (mm/dd/yyyy)	Relationship

Address:

Unit number:

City:

Postal code:

Home phone number:

Alternate phone number:

Part B – Dependents continued

Household member #1 signature:

Date (mm/dd/yyyy):

Household member #2 signature:

Date (mm/dd/yyyy):

Please attach the following documents:

Canadian birth certificates or valid immigration documents for all members of your household

Income verification for all members of your household over the age of 16

Part C – House Information (to be completed by Housing Provider)

What is the current bedroom size?: 1 2 3 4 5

Is the household composition listed on this form the same as your records?: Yes No

Original date (mm/dd/yyyy) of move in:

Why is this household paying market rent?:

Date (mm/dd/yyyy) Rent-Geared-to-Income subsidy was lost (if applicable)?:

Housing provider signature:

Part D – Eligibility (Office Use Only)

Basic eligibility completed

Completed by:

Eligible Ineligible

Date (mm/dd/yyyy):

Market-Rent-Geared-To-Income Eligibility

Occupancy standards Met Not met Arrears No Yes

Repayment Agreement Yes No

Loss of subsidy greater than two (2) years Met Not met

Outcome of request Approved Denied