



BRUCE COUNTY HOUSING STABILITY FUND Application

Eligibility Requirements

- You must be a Canadian Citizen, Landed Immigrant or have Refugee Claimant Status and be living in Bruce County
- Your individual, couple or family income, must be below:

| |
|---------------------------------------|
| 1 -2 person(s) less than \$28,000 |
| 3 - 4 persons \$28,001 - \$39,000 |
| 5 - 6 persons \$39,001 - \$48,000 |
| 7 or more persons \$48,001 - \$52,000 |

Required Documents

Verification of income - Pay stub or bank statement
Utility arrears – Disconnect notice or recent bill
Rent arrears – LTB paperwork or letter from landlord
First or last month’s rent – Rent verification form or lease
Moving expenses - Rent verification (see above) and moving truck or company quote

Submit the completed application and supporting documents:

1. Email: humanservicesintegratedservicesassistants@brucecounty.on.ca
2. Fax: 519-881-4324
3. Mail: P. O. Box 399
Walkerton ON N0G 2V0
4. Drop off:
Kincardine – 529 Gary St.
Walkerton – 30 Park St.
Port Elgin – 1243 Mackenzie Rd.
Warton – 268 Berford St.

If you have any questions about this application, call **1-800-265-3005**.

Please Note: Funding is not guaranteed. Applications will not be processed until all required documents have been submitted. Complete applications will take approximately five (5) business days to process. All payments are made directly to vendors (landlord, utility company, moving company) and applicants will not be reimbursed for expenses already paid.



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Applicant Name:

SIN:

Date of Birth:

Canadian Citizen: Yes No

Co-applicant Name:

SIN:

Date of Birth:

Canadian Citizen: Yes No

Complete the following for each dependent in the home:

| Name | Relationship | Age |
|-------------|---------------------|------------|
| | | |
| | | |
| | | |
| | | |

Main Phone number:

Alternate Phone Number:

Email Address:

Street Address:

City:

Province:

Postal Code:

Current Monthly Housing Costs

Rent:

Mortgage:

Hydro:

Heat:

Water:

Taxes:

Monthly Income

Employment:

Employment Insurance (EI):

Ontario Works (OW):

Canadian Child Benefit (CCB):

Ontario Disability Support Program (ODSP):

Pensions (WSIB, CPP, OAS, GAINS):

Spousal and Child Support:

Other Income:



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Please indicate with check mark (✓) assistance you are requesting:

- Utility arrears (Complete Section 1)
- Rent arrears (Complete Section 2)
- First or Last month's rent (Complete Section 3)
- Moving expenses (Complete Section 3 & 4)

Please provide a brief explanation of the circumstances that led to your situation:

Section 1: Assistance with Utility Arrears

Name of Supplier:

Phone number:

Account Number:

How much do you owe?

Section 2: Assistance with Rent Arrears

Landlord Name:

Phone number:

Are you related to your landlord? Yes No

If so, how?

How much rent do you owe?



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Section 3: Assistance with First or Last Month's Rent

New address:

City: _____ **Province:** _____ **Postal Code:** _____

New monthly housing costs:

Rent: _____ **Hydro:** _____ **Heat:** _____ **Water:** _____

Landlord Name: _____ **Phone number:** _____

Are you related to your landlord? Yes No **If so, how?**

Section 4: Assistance with Moving Expenses

Name of Mover: _____ **Phone number:** _____

Declaration & Consent

1. I/We understand that completing this application form does not guarantee that assistance will be provided.
2. I/We certify that the information provided by me is correct.
3. I/We further consent to exchange information between Bruce County and other community service agencies, landlords, utility companies or other organizations and individuals assisting with this application.
4. I/We understand that information may be requested, disclosed or exchanged verbally and/or in writing.

(Signature of Applicant 1)

(Date)

(Signature of Applicant 2)

(Date)