



HURON WOMEN'S SHELTER
SECOND STAGE HOUSING
and COUNSELLING SERVICES

Application - Second Stage Housing

Completed applications can be emailed to krista@huronwomensshelter.com, faxed to 519-235-3183 or dropped off at either the shelter or any second stage building.

For more information regarding Second Stage Housing please call any Second Stage building or the Shelter at 1-800-265-5506.

APPLICANT:

Please read the following information prior to filling out the application. The applicant and any household member over the age of 16 must sign the application. All information will be kept strictly confidential.

WHAT IS SECOND STAGE HOUSING?

Second Stage Housing provides secure, affordable, rent geared to income apartments for women and their children who have experienced any type of abuse for up to one year. At Second Stage Housing you will experience a safe, non-judgmental environment with support staff available and links to community support services. One, two and three bedroom apartments are available in Goderich, Clinton and Exeter. Each individual apartment is not furnished but is equipped with a fridge, stove and free shared laundry facilities on each site. No male residents or visitors over eighteen are permitted unless they are approved by the Residential Program Manager.

To ensure security and safety of everyone, we have implemented the following rules that all residents must adhere to:

- **NO MALE VISITORS OVER AGE 18, unless otherwise approved.**
- **NO ABUSE OF ANY KIND OF SELF OR OTHERS**
- **SMOKING IS PROHIBITED IN SECOND STAGE BUILDINGS INCLUDING INDIVIDUAL APARTMENTS**
- **CONFIDENTIALITY**
- **IDENTIFIED ABUSERS (MALE OR FEMALE) ARE NOT PERMITTED ON SITE.**

Received: _____ Called: _____ (office use only)

DATE OF APPLICATION: ____/____/____
 M D Y

SECOND STAGE HOUSING SITES: (Check all that you would be interested in)

Goderich: _____ Clinton: _____ Exeter: _____

Is an accessible unit required? Yes _____ No _____

Number of Children that will be living with you: _____ Ages: _____

APPLICANTS NAME: _____
 Last First Middle

DATE OF BIRTH: ____/____/____ SIN _____
 M D Y

Applicant's Description: (weight, height, tattoos, eye/hair colour) _____

What is your current marital status? _____

Are you staying at the Shelter? _____ If yes what is your move out date? _____

If not who are you staying with and what is your current address: _____

How long are you able to stay at the above address? _____

Phone (please give a safe number to call): _____

Email: _____

FINANCIAL INFORMATION

What type of Income do you and others living with you have? (include monthly and annual amounts, please refer to Appendix A on the last page for Income Definitions)

PETS

Do you have a pet? _____ Yes _____ No

If yes please describe: _____

CURRENT SITUATION:

Abuser's Name: _____ Relationship: _____

Abuser's date of Birth ____/____/____ Date of Separation from Abuser: _____

Have you experienced any of the abuse or situations below:

physical abuse ____ emotional abuse ____ financial abuse ____ sexual abuse ____

Verbal abuse ____ homelessness ____ other _____

Please describe briefly what has led to your application:

GENERAL INFORMATION SECTION

1. Does each member of the household meet at least on one of the following criteria?
- Is a Canadian Citizen? Yes ____ No ____
 - Has made application for status as a permanent resident under the Immigration and Refugee Protection Act (Canada)? Yes ____ No ____
 - Has made a claim for refugee protection under The Immigration and Refugee Protection Act (Canada)? Yes ____ No ____
2. Has a removal order become enforceable under the Immigration and Refugee Protection Act (Canada)? Yes ____ No ____
3. Have you previously resided in subsidized accommodation in Ontario? Yes ____ No ____
4. **Does any member of the household owe arrears for rent or damages as a result of a tenancy with any Social Housing Provider for rent-geared-to-income rental Assistance?** Yes ____ No ____
5. Has any member of the household ever been convicted of an offense in relation to the receipt of rent-geared-to income assistance? Yes ____ No ____
6. Has any member of the household been found by the Ontario Rental Housing Tribunal or a court of law to Have misrepresented income in relation to the receipt of rent-geared-to-income assistance? Yes ____ No ____
7. Does any member of the household have special needs due to a medical condition or disability? Yes ____ No ____

If yes, please provide details: _____

Information gathered in this application is done so in accordance with the **Freedom of Information and Protection of Privacy Act, (R.S.O. 1990, c.F.31) or the Municipal Freedom of Information and Protection of Privacy Act, (R.S.O, 1990. c.M.56)**

All members of the household, 16 years or age or older must sign the application below and provide their consent to the disclosure to Second Stage Housing of Huron and the County of Huron of information and documents required by Second Stage Housing of Huron and the County of Huron for the purpose of processing the application including but not limited to:

- Determining the eligibility of the household for Second Stage Housing of Huron.
- Determining the eligibility of the household for rent-geared-to-income assistance.
- Determining the eligibility of the household for special needs housing.
- Determining the size and type of unit in respect of which the household is eligible to receive rent-geared-to-income assistance and/or special needs housing.
- Determining the placement of the household on waiting lists.
- Determining the amount of rent-geared-to-income rent payable by the household.
- Information provided by the household may be shared as necessary for the purposes of making decisions or verifying eligibility for assistance under the Social Housing Reform Act, 2000, the Ontario Disability Support Program Act, 1997, The Ontario Works Act, 1997 or the Day Nurseries Act.
- **The applicant(s) also acknowledge their understanding that information regarding outstanding arrears with another social housing provider may be obtained through a province wide, centralized, arrears database.**

Questions and/or comments regarding collection, use or disclosure of information collected can be directed to Ms. Barbara Hall – Manager of Housing Services for the County of Huron, c/o Huron County Housing Corporation, 77722B London Road, Clinton, ON. NOM 1LO. Telephone: 519-482-8612 or 1-800-265-1720.

Completing and signing this application authorizes staff of Women’s Shelter Second Stage Housing to contact past landlords to provide a reference for your tenancy application. All household members age 16 and over must sign the application.

Applicant’s Signature Witness Date

Applicant’s Signature Witness Date

Note: *Completion of this application does not guarantee that you will be accepted as a tenant in a second stage housing unit, or guarantee that you will be offered an apartment in the town of your choice. Once your application is received you will be contacted. Once your application has been selected from the waiting list you will move on to the intake phase of the process and then if you are selected as a tenant an occupancy agreement will be completed and move in date selected.* **Huron Women’s Shelter, Second Stage Housing and Counselling Services relies on the information given by you to be complete and accurate in order to act on the application in a timely manner. Any false statement, misrepresentations, inaccurate information or failure to supply the data requested may serve a grounds for rejection of the the application or grounds for eviction action later.**

APPENDIX A

Definitions of Income

“INCOME” means all incomes, benefits and gains of every kind and from every source including, but not limited to, the following:

1. Gross salaries, wages, overtime payments, commissions, bonuses, tips, gratuities;
2. Grants, scholarships or bursary payments;
3. The greater of the net income from the business or the total withdrawals from the business as personal salary or other benefits of any member of the family or of the applicant who is self-employed in a business.
4. The gross amount of Employment Insurance benefits;
5. The gross amount of Worker’s compensation payments or other industrial accident insurance payments or payments made because of illness or disability;
6. The gross amount of any Old Age Security, Federal Guaranteed Annual Income (GAINS);
7. The gross amount of every kind of pension allowance, benefit and annuity whether from a federal, provincial, or municipal government of Canada or any level of government of any other country or state from any other source;
8. The gross amount of alimony, separation, maintenance or support payments made to the applicants;
9. The gross amount of gains from investments including interest on dividends, stocks, shares and other securities, and where the actual income cannot be determined, an imputed rate of return set by the Ministry of Municipal Affairs and Housing from time to time;
10. The gross interest income from savings or chequing accounts in a bank, trust company, or credit union;
11. The gross amount of interest earned or payable from bonds, debentures, term deposits, or investments, certificates, mortgages, capital gains or lump sum payments or other assets;
12. An imputed income account equal to the total appraised value of all assets, which do not produce interest income multiplied by a rate of return, set by the Ministry of Municipal Affairs and Housing from time to time.

“GROSS FAMILY INCOME” means the aggregate sum of:

1. The resident and every person residing in the leased premises;
2. Every resident on the lease temporarily resident elsewhere.

Updated April 2017