Addition to Household Composition Request Form



Please complete one application for each person to be added to the household composition.

| Section A – Current Tenant's Information | | | | | | | | |
|--|--|-----------|--------------|--|------------------|------------|-----------------------------|--|
| Full name of tenant | | | | | Client Account # | | | |
| (First Name, Last Name) | OL - LA LL | | | | | T-11 | | |
| Suite/Unit # | Street Address T | | | | | Telephone | # | |
| Are you currently living in a Rent-Geared-to-Income(subsidized) or Market Rent unit? RGI(subsidized) Market Rent | | | | | | | | |
| If RGI(subsidized), the <u>Household Income and Assets Review Form and required income documentation must be completed</u> <u>and returned with this request form</u> | | | | | | | | |
| Section B – Person to Be Added | | | | | | | | |
| Full name of person to be added Birthdate | | | | | | | | |
| (First Name, Last Name) | | | | | (mm/dd/yyyy) | | | |
| Status in | | | Relationship | | | | | |
| Canada (attach documentat | to Tenant NO If YES, when was the move in date? | | | | | | | |
| Has this person moved in to the unit already? YES L | | | (mm/dd/yyyy) | | | | | |
| Current | | | | City | | | Is this address subsidized? | |
| Address | | | | | م بر ما ام سما ب | | YES NO NO | |
| Current Landlord's Name (where applicable) Landlord's Phone # | | | | | | | | |
| | | | | | | | | |
| Has this person ever lived in a Toronto Community Housing unit? YES NO | | | | | | | | |
| If YES, was it a Rent-Geared-to-Income(subsidized) or Market Rent unit? RGI(subsidized) Market Rent L | | | | | | | | |
| Has this person ever lived in subsidized housing in the province of Ontario? (Toronto Community Housing or any other non-profit providers) YES NO | | | | | | | | |
| If YES AND the address is different from your current address, please provide the following information: | | | | | | | | |
| Subsidized Housing | | | | | | | | |
| Provider's Name | | | | | | | | |
| Subsidized Housing City | | | | | | | | |
| Address | | | Ĭ | | | | | |
| Move In date Move Out date | | | | | | | | |
| (mm/dd/yyyy) (mm/dd/yyyy) | | | | | | | | |
| Is this person currently on the Housing Connections centralized waiting list for subsidized housing? YES NO If YES, what is the application reference number? | | | | | | | | |
| Section C – Declaration (To be completed by both the Current Tenant and the Person to Be Added) | | | | | | | | |
| I declare the above information is true and complete. I have read and understood Toronto Community Housing's Addition To Household Composition Directive - General Terms & Conditions, printed on the back of this form. | | | | | | | | |
| I hereby consent Toronto Community Housing to use the information provided on this form and any other supporting documents attached to see if I: Qualify for or/and continue to be eligible for Rent-Geared-to-Income subsidy. I understand that under the social housing legislation, any person who inappropriately helps any person(s) to get Rent-Geared-to-Income subsidy that the person(s) is not eligible for could be charged with an offence. On conviction, they could be fined up to \$5,000.00 or be imprisoned for up to 6 months, or both. | | | | | | | | |
| OR Qualify for being added to the Market Rent household unit address as stated in Section A above. | | | | | | | | |
| Tenant's Name | Fenant's Name Signature | | | 11 11 11 11 11 11 11 11 11 11 11 11 11 | | | te | |
| (Print) | | | | | | (mr | m/dd/yyyy) | |
| Applicant's Name (Print) | Applicant's Name Signa (Print) | | re | | | Dat (mr | te m/dd/yyyy) | |
| Section D – Approval (For Office Use) | | | | | | | | |
| Request approved (send Approved letter, sign new lease, update HMS and HMS notes, copy to tenant file) | | | | | | | | |
| Request denied (send Denied letter, update HMS notes, copy to tenant file) | | | | | | | | |
| Staff's Name (Print) | 5 | Signature | | | | Dat | te m/dd/yyyy) | |