



Grey County Social Services and Housing Sustainable Housing Benefit Application Form

You may be eligible if you reside in Grey County, have not received a Sustainable Housing Benefit assistance in the past 24 months, and;

Your gross household income falls below the Household Income Limits for Grey County as per Section 2 of the Housing Services Act Ontario Regulation 370/11:

Single:	\$27,000
Couple:	\$34,000
Sole Support/Couple with one child:	\$40,500
Sole Support/Couple with two children:	\$45,000
Sole Support/Couple with three children or more:	\$59,500

- Print off application form and fill out **completely**.
- All household members 18 years of age or older must read and sign the application and the consent to release information to determine eligibility (Page 3).
- Rent Geared to Income (RGI) housing tenants are ineligible for Sustainable Housing Benefit costs related to rental and utilities arrears.

Submit the completed application via one of the following 4 options:

Submit the completed application via one of the following

1. Scan and email to: housing@grey.ca
2. Fax to: 519-376-0445
Grey County Housing
595 9th Avenue East, Owen Sound, ON N4K 3E3

Checklist

- ☐ Page 3 of the Application is signed by applicant and spouse if applicable
- ☐ Verification of eligibility: Eviction notice, disconnection notice, discharge letter, proof that Cash on Delivery is required, worker name if homeless, letter from public health or building official confirming infestation or inhabitable housing, proof of accommodation costs for **both** households if moving to 20% more affordable housing
- ☐ If not ongoing OW or ODSP: bank account statements and verification of other assets
- ☐ If not ongoing OW or ODSP: copy of most recent Income Tax assessment, copy of current pay stub if employed and verification of other income
- ☐ Confirmation of cost of item requested: Last month's rent, utility deposits.

Please note that assistance with moving expenses, furnishings, appliances and other household items are not covered under the Sustainable Housing Benefit.

Applications take 5-10 Business Days to Process

*Applicant Name: _____ *Social Insurance #: _____

*Applicant Date of Birth: _____ *Country of Birth: _____

*Street Address: _____ *City: _____

*Province: _____ *Postal Code: _____ *Phone Number: _____

Alternate Phone Number: _____ Email Address: _____

***I/We would prefer contact by traditional postal Mail ☐ or Email ☐**

*Co-Applicant Name: _____ *Social Insurance #: _____

*Co-Applicant Date of Birth: _____ *Country of Birth: _____

Single or Couple with: ☐ No children ☐ 1 child ☐ 2 children ☐ 3 or more children

Names and ages of children: _____

Source of Income

☐ Employed ☐ Social Assistance (OW / ODSP) ☐ Employment Insurance (EI)

☐ Other Income: _____

Attach proof of all income (30-day bank statement or Notice of Assessment) unless on Social Assistance

If not in receipt of Social Assistance, attach proof of all assets (bank account numbers, Canada Savings Bonds, GICs, RRSPs, etc.) and current values.

Rent/Mortgage: Water: Hydro: Other:

☐ Victim of Domestic Abuse/Violence

☐ Discharged from Institution – copy of discharge letter attached

☐ Utility Disconnect / Notice Given – copy attached

☐ Rental Arrears / Eviction Notice – copy attached

☐ Moving to more Affordable Housing

☐ Other:

(Please note that assistance with moving expenses, furnishings, appliances, and other household items are not covered under the Sustainable Housing Benefit)

- ☐ Utility Arrears to Avoid Disconnection
- ☐ Utility Costs: Delivery of Fuel / wood and/or Hydro Deposits – proof of costs attached
- ☐ Rental Arrears – proof of eviction threat, must include landlord’s name, address, and phone #
- ☐ Last Month’s Rental Deposit (attach lease or Intent to Rent form)
- ☐ Other:

Example: If Applying for Rent or Utility Arrears, Explain Why You were Unable to Pay

Acknowledgement, Declaration and Consent

I am (We are) the applicant(s) named on this application form.

To the best of my (our) knowledge, all of the information provided is accurate and no information has been deliberately withheld.

I (We) know that there is limited money available for Housing Benefits. I (We) also know that we must do everything we can to maintain our housing.

I (We) know that, if I (we) are in receipt of OW or ODSP, any benefits we qualify for will be paid directly to my (our) energy provider or landlord.

If I(we) are approved for help with rent or energy arrears, my (our) caseworker may take that money from my (our) monthly payment and give it directly to the landlord or energy service provider.

I/we consent to the disclosure, verification, and exchange of information with energy service providers, landlords and/or other third-party vendors to determine eligibility for the Grey County Social Services and Housing Benefit. I understand that information may be requested, disclosed, or exchanged verbally, or in writing including fax.

I/We further consent to the exchange of information between Grey County and any other community service agency or organization assisting with this application including my (our) OW Caseworker who can be contacted at Ext.

Signature of Applicant

Signature of Spouse (where applicable)

Signature of Other Household Members Over 18

Signature of Other Household Members Over 18

Date

Office Use Only

Date Received:

MID/SIN

Accessed in past 24 months

☐

No

☐

Yes

Decision:

Sign Off:

Date: