

Tenant Annual Review: Important notice

Client number:
Please reference on all correspondence.
RE:

Review for Rent-Geared-to-Income (RGI) assistance

Dear Tenant,

In accordance with Ontario Regulation 316/19 under section 50 of the *Housing Service Act 2011*, your Affordable Housing Rent Agreement or Subsidized Rent Agreement, as may be applicable to your household, residents who are in receipt of subsidy assistance must agree to be reviewed on a yearly basis (an Annual Review), as such you are required to complete, sign, and return the attached Tenant Annual Review to Peel Housing Corporation.

Due date:

All sections of the forms must be completed and signed by all members of the household who are 16 years of age or older.

The information must be submitted to our office by the above due date. If you do not submit this information by the due date, you may be determined ineligible for RGI and will be required **to pay the full market rent/housing charge for your unit**.

Please attach the following information:

- ☐ Copy of your Notice of Assessment issued by Canada Revenue Agency (CRA), for you and all household members over the age of 16. To request a copy, log into your CRA account or call **1-800-959-8281**.
- ☐ Proof of your current income if the net income is **very** different from the income on your Notice of Assessment. You still need to provide your Notice of Assessment.
- ☐ Statement of Ontario Works or ODSP benefits, if you receive this assistance.
- ☐ Proof of full-time student status for each family member over the age of 16, if applicable.
- ☐ Proof of assets including most recent bank account summary (the account number and balance) of all household members, and statements of investments.
- ☐ A copy of your current Tenant Insurance Policy.

Completed packages can be dropped at your Superintendent's office, drop box at 7120 Hurontario Street (Mississauga), drop box at 10 Peel Centre Drive (Brampton) or email at TARs@peelregion.ca

If you have any questions, please contact your Tenancy Support Agent at **905-453-2500**.

Tenant Annual Review: Translation notice

These documents are important. Please have them translated.

Araz bic	هذه المستندات مهمة. يُرجى ترجمتها.
French	Ces documents sont importants. Veuillez les faire traduire.
Gujarati	આ દસ્તાવેજો મહત્વપૂર્ણ છે. કૃપા કરીને તેનો અનુવાદ કરાવો.
Hindi	ये दस्तावेज़ महत्वपूर्ण हैं। कृपया इनका अनुवाद करवाएँ।
Mandarin	这些文件非常重要。请将其翻译。
Polish	Te dokumenty są ważne. Proszę o ich przetłumaczenie.
Punjabi	ਇਹ ਦਸਤਾਵੇਜ਼ ਮਹੱਤਵਪੂਰਨ ਹਨ। ਕਿਰਪਾ ਕਰਕੇ ਇਹਨਾਂ ਦਾ ਅਨੁਵਾਦ ਕਰਵਾਓ।
Spanish	Estos documentos son importantes. Necesitan ser traducidos.
Tagalog	Mahalaga ang mga dokumentong ito. Ipasalin ang mga ito.
Tamil	இந்த ஆவணங்கள் முக்கியமானவை. தயவுசெய்து
Ukrainian	Це важливі документи. Будь ласка, перекладіть їх.
Urdu	یہ دستاویزات اہم ہیں مہربانی کر کے ان کا ترجمہ کریں۔
Yoruba	Àwọn ìwé àkòsílẹ̀ yìí ṣe pàtàkì. Jòwọ́ tùmọ̀ wọn.

Tenant Annual Review: RGI assistance

Client number:

Section 1: Household information

Unit and contact information			
Street address		Unit	City
Postal code			
Primary number	Alternate number		Number of bedrooms
Email address			

Household composition			
Please list all individuals living at the above address (start with yourself):			
Full name	Relationship to you	Status in Canada (Refer to list below)*	Date of Birth (YYYY-MM-DD)
1.	self		
2.			
3.			
4.			
5.			
6.			
7.			

* Status in Canada: Canadian Citizen, Permanent Resident, Convention Refugee or Refugee Claimant.

Changes in household composition			
Please list all individuals who have moved in and/or out of your unit in the last 12 months:			
First name	Last name	Date of move-in	Date of move-out

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You **MUST** complete Sections 2A & 2B in full.

Section 2A: Household information

Declaration of income

A copy of **Notice of Assessment** is required for all household members 16 years of age and older.

In this section, list all household members 16 years of age and older.

- Confirmation of full time student status is also required if any household member is attending school full-time in a recognized educational institution. For a list of recognized educational institutions in Ontario, please visit the Government of Canada website at itl.inlc/canadamasterlistdesignatededucationalinstitutions.
- A copy of the most recent benefit statement is also required if any household member is in receipt of Ontario Works or Ontario Disability Support Program.

Name(s) of household members	Current source of income	Monthly amount before taxes (Gross)	Full-time student? If yes, confirmation attached?	Copy of Notice of Assessment attached?
		\$	☐ Yes ☐ No	☐ Yes ☐ No
		\$	☐ Yes ☐ No	☐ Yes ☐ No
		\$	☐ Yes ☐ No	☐ Yes ☐ No
		\$	☐ Yes ☐ No	☐ Yes ☐ No
		\$	☐ Yes ☐ No	☐ Yes ☐ No
		\$	☐ Yes ☐ No	☐ Yes ☐ No

Emergency Contacts

Emergency contact name	Relationship	Contact number

continued...

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Section 2B: Asset information

Does anyone in your household own property (e.g. house, cottage, trailer, etc.)? ☐ Yes ☐ No

If yes, please
provide details:

Please provide proof of **ALL** financial assets owned by you or anyone living with you. Assets may include:

- Most recent bank account summary from the household/applicants banking institutions, showing account balances and owner's name.
- Most recent Statement of Investments, excluding *Registered Retirement Savings Plan (RRSP)*, *Registered Retirement Income Fund (RRIF)* and *Registered Education Savings Plan (RESP)*.

Section 3: Consent and declaration

Personal information collected by Peel Housing Corporation, operating as Peel Living, will be retained, used, disclosed and disposed of in accordance with all applicable federal and provincial laws and regulations governing the collection, retention, use, disclosure and disposal of information. (In accordance with the *Municipal Freedom of Information and Protection of Privacy Act*, *Housing Services Act 2011* and the *Residential Tenancies Act, 2006*). Personal information is collected under the authority of the *Housing Services Act 2011* and the *Residential Tenancies Act, 2006*, and will be used to administer social housing programs as originally outlined in the *Application for Subsidized Housing (V-08-117)* and the *Market Application (V-08-103)*.

Questions or concerns about the collection, use or disclosure of personal information, should be directed to:

**The Regional Municipality of Peel
Human Services Department**

1. I understand and agree to release any personal information and required documents to Peel Housing Corporation, operating as Peel Living, for the purpose of assessing my eligibility for rent-geared-to-income (RGI) assistance which may include determining:
 - a. My ongoing eligibility for RGI assistance.
 - b. The size and type of unit that I may be eligible for;
 - c. The amount of geared-to-income rent I will be required to pay.

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Tenant Annual Review: RGI assistance

Client number:

2. I agree to release to Peel Housing Corporation, operating as Peel Living, information about any income, bank account, safety deposit box, assets of any nature or kind held by me, or on my behalf, or by or on behalf of any of my dependents or children temporarily in my care, alone or jointly with any other person in any financial institution, in order to verify my ongoing eligibility for RGI assistance.
3. I understand that any inquiries with respect to my personal information may take the form of electronic data exchanges.
4. I declare that everything I have written in this document is true and that no information that is required to be given has been withheld or omitted.
5. I understand that only the people I have listed on this document may live with me in subsidized housing.
6. I understand that it is an offence, under the Act for an individual to knowingly obtain or assist a household member to obtain RGI assistance for which they are not entitled. Such an offence carries a fine and/or imprisonment as well as a prohibition from re-applying for assistance for a minimum period of two years. If something on this document is missing, incorrect or false, Peel Housing Corporation, operating as Peel Living, may request additional information, or may cancel my eligibility for RGI assistance and may request my household to reimburse the amount of RGI assistance owing on behalf of my household.
7. I agree to report any changes immediately determined by the *Housing Services Act*, such as assets, household composition, absence from unit and income changes related to OW, ODSP and school enrolment.

_____ Print full name	_____ Signature of household member (16 and older)	_____ YYYY/MM/DD
_____ Print full name	_____ Signature of household member (16 and older)	_____ YYYY/MM/DD
_____ Print full name	_____ Signature of household member (16 and older)	_____ YYYY/MM/DD
_____ Print full name	_____ Signature of household member (16 and older)	_____ YYYY/MM/DD
_____ Print full name	_____ Signature of household member (16 and older)	_____ YYYY/MM/DD

Tenant Annual Review: Insurance reminder

Client number:

Peel Living requires that you provide **proof** of your **Tenant Insurance Policy**.

You are required to provide a copy of the insurance policy on company letterhead, including:

- Policy insurance provider
- Policy insurance number
- Policy holder name/address
- Policy dates (**with future expiry date**)
- Liability amounts (**no less than \$1 million**)

To submit proof of your insurance, please email otas@peelregion.ca or drop off a copy at your Superintendent's office.

Should you have any questions, please contact Peel Living at **905-453-2500** or email otas@peelregion.ca or visit peelregion.ca/peel-living-insurance.

As a reminder, as stated in your lease agreement, Peel Living tenants shall obtain and maintain tenant insurance as follows:

- All risk personal property coverage, of sufficient limit, to indemnify the tenant for the loss of or damage to their contents and betterments and improvements.
- Additional living expense of sufficient limit; and
- Liability insurance, including tenant legal liability, with a limit of not less than \$1,000,000.

Failure to provide proof of tenant insurance could impact your Peel Living tenancy and could result in eviction if not remedied.

Thank you.

Peel Housing Corporation, o/a Peel Living
10 Peel Centre Drive, Suite B, P.O. Box 2800, STN B
Brampton, Ontario L6T 0E7
General: 905-453-2500 Fax: 905-453-2501

Tenant Annual Review:

Consent to communicate by email

Client number:

Peel Housing Corporation (Peel Living) requires complete and accurate contact information to communicate with you about your tenant file.

Use this form to provide Peel Living with your email address. This will be the **ONLY** email address that Peel Living will use to receive or provide information to you about your tenant file.

Tenant information

Name

Tenant ID

Street address

Unit

City

Postal code

Primary number

Email address

- ☐ I consent to being contacted by email at this email address. I acknowledge that sending email over the internet is not secure, in that it can be intercepted and/or manipulated and retransmitted.

Tenant signature

/ /
YYYY/MM/DD

Notice with respect to the collection of personal information

(Municipal Freedom of Information and Protection of Privacy Act)

This information collected under the legal authority of the *Housing Services Act, 2011* and regulations thereafter; for the purpose of administering housing subsidy programs. For more information regarding the collection of personal information on this form please contact the Manager of Housing Operations and Tenancy Support at 905-453-2500, at Peel Housing Corporation o/a Peel Living, 10 Peel Centre Dr. Suite B, P.O. Box 2800, STN B, Brampton, ON L6T 0E7.



Tenant Annual Review: Third party authorization

Client number:

Please complete this form **ONLY** to allow an authorized person other than yourself to speak and receive information regarding your tenancy with Peel Living.

Tenant information

Name			Tenant ID	
Street address	Unit	City	Postal code	

Third party authorization

My signature below indicates that I agree to the following:

1. I authorize the person named and listed below to make inquiries on my behalf regarding my tenancy with Peel Living.
2. This authorization allows the person named and listed below to provide information to Peel Living and allows Peel Living and its agents to provide information to the person named and listed below.
3. I understand that I must notify my Tenancy Support Agent immediately if I no longer wish to authorize the person named below to act as my Third Party.

I authorize the following person to act as my Third Party with Peel Living:

Name			Date of birth	
Street address	Unit	City	Postal code	

Primary contact number

Please sign and date below to complete the Third Party Authorization Form for Peel Living:

Tenant signature	/ / YYYY/MM/DD
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Tenant Annual Review: Third party authorization

Client number:

Questions and answers

What is this form for?

Personal information about you, the benefits you receive and the program you participate in is confidential. We need your signed consent if you want Peel Living to communicate with another person (such as your spouse, partner, other family member, friend, agency representative or other) regarding your tenancy.

Your signed consent allows us to communicate confidential information to your authorized person and allows him/her to communicate with us on your behalf. This consent will remain in effect until you withdraw your consent.

What will the authorized person be allowed to do on my behalf?

When you give your signed consent to Peel Living to communicate with your authorized person, you are letting that person provide and receive information regarding your tenancy.

What is the authorized person not allowed to do on my behalf?

This consent form **does not provide authority** to the authorized person to make changes related to your tenancy.

How do I withdraw consent?

A written letter including your full name, the date, and your signature, must be submitted to your Tenancy Support Agent.

Notice with respect to the collection of personal information

(Municipal Freedom of Information and Protection of Privacy Act)

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