



Notice

Number: 07-10

APPLICABLE TO:**DATE: June 25, 2007**

<input checked="" type="checkbox"/>	Municipal & Private Non Profit
<input checked="" type="checkbox"/>	Co-operatives
<input type="checkbox"/>	Federal Non Profits
<input checked="" type="checkbox"/>	OCHAP/CSHP
<input type="checkbox"/>	Rent Supplement

<input checked="" type="checkbox"/>	Mandatory
<input type="checkbox"/>	For Information

Subject Former Tenant/Member Arrears

Background

In accordance with *the Social Housing Reform Act, 2000 (SHRA)* and associated regulations, one of the criteria for ongoing eligibility for Rent-Geared-to-Income Assistance deals with former tenant/member arrears (O. Reg. 298/01, s. 7(1), (e,f.)). The purpose of this notice is to clarify procedures related to tenant/members who vacate their units owing arrears.

Implementation

Housing Providers are required to confirm the status of all current tenant/members' former arrears at each annual review as well as throughout the year (as necessary) using the procedures outlined in *Appendix A*. The Former Tenant/Member Arrears Form (*Appendix B*) replaces the Notice of Vacancy form issued by NRH on July 26, 2002 (*NRH Notice 02-01*). A sample Repayment Agreement is also attached as *Appendix C* and providers can use this form when signing a repayment agreement with a former household.

Service Manager's Role

Niagara Regional Housing will, during operational reviews, review the procedures used by housing providers in reporting former tenant/member arrears and verifying ongoing eligibility for RGI assistance.

Housing Provider's Role

Housing providers are required to use the new procedures and forms effective immediately.

Appendix A Former Tenant/Member Arrears Procedures

If the tenant/member vacates with arrears, the Housing Provider informs NRH of the tenant/member arrears as soon as the household has vacated the unit using the Former Tenant/Member Arrears form. The housing provider needs to retain complete records of the rent/housing charge arrears as well as arrears resulting from damages (pictures, invoices etc.)

NOTE: To ensure records are accurate, it is also vital that housing providers report to NRH when former tenant/members enter into a repayment agreement and/or eliminate their arrears.

APPLICANT APPLIES TO THE CENTRALIZED WAITING LIST

1. **NRH checks the Provincial Arrears Data Base** for former tenant/member arrears. If the applicant has arrears, NRH informs them that they are not eligible to be on the waiting list and they must contact the former housing provider to arrange a repayment agreement.
2. **NRH will place the applicant on the waiting list** if the applicant provides NRH with a copy of the repayment agreement or proof that the arrears have been paid.
3. **If the applicant stops honouring the repayment agreement** the former housing provider informs NRH, who will send a letter to the applicant explaining that they have been removed from the centralized waiting list. NRH will advise the applicant of their right to appeal the decision to the NRH Appeals Committee.

APPLICANT IS HOUSED WHILE HONOURING A REPAYMENT AGREEMENT

1. **NRH forwards a copy of the repayment agreement** with the former housing provider contact information to the current housing provider.
2. **If the tenant/member stops honouring the repayment agreement:**
 - Former housing provider informs NRH that the repayment agreement is not being honoured;
 - NRH advises the current housing provider;
 - Current housing provider sends the tenant/member an opportunity to comment letter advising:
 - That information has been received of the household's ineligibility for RGI subsidy due to a default of a repayment agreement; and,
 - The household's right to an internal review.
 - A copy of all internal review decisions are to be forwarded to NRH or, if no review is held, a copy of the Increase to Market Rent/Housing Charge Notice sent to the tenant/member.
3. **During the annual income review process** the current housing provider must confirm with the former housing provider that repayment agreements are being honoured by all current households.

**Appendix B
Former Tenant/Member Arrears**

To	Niagara Regional Housing, Eligibility Assessment Representative	
	Fax number	905-935-0476
Housing Provider Information	Name	
	Contact Person	
	Phone	
Former Tenant/Member Information	Name	
	Date of Birth	Social Insurance Number
	Name	
	Date of Birth	Social Insurance Number
	Name	
	Date of Birth	Social Insurance Number
Unit Information	Unit #	Address
	Move out Date	<input type="checkbox"/> RGI <input type="checkbox"/> Market
Reporting	<input type="checkbox"/> Move out Arrears <input type="checkbox"/> Repayment Agreement (Agreement Attached) <input type="checkbox"/> Arrears Eliminated <input type="checkbox"/> Misrepresentation expiry date: (as determined by the Landlord and Tenant Board or the District Court)	
Arrears	Rent/Housing Charges Owing	\$
	Comments	
	Damages Owing	\$
	Comments	
	TOTAL ARREARS	\$
Additional Comments		
Completed by (please print name)		Date
Signature		

Appendix C Repayment Agreement

THIS AGREEMENT, made this * day of * 200*

Between: **Housing Provider** and **Tenant/Member/Applicant**

Tenant Member Information	Name	
	Date of Birth	Social Insurance Number
Unit Information	Unit #	Address
	<input type="checkbox"/> Currently living in unit or <input type="checkbox"/> Move out Date <input type="checkbox"/> RGI <input type="checkbox"/> Market	
Amount Owing	Rent/Housing Charges Owing	\$
	Damages/Charge backs	\$
	Total	\$
<p>The above named person owes the amount of \$ to <i>Name of Housing Provider</i>.</p> <p>I, <i>name of person</i>, agree to make payments in the sum of \$ per month until the balance owing to <i>Name of Housing Provider</i>, is paid in full. Payments will be made to:</p> <p style="text-align: center;">Name -and- address of Housing Provider</p> <p>This repayment agreement will commence on <i>Date</i> and will continue on the first day of each month thereafter. This payment is in addition to any current rent/housing charge owing.</p> <p>I also acknowledge that should I not honour the terms of this repayment agreement, I will no longer be eligible for rent-geared-to-income assistance.</p>		
Signature		Date
Witness		Date
Housing Provider Information	Contact Name	Phone Number
	As a representative of <i>Name of Housing Provider</i> , I have the authority to accept the terms of this agreement on behalf of <i>Name of Housing Provider</i> .	
	Signature	Date