Forward Application Package to: Housing Administrator, Niagara Regional Housing

FORM A

NIAGARA REGIONAL HOUSING - EVICTION PREVENTION PROGRAM

APPLICATION REQUEST

Housing Provider	

Name of Market Household	
Unit # & Address	
Number of Households Members	
Household Move In Date	

Documentation Attached:

Required By	**Document**	**Yes/No**	**Comments**
Household	Market to RGI Application (*note if Mkt-RGI application was previously completed*)		
Household	EPP Application Form		
Household	Income Verification Prior to Loss for All Households Members (**includes latest Notice of Assessment**) & Subsequent to Loss		
Household	Record of Employment (for loss of employment)		
Provider	Calculation of Household RGI Rent/Housing Charge		
Provider	Copies of all Previous Eviction Notices (if applicable)		
Provider	Copy of Household Ledger showing Current Household Arrears		
Provider	Copy of Current Arrears Repayment Agreement, if applicable		

I confirm that all information provided in the EPP application package is true and accurate to the best of my knowledge.

RECOMMENDED BY:

_____ _____

Property Manager/Coordinator Date

APPROVED BY:

_____ _____

Housing Administrator Date

EPP Effective Date: _____