



Niagara Regional Housing

1815 Sir Isaac Brock Way, PO Box 344, Thorold, ON L2V 3Z3
Telephone: 905-682-9201 Toll-free: 1-800-232-3292
Main Fax: 905-687-4844 Contractor Fax: 905-682-8301
nrh.ca

Dear Household:

Annual Income Declaration Package

To continue to be eligible for Rent-Geared-to-Income (RGI), please complete all sections of this Annual Income Declaration Package and return it within 30 days.

All household members with income, age 16 or older, must submit a copy of their most recent:

- **Notice of Assessment (NOA) from the Canada Revenue Agency (CRA)**

OR

- **Proof of Income Statement (POI) from Canada Revenue Agency (CRA).**

This will be used to calculate rents for most households.

If we do not receive this information by _____, you will be given notice that your rent will go up to market rent.

This means that your rent will no longer be subsidized.

If you need help to complete the forms or need more copies, please call your Tenant Support Representative (TSR) at 905-682-9201.

It is an offence under the Housing Services Act, 2011 (HSA) to knowingly obtain or assist a household member to obtain rent-geared-to-income assistance for which they are not entitled. This offence carries up to \$5,000 in fines or up to six months' imprisonment and will prohibit you from re-applying for assistance for a minimum of two years.

Niagara Region Housing Services Division now has an **Eligibility Review Officer (ERO)** on staff to investigate suspected cases of fraud and misrepresentation of income. If there is evidence that an offence under the HSA has been committed, the matter may be referred to the police for investigation.



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Instructions:

All household members with income are required to file their income tax each year and complete this form in order to keep your rent subsidy.

Step 1: Complete both sides of each page

Step 2: You must attach proof of income for your household. This means:

- a. Each household member, age 16 or older, must provide their _____ **Proof of Income Statement (POI)** and/or **Notice of Assessment (NOA)** from Canada Revenue Agency (1-800-959-8281).
- b. Each household member must provide proof of **current income if the income on their POI or NOA is very different from current income** (you will still have to provide the POI or NOA).
- c. If you are on Social Assistance (Ontario Works, Ontario Disability Support, etc.), you must provide your **Statement of Assistance**, including the top half that lists the members of your benefit unit.
- d. Each household member attending school (age 16 or older) must provide **proof of full-time enrollment at school**
- e. You must provide **proof of assets** (see page 2, Section 4 for examples of assets).

Note: if the total of your assets is more than \$50,000 for a single person household and \$75,000 for households with two or more people, you may not qualify for RGI assistance.

Step 3: Read, sign and date the Declaration and Consent and the Canada Revenue Consent on pages 4 and 5

- **Must be signed by all household members age 16 and older**
- **Must be signed by a witness that is 18 or older and not a household member**

Step 4: Submit completed package within 30 days in-person, by mail to:

Niagara Regional Housing
Niagara Region Headquarters, Campbell East
1815 Sir Isaac Brock Way
PO Box 344
Thorold, ON L2V 3Z3

OR

put in the Niagara Regional Housing (NRH) drop box

If you have any questions or need assistance completing this package, please call your Tenant Support Representative (TSR) at 905-682-9201.

If you do not complete and return this package within 30 days, you could lose Rent-Geared-to-Income (RGI) assistance.



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Effective Date (MM/DD/YY)	Tenant Account #							

Home Address – Street # and Street Name	Unit/ Apt. #	City	Postal Code	# of Bedrooms

SECTION 1: Household Members

Household Member #1	Household Member #2
	Relationship to Household Member # 1:
Last Name	Last Name
First Name	First Name
Date of Birth: (MM/DD/YY)	Date of Birth: (MM/DD/YY)
Spoken Language:	Spoken Language:
Home Phone:	Home Phone:
Cell Phone:	Cell Phone:
Work Phone:	Work Phone:
Email Address:	Email Address:

Other household members living with you (include separate sheet if the number exceeds 7)				
• Attach verification of school attending for children 16 years or older				
Last Name	First Name	Relationship to You	Date of Birth (MM/DD/YY)	School Attending and /or Employer Name

SECTION 2: Income Information

You must provide the most recent Proof of Income Statement (POI) and/or Notice of Assessment (NOA) for you and all other household members 16 and over.

If you receive OW or ODSP, you must provide your Statement of Assistance and Drug Card, showing the amount of your social assistance and names of everyone on your benefit card.

If your income has changed in the last 12 months or if the income declared below is very different from the amount on your POI or NOA, you must provide proof of your current income with your POI and NOA. Please contact your Tenant Support Representative for a list of income verification examples.



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	Household Member #1	Household Member #2
POI / NOA attached?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Type of income	Monthly amount (before taxes)	Monthly amount (before taxes)
Canada Pension Plan (CPP)		
Old Age Security (OAS)		
Other:		
Other:		
Ontario Works (OW)		
Ontario Disability Support Program (ODSP)		
Employment - Name of employer:		

Have you received or anyone in your household received any Registered Disability Savings Plan (RDSP) payments in the last 12 months? Yes No

If anyone in your household is self-employed, please provide the name and type of business:

SECTION 3: Rent-Geared-to-Income Eligibility

Have you had any of the following changes during the past year?

- if yes, provide the date you notified Niagara Regional Housing (NRH) of these household changes

A full-time student with income stopped attending school	<input type="checkbox"/> Yes <input type="checkbox"/> No	Date (MM/DD/YY)		
A household member started or stopped receiving OW or ODSP	<input type="checkbox"/> Yes <input type="checkbox"/> No	Date (MM/DD/YY)		
A household member receiving OW or ODSP had an increase in other income	<input type="checkbox"/> Yes <input type="checkbox"/> No	Date (MM/DD/YY)		
A household member had their income taxes reassessed	<input type="checkbox"/> Yes <input type="checkbox"/> No	Date (MM/DD/YY)		
Someone moved in or out of the household – if yes, please complete the following:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Date (MM/DD/YY)		
Last Name	First Name	Relationship to you	Date of move (MM/DD/YY)	Move in or out?
				<input type="checkbox"/> In <input type="checkbox"/> Out
				<input type="checkbox"/> In <input type="checkbox"/> Out

Is anyone in your household under a removal order to leave Canada? Yes No

Would you like help with mental health concerns, addiction, parenting, aging at home, budgeting or any other type of counselling or support? Yes No

SECTION 4: Asset Information

You must provide proof of all assets owned by you or anyone living with you. **List ALL assets below.**

Assets may include:



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- Bank accounts (e.g. chequing, savings, overseas or foreign accounts) with a balance over \$5,000
- Term Deposits, Guaranteed Investment Certificates (GIC)
- Stocks, shares, bonds
- Mutual funds
- Overseas or foreign investments
- Tax-Free Savings Accounts (TFSA) (cash and investments)
- Term or Life Annuity
- Life Insurance (cash surrender value in excess of \$100,000)
- Trust account
- Business assets (e.g. business bank account, business property) if you own your own business or are self-employed.
- Real estate (e.g. house, land, other property in Canada and other countries)

Who owns the asset?	Details of Asset (type, account #, name of bank)	Value or Account Balance

Have you disposed of any assets in the last 12 months? Yes No

Have you had any new assets in the last 12 months? Yes No

Does anyone own property (e.g. house, cottage, trailer, etc.) Yes No

If you answered yes to any of the above questions, please provide details

- You must provide proof if you answered yes to any of the above questions

SECTION 5: Additional Information

	Name	Relationship	Phone #
Next of Kin (can be contacted in case of an emergency)			
Communicator* with your consent			

* a person who can, on your behalf, speak to NRH staff



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Do you own...

Pets <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, how many?		Breed/Type	
Emergency Pet Contact* Name / Phone # <i>*a person we can let into your unit, in case of emergency, to pick up your pet(s)</i>					
Air conditioners <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, how many?			
Dryer <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Gas <input type="checkbox"/> Electric			
Stove <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Gas <input type="checkbox"/> Electric			
Vehicle <input type="checkbox"/> Yes <input type="checkbox"/> No		Make/Model	Year	Colour	License Plate #



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SECTION 6: Declaration and Consent

By signing this form you are making a sworn statement that the following is true:

- I understand that I must complete my income tax return annually and on time
- I understand that I must inform Niagara Regional Housing (NRH) within 30 days if:
 - Any changes in my address and contact information occur
 - Someone moves in or out of my unit
 - A full-time student stops attending school
 - A household member starts or stops receiving Ontario Works (OW) or Ontario Disability Support Plan (ODSP)
 - A household member receiving OW or ODSP has an increase in other income
 - A household member has their income tax reassessed
 - My status in Canada changes
 - I intend to be absent from my unit for longer than 60 consecutive days or 90 days in a 12 month period
- I understand that if I do not file my income tax return annually or report my changes within 30 days, I may lose my eligibility for Rent-Geared-to-Income (RGI) assistance
- I understand if I owe money for rent (arrears) or damages caused by a member of my household or guest to any social housing provider, I must prove that I am making regular payments to pay back the money or I will not be eligible for RGI assistance
- I agree that everything in this Income Declaration Package is correct and complete and I must provide additional supporting documents as required
- I understand that it is an offence under the Housing Services Act, 2011 to knowingly withhold information or provide false information and this could result in the loss of RGI assistance

By signing this form, I agree to the following terms to determine my present, ongoing and past eligibility for Rent-Geared-to-Income (RGI) assistance:

I agree to Niagara Regional Housing (NRH) collecting personal information about me under the authority of the following Acts:

- Housing Services Act, 2011 (HSA)
- Freedom of Information and Protection of Privacy Act (FIPPA)
- Municipal Freedom of Information and Protection of Privacy Act (MFIPPA)
- Privacy Information Protection and Electronics Document Act (PIPEDA)

I agree to Niagara Regional Housing (NRH) sharing my information with housing providers, including:

- Non-profit housing corporations and co-operatives
- Other municipal, provincial and federal government departments that provide RGI

I agree to Niagara Regional Housing (NRH) and other housing providers using my information to determine my eligibility for RGI assistance and the amount of assistance I qualify for.

- **Must be signed by all household members, including dependents age 16 and older**
- **Must be witnessed by someone that is 18 or older and not a member of the household**

Name (print)	Signature	Date (MM/DD/YY)

Witness Name (print)	Signature	Date (MM/DD/YY)



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SECTION 7: Canada Revenue Agency Consent

I give my consent for Niagara Region Housing Services (NRHS) to contact Canada Revenue Agency (CRA) if there is a need to investigate my eligibility for RGI assistance.

I understand that Niagara Regional Housing (NRH) will not share this information with anyone else, except in accordance to the regulations under the following Acts:

- Freedom of Information and Protection of Privacy Act (FIPPA)
- Municipal Freedom of Information and Protection of Privacy Act (MFIPPA)
- Privacy Information Protection and Electronics Document Act (PIPEDA)
- Housing Service Act, 2011 (HSA, 2011)
- Income Tax Act, subsection 241(5)

My consent covers the tax year before the date below, the current tax year and all future tax years if my Household still receives or applies for RGI assistance.

- **Must be signed by all household members, including dependents age 16 and older**
- **Must be witnessed by someone that is 18 or older and not a member of the household**

Name (print)	Signature	Date (MM/DD/YY)

Witness Name (print)	Signature	Date (MM/DD/YY)