



APPLICATION FOR HOUSING (MARKET RENT)

1. Applicant

Last Name		First Name		Date of Birth D M Y			Sex M F	Social Insurance No.				
Street Number	Street Address							Apartment No.				
Town/Municipality				Postal Code			Home Telephone No.					
Person to contact in your absence or to act as interpreter		Name			Telephone No.			Relationship to applicant (circle one) Friend Interpreter Relative Other				

2. Present Employment of Applicant (Also complete if self-employed)

Present Employer's Name						Telephone No.			
Address Where Employed				Municipality		Length of Employment with present employer _____ year(s) _____ month(s)			
Occupation		Name of Department		Telephone No.		Extension	Are you allowed to take personal calls? Yes No		

3. Co-Applicant

Last Name		First Name		Date of Birth D M Y			Sex M F	Social Insurance No.				
Street Number	Street Address							Apartment No.				
Town/Municipality				Postal Code			Home Telephone No.					
Relationship to Applicant												

4. Present Employment of Co-Applicant (Also complete if self-employed)

Present Employer's Name						Telephone No.			
Address Where Employed				Municipality		Length of Employment with present employer _____ year(s) _____ month(s)			
Occupation		Name of Department		Telephone No.		Extension	Are you allowed to take personal calls? Yes No		

5. Present Accommodation of Applicant(s)

Present Landlord's Name			Address				Telephone No.		
How long have you lived at present address? _____ year(s) _____ month(s)									

6. Previous Landlord and Residential History

Previous Landlord's Name			Address				Telephone No.		
Previous Address		From	To	Reason for Leaving					

7. Income (please list for all applicants)

Source of Income	Gross Monthly Income (Before Deductions)		
	Applicant	Co-Applicant	Other Family Members
Employment (From All Employers)	\$	\$	\$
Social Assistance (Ontario Works or ODSP)	\$	\$	\$
Old Age Security/Canada Pension/Monthly Pensions	\$	\$	\$
Alimony / Support	\$	\$	\$
Employment Insurance (E.I.)	\$	\$	\$
Other (Please Specify)	\$	\$	\$

8. Banking Information

Bank Name	Branch Address	Account Number
1.		
2.		

9. Other Persons/Family Members to Reside in Accommodation applied for:

Last Name	First Name	Date of Birth			Sex		Relationship
		Day	Month	Year	M	F	

10. Person to be notified in case of Emergency (Next of Kin, Sponsor, Doctor, Friend)

Next of Kin / Sponsor Name	Address	Telephone No.	Relationship
1.			
2.			

Declaration

"I make the following Representations and Warranties knowing that they will be relied upon by the City of Brantford Housing Department to assess my qualifications for rental accommodations.

- The information given in the form is accurate and complete.
- I understand that if rental accommodation is provided to me, that accommodation is to be occupied only by me and those members of my family approved by the City of Brantford Housing Department.

- I do ___ / do not ___ owe money to any landlord and/or utility company.

"I give my consent and authorization to the City of Brantford Housing Department to make any inquiries that it deems necessary to verify the information given in this form and I authorize any person, corporation or any social agency having knowledge of any such required information to release the information to the City of Brantford Housing Department. I agree to provide further material that the City of Brantford Housing Department may require."

Witness	Applicant	Date
Witness	Applicant	Date

WHERE YOU WANT TO LIVE
(check as many choices as you wish)

EAST BRANTFORD

City Map No.	Social Housing Provider	Address/Location	Size of Unit	Number of Units	Check one	Type	Rent
8	City of Brantford	East Brantford	varies	22 units		Detached homes	\$820.00 and up plus utilities

NORTH BRANTFORD

City Map No.	Social Housing Provider	Address/Location	Size of Unit	Number of Units	Check one	Type	Rent
8	City of Brantford	North Brantford	Varies	2 units		Detached homes	\$820.00 and up plus utilities

City Map No.	Social Housing Provider	Address/Location	Size of Unit	Number of Units	Check one	Type	Rent
8	City of Brantford	2-10 Buchanan Crescent (Branlyn Meadows)	2 & 3 bed	6 units		Townhouses	2 Bed - \$737.00 plus utilities 3 Bed - \$786.00 plus utilities

SOUTH BRANTFORD

City Map No.	Social Housing Provider	Project Name & Address	Size of Unit	Number of Units	Check one	Type	Rent
8	City of Brantford	South Brantford	varies	30 units		Detached homes	\$820.00 and up plus utilities
26	City of Brantford	9 – 27 Robertson Ave.	1 Bed	16 units		Semi-detached (Seniors only)	\$650.00 utilities included
12	Slovak Village Non-Profit	144 Fifth Avenue	1 Bed	30 units		Apartment	1 bed - \$641.00 2 bed – \$726.00 3 bed – \$800.00 utilities included
			2 Bed	85 units			
			3 Bed	35 units			

CENTRAL BRANTFORD

City Map No.	Social Housing Provider	Project Name & Address	Size of Unit	Number of Units	Check one	Type	Rent
8	City of Brantford	Scattered detached homes	varies	7 units		Detached home	\$820.00 and up plus utilities
21	City of Brantford	Beckett Building 7 Bain Street	Bach	6 units		Apt. (Seniors only)	Bach - \$553.00 1 bed - \$644.00 2 bed - \$755.00
			1 bed	52 units			
			2 bed	5 units			

WEST BRANTFORD

City Map No.	Social Housing Provider	Project Name & Address	Size of Unit	Number of Units	Check one	Type	Rent
8	City of Brantford	Scattered detached homes	varies	3 units		Detached home	\$820.00 and up plus utilities

City Map No.	Social Housing Provider	Project Name & Address	Size of Unit	Number of Units	Check one	Type	Rent
8	Rent Supplement Program - City of Brantford	John Noble Home Apartments	1 bed	4 units		Apartment (seniors only)	\$661.70 utilities included
8	Rent Supplement Program – City of Brantford	John Noble Home Apartments	2 Bed	4 units		Apartment (Seniors only)	\$804.22 utilities included

For John Noble Home applicants only – Do you have a spouse who is currently in Long Term Care at John Noble Home?

_____ Yes _____ No

If you have any questions please contact the Housing Department at 759-3330.