



The Battlefords Housing Authority
#102 1191 99th Street
North Battleford, SK S9A 3V8
Phone: 306-445-4393 Fax: 306-446-1277
Email: northba@housingauthoritiesk.com

Thank you for your interest in applying for the **Family Social Housing Program**, a subsidized housing program for lower income persons.

To be eligible for this program you cannot exceed the following limits:

Income Limit by Family Size	Max. Annual Income
Families with no dependents	\$36,500 / yr
Families with one dependent	\$43,500 / yr
Families with two or three dependents	\$55,500 / yr
Families with four or more dependents	\$66,500 / yr

Asset Limit	\$50,000
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In order for us to process an application you must complete an Asset Declaration Form and provide us with income verification for each adult member of your household.

Please gather the following income documents:

- **INCOME TAX:** a copy of the most recent T1 General Form (including all T slips) you sent to Canada Revenue Agency (CRA) - NOT the Notice of Assessment CRA returned to you. If you do not have a copy of your T1 General please phone CRA at 1-800-959-8281 and ask for an Option C printout (Income Tax Return Information) for the most recent year. Or go online at www.cra-arc.gc.ca/esrvc-srvce/tx/ndvdl/myccnt/menu-eng.html and register your account then log in to the CRA's My Account and click on "Proof of income statement (Option 'C' print). This will allow you to print your proof of income statement. You can also go to My Service Canada office located at 1401 101st Street. If you have **farm or business income** you will also need to supply a statement of business activities.
- **IF YOU ARE EMPLOYED:** we require the last 12 months of pay stubs or a letter from your employer stating the gross rate of pay, hours per week and total earnings for the last 12 months. Remember that tips/gratuities, alimony/maintenance, and commissions are all considered income and must be reported.
- **IF YOU ARE COLLECTING EMPLOYMENT INSURANCE, INCOME ASSISTANCE (SAP, SAID, TEA, PTA), WORKER'S COMPENSATION, OR PENSIONS:** we require photocopies of your most recent cheques or stubs. If you receive your payments by way of Direct Deposit we also require a copy of your most recent bank statement.
- **IF YOU ARE IN RECEIPT OF A STUDENT LOAN, BURSARY, OR SCHOLARSHIP:** we require copies of your schedules showing the payments you received or will receive and the start and end dates of the educational program.

- **Rental References:** You must provide two rental references - current and previous rental addresses, years rented, Landlord names and telephone numbers/addresses. (form included)

When you have gathered all the applicable information, please call our office at 306-445-4393 to schedule a meeting with a Tenant Relations Officer. The Tenant Relations Officer will assist you in completing an Asset Declaration Form and an application during the meeting.

- During the meeting we will require information regarding your current rental payment or property tax amounts, utility bill costs, and insurance costs. This information is required to assess your eligibility and your housing need.

Once all necessary documents are received, your completed application form will be processed as soon as possible. You will be contacted with the results.

In the meantime, any inquiries may be directed to a Tenant Relations Officer at 306-445-4393. We look forward to working with you in meeting your housing needs!

Additional Requirements/Information:

- *No pets are allowed in any of our units – either to visit or to live with tenants.*
- *There is a \$326 security deposit on all Social Housing units.*



Household Asset Declaration Form

If a below description applies to you, please check the box and sign the form.

- I am a senior applying for the Social Housing Program and have more than \$250,000 in assets;
 I am a senior applying for the Life Lease Program and have more than \$375,000 in assets.

If you have not checked an above box, please complete the below section.

All assets must be declared, including those held outside of Canada (e.g., property in a foreign country).

Enter the values for the assets of all household members in the table below. Value refers to the amount you could get for an item if you sold it less any amount owing on it.

Asset Type	Examples	Total
a. Cash Enter the value regardless of where the money came from, e.g. lump sum payments, capital gains, gaming/lottery winnings, insurance settlements, compensation, etc.	Cash on hand	
	Balance in all bank accounts (e.g. savings, chequing, and tax free savings accounts)	
	Cash in a safety deposit box	
b. Investments Enter the value of financial investments that provide interest, provide dividends, or increase in value. Do not include locked-in investments that are inaccessible, e.g. a trust fund where the age requirement has not yet been met.	Commodities, stocks, bonds, mutual funds, guaranteed investment certificates (GICs), money market funds, etc.	
	Shares, stock options, and warrants in a business	
	Mineral rights and oil and gas leases	
c. Real estate Enter the value of land and buildings.	Primary residence	
	Other land and buildings, including farm land, vacation home, and rental property	
d. Retirement savings plans Enter the value of savings or investments for retirement. Do not include funds converted to income, e.g. Registered Retirement Income Fund.	Registered Retirement Savings Plans (RRSPs)	
	Company and private pension plans	
e. Vehicles Enter the value of vehicles. (A primary vehicle is the one the household uses most for transportation.)	Primary vehicle: enter the value less \$35,000; if the result is negative, enter 0.	
	Secondary vehicles, including business vehicles.	
	Recreational vehicles, including boat, trailer, ATV, etc.	

f. Valuable personal effects Enter the value of items that are not essential for day- to-day living.	Jewelry, antiques, collections, etc. Only declare collective amount over \$10,000.	
Only declare items not being used to generate income.		
g. Business Assets Enter the value of assets for the operation of a business, including a farm.	Cash, stock, inventory, raw materials, tools, equipment, machinery, livestock, furniture, etc. (Note: Include real estate above in c.)	
h. Tools of the trade Enter the value of items you supply as an employed or contracted worker.	Tools, machinery, computer, electronics, musical instruments, etc.	
		TOTAL

I hereby declare the information provided is true, correct and complete.

Signature of applicant

Date

Signature of co-applicant

Date

R-15 Rev: 01/16

FAMILY SOCIAL HOUSING UNITS

VARIOUS HOUSING OPTIONS AVAILABLE IN
BATTLEFORD, CANDU, and NORTH BATTLEFORD

- *Social Housing Program*
- *Rent amount = 30% of gross monthly household income (ask us for details)*
- *Minimum rent that can be charged is \$326 per month*
- *All suites have a fridge & stove*
- *Houses: Tenant pays all utilities (a heating allowance may apply – ask for details)*
- *Apartments: Tenant pays power, telephone & cable*

Apartments



Jackson Apartments: 1251-111th Street



Chisholm Place: 10902 Winder Crescent

Houses



Various Addresses



Visit our websites:

www.nbhousing.ca

www.battlefordhousing.ca

LANDLORD REFERENCE FORM

Instructions: Fill in Section A. Sign at Section C. Forward to your previous landlord and have him/her complete Section B. Previous landlord should return completed form directly to Battleford's Housing Authority at: #102 1191 99th Street; or fax to: 306-446-1277.

Section A

Name of Tenant(s) #1 _____ #2 _____
Former Address: _____
City: _____
Postal Code: _____

Section B (to be completed by former Landlord)

Length of Tenancy: From _____ To _____

Number of Occupants: Adults _____ Children _____

COMPLAINTS: () Yes () No
If YES, How many? _____ What type? _____

LEASE VIOLATION NOTICES: () Yes () No If YES, what type? _____

NOTICE TO VACATE: () Proper Notice Given () Improper Notice Given () Eviction
() Other: _____

DAMAGE DEPOSIT: () Returned () Not returned Details: _____

Outstanding Balance upon Vacating: () Yes () No Details: _____

Other Comments: _____

I certify that the above is true and correct.

Signature of Landlord

Printed name of Landlord

Address

City/Province

Postal Code

Phone Number (daytime) / (evening)

Date

Section C

I authorize the release of the above landlord reference information to Battleford / North Battleford Housing Authority.

Signature of Tenant

Signature of Tenant