

The Provincial Rent Bank Program is a **LOAN** which is interest free to assist applicants with rental arrears and with last months rent. The following is a list of criteria for applicants to follow:

- **Applicants must be facing eviction** to qualify for the Arrears Assistance Program
- **Maximum loan amounts are equivalent to two times the average market rent for the area. Please note that average market rents for the area do get reissued periodically.**
  - Average Market Rent-Apartment:  
Bachelor=\$560 1 Bed=\$788 2 Bed=\$943 3 Bed + =\$1074
  - Average Market Rent-House:  
1 Bed=\$572 2 Bed=\$1045 3 Bed=\$1102
- **Applicants must be a resident of City of Kawartha Lakes or Haliburton County and meet requirements for status in Canada (attach proof to application)**
- **Applicants must be below the Household Income Levels. Please note that Household Income Limits for the area do get reissued periodically.**
  - Bachelor=\$22,000 1 Bed=\$26,500 2 Bed=\$32,000 3 Bed=\$36,500 4 Bed=\$43,000
- **Applicants must have a steady income.**
- **Applicant's rent-to-income ratio must be below 70%** and they must be able to demonstrate that they are able to sustain their housing and repay the rent bank loan.
- Applicants must **detail and document all income and expenses.**
- **The landlord must be involved in the process and in order to receive arrears assistance must be willing to ensure the tenancy of the applicant.**
- Applicants must involve their landlord from the commencement of the application to ensure that **every effort to negotiate a payment agreement directly with the landlord has been made.** The office will contact the landlord to assess the tenant landlord relationship.
- **Applicants must demonstrate that housing is sustainable, habitable and must reside in the City of Kawartha Lakes or the County of Haliburton.** Applicants must be residing as legal tenants in units that are safe and not hazardous to their health.
- **Applicants currently receiving social assistance are not eligible until they demonstrate that all assistance through other funding or grants available are exhausted.** This will be determined through contact with the Ontario Works or Ontario Disability Support Program caseworker, the applicant and the staff of the Housing Department.
- Applicants can **only apply once in a two year period**, repayment of an existing loan may enable an earlier application period.
- Applicants that owe arrears to any social or affordable housing provider in the City of Kawartha Lakes or County of Haliburton **will not be eligible.**





The Corporation of the  
**City of Kawartha Lakes**  
 Social Housing Department  
 322 Kent Street West, P.O. Box 2600  
 Lindsay, Ontario K9V 4S7  
 Tel: (705) 324-6401  
 Fax : (705) 324-0428

**RENT BANK LOAN APPLICATION FORM  
 (Arrears Assistance Program and Last Month's Rent Assistance Program)**

Date: \_\_\_\_\_  
 Name: \_\_\_\_\_ Name of Co-Applicant: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_ SIN: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone #: (H) \_\_\_\_\_ (W) \_\_\_\_\_ Other Contact #: \_\_\_\_\_  
 Referral From: \_\_\_\_\_  
 Monthly Rent: \$ \_\_\_\_\_ Loan Amount Requested: \$ \_\_\_\_\_

**Type of Loan Requested:**

**Rent Bank – Arrears Assistance** \_\_\_\_\_ **Rent Bank - Last Months Rent Assistance** \_\_\_\_\_

**HOUSEHOLD COMPOSITION:**

Name:	Relationship to Client:	D of B (d/m/y):	Sex (M/F):
_____	_____	___/___/___	_____
_____	_____	___/___/___	_____
_____	_____	___/___/___	_____
_____	_____	___/___/___	_____

**PREVIOUS ADDRESSES (if moved in the last 3 yrs):**

Address: _____	Address: _____	Address: _____
_____	_____	_____
Date moved in: _____	Date moved in: _____	Date moved in: _____
Date moved out: _____	Date moved out: _____	Date moved out: _____
Landlord: _____	Landlord: _____	Landlord: _____
Phone #: _____	Phone #: _____	Phone #: _____
Moving reason: _____	Moving reason: _____	Moving reason: _____
_____	_____	_____

Have you ever stayed in a shelter before?  Yes  No      Were you evicted before?  Yes  No

**Eligibility Criteria:**

**Applicants must demonstrate that housing is sustainable, habitable and must reside in the City of Kawartha Lakes or the County of Haliburton.** Applicants must be residing as legal tenants in units that are safe and not hazardous to their health.

**Maximum loan amounts for the Arrears Assistance Program is equivalent to two times the average market rent for the area. Please note that average market rents for the area do get reissued periodically.**

Average Market Rent-Apartment:  
 Bachelor=\$560   1 Bed=\$788   2 Bed=\$943   3 Bed=\$1074  
 Average Market Rent-House:  
 1 Bed=\$572   2 Bed=\$1045   3 Bed=\$1,102

**Maximum loan amounts for the Last Months Assistance Program is the current monthly rent.**

**INCOME AND EXPENSES**

*Verification of all income and expenses must be provided.*

**MONTHLY INCOME:**

- Employment (net):  
     applicant \$ \_\_\_\_\_  
     co-applicant \$ \_\_\_\_\_
- Child Tax Benefit \$ \_\_\_\_\_
- Support Payments \$ \_\_\_\_\_
- Ontario Works Benefits \$ \_\_\_\_\_
- ODSP Benefits \$ \_\_\_\_\_
- Other Gov't/Employer Benefits \$ \_\_\_\_\_
- Employment Insurance \$ \_\_\_\_\_
- Other household member's income \$ \_\_\_\_\_
  
- Bank Savings Interest \$ \_\_\_\_\_
- Working Family Supplement \$ \_\_\_\_\_
- Other (monthly): \_\_\_\_\_ \$ \_\_\_\_\_
  
- Total Monthly Income: \$ \_\_\_\_\_

**MONTHLY EXPENDITURE:**

- Rent \$ \_\_\_\_\_
- Utilities \$ \_\_\_\_\_
- Phone \$ \_\_\_\_\_
- Cable \$ \_\_\_\_\_
- Groceries  
     food \$ \_\_\_\_\_  
     household items \$ \_\_\_\_\_
- Transportation :  
     car lease/loan \$ \_\_\_\_\_  
     gas \$ \_\_\_\_\_  
     car insurance \$ \_\_\_\_\_  
     bus/taxi \$ \_\_\_\_\_
- Child Care \$ \_\_\_\_\_
- Credit Card/s \$ \_\_\_\_\_
- Loans \$ \_\_\_\_\_
- Others \$ \_\_\_\_\_
- Total Monthly Expenses: \$ \_\_\_\_\_

*Are there any monies/ incomes that you will be receiving in the near future that can be used to repay loan?*

\_\_\_\_\_

\_\_\_\_\_

Ontario Works / ODSP clients:

Who is your caseworker?: \_\_\_\_\_

Have you asked your caseworker for assistance to pay arrears?  Yes  No

Verify if there are or are not any grants available:

\_\_\_\_\_

Comments(Optional): \_\_\_\_\_

\_\_\_\_\_

**RENT/INCOME RATIO:** \_\_\_\_\_ % (Rent ÷ Income)

**Employer's Name:** \_\_\_\_\_

**Employer's Address:** \_\_\_\_\_

**Enclose verification of all income sources and a recent rent receipt. We cannot process your claim without verification.**



**Eligibility Criteria:**

**Applicants rent-to-income ratio must be below 70%** and they must be able to demonstrate that they are able to sustain their housing and repay the rent bank loan.

**Applicants must have a steady income.**

**Applicants must be a resident of City of Kawartha Lakes or Haliburton County and meet requirements for status in Canada (proof must be attached).**

Applicants must detail and document all income and expenses. **Applicants annual income must be below the Household Income Levels.** Please note that Household Income Limits for the area do get reissued periodically.

Bachelor=\$22,000 1 Bed=\$26,500 2 Bed=\$32,000 3 Bed=\$36,500 4 Bed=\$43,000

**HOUSING INFORMATION**

Date of move in: \_\_\_\_\_

Lease?  Yes  No

Utilities included?  Yes  No, cost per month: \$\_\_\_\_\_

Parking included?  Yes  No, cost per month: \$\_\_\_\_\_

*TYPE OF HOUSING:*

- house  rent-geared-to-income housing  market-rent government housing
- market-rent apt.  co-op housing  shared accommodation

# of Bedrooms: \_\_\_\_\_ Housing in Good Repair?  Yes  No, why?

\_\_\_\_\_

Are you planning to move?

\_\_\_\_\_

Have you had any other Notice of Termination (form L1) in the last 2 years?  Yes  No

Have you applied for a rent bank loan in the Province of Ontario, within the last 2 years?  Yes  No

I understand and consent to the City of Kawartha Lakes Housing Department obtaining information in regards to this application from my landlord(s), the Landlord and Tenant Board, Ontario Works or Ontario Disability Support Agency. I also understand that the City of Kawartha Lakes may consult with other Community Support Agencies in order to determine and provide referrals to those agencies if the Housing Department feels the service would assist the application.

\_\_\_\_\_  
**Applicant Signature**

\_\_\_\_\_  
**Co-applicant Signature**

\_\_\_\_\_  
**Date**



**Eligibility Criteria:**

Applicants that **owe arrears** to any social or affordable housing provider in the City of Kawartha Lakes or County of Haliburton **will not be eligible**.

**Applicants currently receiving social assistance are not eligible until they demonstrate that all assistance through other funding or grants available is exhausted.** This will be determined through contact with the Ontario Works or Ontario Disability Support Program caseworker, the applicant and the staff of the Housing Department.

**Applicants must be facing eviction to qualify for the Arrears Assistance Program.**

**THIS AREA TO BE COMPLETED BY LANDLORD/PROPERTY MANAGER**

Name of Landlord: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Contact name: \_\_\_\_\_

Address of Rental Unit: \_\_\_\_\_

Current Monthly Rent Amount: \_\_\_\_\_

Reason that there is no agreement to pay directly through landlord?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARREARS INFORMATION: (complete only if applying for the Arrears Assistance Program)**

Total Owed: \$ \_\_\_\_\_

Has the applicant spoken to the landlord about arrears?  Yes  No

Has the applicant attempted to negotiate a repayment plan?  Yes  No

Has the applicant had any eviction notices in the last 2 years?  Yes  No

Reason that there is no agreement to repay arrears directly through landlord?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Has the applicant received a notice of eviction?  Yes  No

*verbal*  *just assumed because rent not paid*

*notice of termination (form N4)*  *other:* \_\_\_\_\_

*notice of application (form 1) to appear at a tribunal* \_\_\_\_\_

REASON/S FOR ARREARS:

\_\_\_\_\_  
\_\_\_\_\_

Rent Payment History:  On time & in full  Sometimes late  In installments

Please Explain:

\_\_\_\_\_  
\_\_\_\_\_

Will the tenant be sustained in their current unit and no more action will be taken towards eviction?

\_\_\_\_\_

Please note Property Roll & Pin # : \_\_\_\_\_

\_\_\_\_\_

**Landlord Signature**

\_\_\_\_\_

**Date**

---

---

**Eligibility Criteria:**

**Applicants must be facing eviction to qualify for the Arrears Assistance Program**

**The landlord must be involved in the process and must be willing to ensure the tenancy of the applicant.**

Applicants must involve their landlord from the commencement of the application to ensure that **every effort to negotiate a repayment agreement directly with the landlord has been made.** The office will contact the landlord to assess the tenant landlord relationship.