

St. Albert Rental Assistance Program

#10A 215 Carnegie Drive St. Albert AB T8N 5B1

Phone 780-459-7391 Fax 780-459-7399

Email sapp@stalbertparentsplace.com

Rental Assistance Program

Program Overview

The Rental Assistance Program provides individuals and families with the ability to sustain appropriate housing. The program provides rental assistance for low to moderate income families and individuals to assist with monthly rent payments up to a max of one (1) year. To qualify, individuals and families must have been employed at some point over the last year, must meet the household income threshold, and must pay more than 30% of your gross monthly household income towards rent.

How to apply

To apply to the rental assistance program follow the step by step directions provided below:

- **Step #1: Confirm your eligibility**
 - See page 2
- **Step #2: Complete an application form**
 - See Attachment 1 & 2
- **Step #3 Attach supporting documents**
 - When applying for rental assistance, the following must be provided with the application:
 - Proof of identity and citizenship for all family members.
 - Proof of rent: tenancy agreement; notice of rent increase; or written declaration from landlord confirming rental amount.
 - Income tax information from the previous year: copy of the Notice of Assessment.

Completed application forms and supporting documents can be sent to the following address, or dropped off at:

St. Albert Rental Assistance Program

C/O: St. Albert Parents' Place

10A 215 Carnegie Drive

St. Albert AB T8N 5B1

ATTN: Outreach Coordinator

- **Step # 4. You will be contacted after your application has been reviewed.**
 - A. If you are approved you will receive a phone call.
 - B. If you are denied you will receive a letter.

Please note although you may qualify based on the application package, funding is limited and will therefore be granted based on highest need.

- **Step #5 : Notify Program Outreach Coordinator of any changes**
 - Please remember to inform the program Outreach Coordinator at St. Albert Parents' Place of any changes; this may include household composition, amount of gross monthly income, source of income, assets, employment, and/or address as soon as such changes occur. By providing this information promptly we can adjust your assistance accordingly to avoid any possible missed payment.

Please call 780-459-7391 ext 224

Office hours Mon-Fri 9am - 4pm

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Eligibility

- Your household's total annual income must be the Core Needs Threshold, below:

FAMILY STATUS	INCOME THRESHOLD
Individual with no dependants	\$29,500
Couple with no dependants	\$35,500
Couple/Individual with 1 dependent	\$43,500
Couple/Individual with 2 dependants	\$54,500
Couple/Individual with 3 dependants	\$59,000
Couple/Individual with 4 dependants	\$62,000

- Your annual household income **must** come from employment
- You are between 18 and 59 yrs of age, or an independent minor with a child.
- You have lived in St. Albert – minimum of 6 months with a fixed address and you must be the lease holder.
- Your house address is a fixed address in St. Albert.
- You pay **more** than 30% of your gross (before tax) monthly household income towards the rent + heat for your home.
- You have less than \$7,000 in assets. *(See reference A)*
- You have no other financial options to sustain housing.
- You do not hold a mortgage.
- You meet the residency requirements for the program. *(See reference B)*

Eligibility for Seniors

- You are age 60 or older.
- You meet the residency requirements for the program. *(See reference B)*
- You have lived in St. Albert – minimum of 6 months with a fixed address, and you must be the lease holder.
- You pay **more** than 30% of your gross (before tax) monthly household income towards the rent + heat for your home.
- You do not hold a mortgage or own property
- You do not live in subsidized housing or a residential care facility funded by the Alberta Senior & Community Supports.
- Your gross monthly income does not exceed the following: (Income may include: OAS, CPP, Interest Income . . .)

FAMILY STATUS	INCOME THRESHOLD
Individual with no dependants	\$29,500
Couple with no dependants	\$35,500
Couple/Individual with 1 dependent	\$43,500

IMPORTANT NOTE

YOU WILL NOT BE ELIGIBLE IF YOU ARE CURRENTLY RECEIVING RENTAL ASSISTANCE FROM CAPITAL REGIONAL HOUSING CORPORATION

APPLICANTS ARE NOT ELIGIBLE IF YOU ARE RECEIVING INCOME ASSISTANCE UNDER THE INCOME EMPLOYMENT SUPPORTS ACT AND INDUSTRY OR ASSURE INCOME FOR THE SEVERELY HANDICAPPED ACT

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The Rental Assistance Program Description

The rental assistance program provides individuals and families with the ability to sustain appropriate housing. The program provides rental assistance for low to moderate income families and individuals to help with their monthly rent + heat payments. Applicants will pay a minimum of 30 percent of their monthly income for rent + heat. The rental assistance program will cover the amount paid above the 30% to a maximum of \$400/month or \$4800/ year. The rent threshold is 30% of annual income that is paid towards rent for your home.

The rental assistance program is a partnership between the Applicant, and the St. Albert Rental Assistance Program. The responsibility of the St. Albert Rental Assistance Program will be as follows:

1. To determine if an Applicant is eligible for rental assistance.
2. To explain all the rules of the program to all qualified Applicants.
3. To make rental assistance benefit payment to the Applicant on the 20th of each month.
4. Ensure annually that Applicants continue to qualify for the program.
5. Provide resources to Applicants who need to be connected to appropriate supports.
6. To help Applicants have the opportunity to leave the rental assistance program with the skills and community resources to sustain housing with out support.

The responsibility of the Applicant will be as follows:

1. To provide complete and accurate information to the St. Albert Rental Assistance Program.
2. To report all changes in income, assets, and family composition within 30 days. (*See reference C*)
3. To pay rent to their landlord on a timely manner and provide proof of paid rent to the St. Albert Rental Assistance Program.
4. To utilize referred resources to make possible the ability to sustain housing with out support.

You will be eligible if you meet the criteria. Rental subsidy will then be granted based on priority of need, and on available spaces (**space is limited**). Your assistance will be effective once your application is completed, submitted and approved. First payment will be made within 4 weeks from date of approval. Subsequent payments will be paid on the 20th of each month. Proof of rent payment is required to sustain benefits. If Applicant is approved, and space is not available, the Applicant will be place on a waiting list, and notified when a space opens up. Applicants may receive assistance up to a maximum of 1 year. Applicants may re-apply at the end of the contract.

Once payment has begun, Outreach Coordinator at St. Albert Parents'Place will connect with the Applicant to offer resources and referrals.

If information is missing, Applicants will have 30 days to provide supporting documentation with application; before application will be terminated.

If Applicant is deemed not eligible for rental subsidy, you will be notified and application will be terminated.

To continue to receive assistance the Applicant must meet the terms of the program. If the Applicant fails to comply with the program requirements, such as failing to pay rent for any reason, the Applicant's participation in the program may be terminated

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The Outreach Coordinator from St. Albert Parent' Place will connect with the Applicant to offer resources and referral services. The Applicant and Outreach Coordinator will work together to develop a service plan for the purpose of being able to obtain resources to sustain housing without subsidy at the end of the rental assistance program. The Outreach Coordinator will connect with the Applicant within the first month to review need and provide resources; again half way through program to review need of resources; and a final meeting will occur 1 month prior to the end of the program. During these visits, the Outreach Coordinator can provide Applicant with the appropriate referrals /resources where necessary.

While on the rental assistance program, the Applicant must provide proof of rent payments for a 3 month probationary period. After the probationary period, proof of rent will be requested randomly, at which point Applicant will be give 14 days to provide appropriate paperwork.

Grievance Procedure

St. Albert Rental Assistance Program acknowledges and supports a client's right to grieve the services provided and pursue effective resolution. Your grievance will be addressed professionally in a formal manner. Please refer to St. Albert Parents' Place Association's grievance procedures to file your formal grievance in writing.

Important Notice

St. Albert Rental Assistance Program will comply with the provision of the Freedom of Information and Protection of Privacy Act. It is the St. Albert Rental Assistance Program's intent to protect the privacy of its clients at all times in the collection, storage and destruction of information

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REFERENCE A

A. What does or doesn't count towards \$7,000 asset ceiling?

Considered:

- Stocks/bonds/term deposits/mutual funds
- Cash
- Business Equity – equity value in the private incorporated company of Cash, GIC's bonds, stocks or real estate held by company.

Not considered:

- Vehicles
- Bursaries or scholarship from educational institutions for any household member that is a current student
- Registered Education Savings Plan (RESPs) and registered Retirement Savings Plans (RRSPs)
- Personal affects; e.g. vehicles, jewellery, furniture
- Trade or business tools essential to continue currently active employment; e.g. farm equipment
- Assets derived from compensatory packages from government (examples include: Indian Residential School Settlements; and Japanese Canadian Redress)

REFERENCE B

B. Residency Requirements

All members of the household must be a Canadian citizen, a landed immigrant or a refugee claimant. Households with family members in Canada under a private sponsorship agreement are not eligible while the sponsorship agreement is in force.

REFERENCE C

C. Reporting Procedures

WHEN IN DOUBT CALL YOUR OUTREACH COORDINATOR

You must report changes in writing to #10A 215 Carnegie Drive St. Albert AB T8N 5B1.

You may also fax: 780-459-7399 Or email: amanda@stalbertparentsplace.com

The information will be placed in your file and you will be notified if more information is needed or if there are any changes to your assistance.

For a list of changes, **Changes in . . . (include, but not limited to)**

<u>Household Income</u>	<u>Household Composition</u>
New job (even if it is a second job)	New baby
Termination of job	A death in the assisted family
Pay raise	Any person who live with you (sleeps, eats, bathes in your home) must be reported. ¹
Pension, SSA, etc;	
Business Income	

¹ a Guest must have another residence and should stay a limited number of days per year s/he with you

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Attachment # 1-APPLICATION CHECK LIST

Before submitting your application for the Rental Assistance Program, please review the following to make sure that all required information is included with the application. Processing of applications will be delayed if submitted incomplete.

- Applications are effective the date they are completed.
- Incomplete applications will be held for 30 days to allow Applicants time to gather missing documentation.
- After 30 days, incomplete applications will be terminated and the Applicant will be required to submit a new application with supporting documents.

Please do not submit original documents.

1. Proof of status in Canada (Proof is required for all family members.)

- Copy of Canadian birth certificate(s) for all family members born in Canada; and
- For family members not born in Canada, provide copies of citizenship papers or immigration documents. Acceptable proof includes:
 - Record of Landing (IMM1000); or
 - Sponsorship Undertaking: Confirmation of Permanent Residence (IMM5292); or
 - Permanent Resident Card (both sides).

2. Proof of Rent

- Copy of lease or Tenancy Agreement showing current rent amount and house address
* please do not sent a letter in lieu.

3. Proof of Assets (include all that apply)

- Copies of bank statements.
- Letter from financial institution.
- Other statement showing total value of asset(s).

4. Proof of Income (Income proof is required for both yourself and your spouse (if applicable).)

- Last year's Income Tax Notice of Assessment
- Proof of CURRENT gross monthly income, from all sources (e.g. Child Tax Credit, Child Benefits, Child Support Payments, RIF interest payments)

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RENTAL ASSISTANCE PROGRAM APPLICATION

This application is designed to collect specific information from Applicants applying for the Rental Assistance Program in accordance with Section 33(c) of the Freedom of Information and Protection of Privacy Act.

Household Information

First Name:		Last Name:		MR	MRS
				MISS	MS.
APT#:	Building/House Number			Street Name	
ST. ALBERT	ALBERTA			Postal Code	
Home Phone () ()		Cell Phone () ()		Work Phone () ()	
Email Address					
Birthdate: ____/____/____				Social Insurance number:	
Are you a Canadian Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No				Or Are you a Permanent Resident? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you a full time student? <input type="checkbox"/> Yes <input type="checkbox"/> No					

Other People Applying with you: (including children)

First Name:		Last Name:	
Birthdate: ____/____/____		Age:	
Social Insurance number:			
Relationship to you: <input type="checkbox"/> Spouse <input type="checkbox"/> Son <input type="checkbox"/> Daughter <input type="checkbox"/> other:			
Are they a Canadian Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No		If no, are they a Permanent Resident? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do they go to school full time? <input type="checkbox"/> Yes <input type="checkbox"/> No		Do they have a source of income? <input type="checkbox"/> Yes <input type="checkbox"/> No	

First Name:		Last Name:	
Birthdate: ____/____/____		Age:	
Social Insurance number:			
Relationship to you: <input type="checkbox"/> Spouse <input type="checkbox"/> Son <input type="checkbox"/> Daughter <input type="checkbox"/> other:			
Are they a Canadian Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No		If no, are they a Permanent Resident? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do they go to school full time? <input type="checkbox"/> Yes <input type="checkbox"/> No		Do they have a source of income? <input type="checkbox"/> Yes <input type="checkbox"/> No	

First Name:		Last Name:	
Birthdate: ____/____/____		Age:	
Social Insurance number:			
Relationship to you: <input type="checkbox"/> Spouse <input type="checkbox"/> Son <input type="checkbox"/> Daughter <input type="checkbox"/> other:			
Are they a Canadian Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No		If no, are they a Permanent Resident? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do they go to school full time? <input type="checkbox"/> Yes <input type="checkbox"/> No		Do they have a source of income? <input type="checkbox"/> Yes <input type="checkbox"/> No	



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INCOME INFORMATION

**** ALL income from all source for all household members must be declare. Used additional sheet if more space is required**

Please list all household MONTHLY sources of income below:

List all current sources of household income	Applicant	Person 1	Person 2
WORK			
CHILD TAX BENIFIT			
CHILD CARE CREDIT			
CHILD SUPPORT			
OLD AGE SECURITY			
SENIORS BENEFIT			
CPP PENSION			
STUDENT FUNDING			
SELF EMPLOYMENT			
WCB/INSURANCE			
EI BENEFITS			
FOREIGN COUNTRY INCOME			
OTHER			

ASSETS:

List all Assets and Money of all household members	Applicant	Person 1	Person 2
CASH ON HAND			
MONEY IN BANK			
STOCKS/BONDS/GICS			
RRSPS/RESPS			
RIFS			
OTHER INVESTMENTS			

**** PLEASE NOTE ALL NON TAXIABLE AND TAXIBLE EARNINGS MUST BE REPORTED**

(May include: Child Tax Benefits, Child Support Payments, Bursaries, Disability Benefits. . .)

Verification Required:

Proof of Income (Income proof is required for both yourself and your spouse (if applicable).)

- Last year's Income Tax Notice of Assessment
- Proof of CURRENT gross monthly income, from all sources (last three consecutive Cheque stubs, letter from employer or other income statement).
- Proof of CURRENT gross monthly income, from all sources (e.g. Child Tax Credit, Child Benefits, Child Support Payments, RIF interest payments)

Proof of Assets (include all that apply)

- Copies of bank statements.
- Letter from financial institution.
- Other statement showing total value of asset(s)

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RENTAL HISTORY

Your current monthly rent: \$ _____ (**do not** include utilities, parking, cable, etc)

Please indicate your dwelling: House Condo Townhouse Basement Suite

Please indicate the number of bedrooms: 1 2 3 4

Do you receive room & board by any members of the household? Yes No

If yes, how much? \$ _____

Does your rent include heat (natural gas)? Yes No

If No how much do you pay: _____ If no you may include a copy of your natural gas heating bill

Please list your address(es) for the past 12 months

Address	From Date (dd/mm/yyyy)	To Date (dd/mm/yyyy)	Name of Landlord	Landlord's Phone number

Verification Required:

Proof of Rent

- Copy of lease or Tenancy Agreement showing current rent amount and house address
*** DO NOT send a letter in lieu

Please note Basements must be registered with the City of St. Albert. If you are in a basement suite we may ask for a copy of the occupancy permit.

OTHER INFORMATION

1. Have you or anyone on the application ever received a rent subsidy from Capital Regional Housing Corporation before? Yes No

2. Have you or anyone on the application ever applied for rent subsidy from Capital Regional Housing Corporation? Yes No

If you answered yes to question 2, please state when it was you have applied and how long you have been on the waiting list for:

Application for Subsidy date (dd/mm/yyyy) _____

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Declaration

The information you give will be kept confidential. The collection of information is authorized under section 33(c) of the Freedom of Information and Protection of Privacy Act and the privacy protection provisions in that act will protect it.

I am aware that the Rental Assistance benefit is a taxable benefit; in which, I will receive a T5-007 at tax time; I am aware that this benefit will effect my total income earned, which may effect my additional federal and provincial benefits that may include, but not limited to GST, Child tax Credit; Alberta Benefits.

I declare this is my application. I declare that all the information in it is true and complete to the best of my knowledge.

Signature of Applicant	Print Name	Date
