



APPLICATION FORM

Application for Housing at Hesperus Village

Please print clearly and fill out all sections. If you need more space to write your response, please attach a separate piece of paper. **All applicants interested in an affordable market unit in Hesperus East or Hesperus West, or a subsidized unit in Hesperus East must fill out this form. If you are interested in a subsidized unit in Hesperus West, please contact York Region Housing directly 1-877-464-9675 (<https://www.york.ca/support/housing/applying-subsidized-housing>).**

SECTION 1 - PERSONAL INFORMATION

Date of application:					
Name: (print)		D.O.B.	YYYY MM DD	<input type="checkbox"/> Male	<input type="checkbox"/> Female
Name: (print)		D.O.B.	YYYY MM DD	<input type="checkbox"/> Male	<input type="checkbox"/> Female
No., street, & apt.:					
City, town, village:		Postal code:			
If there is more than one applicant, how are you related?					
Daytime phone:	Evening phone:	Cell phone:	E-mail:		
If English is not your first language, is there an alternate contact person we can call if we have any questions about the application? Yes or No		Alternate contact name:	Alternate contact number:		
Your first language:		How are you related:			

SECTION 2 - RESIDENCY

Building choice (you may pick both)	<input type="checkbox"/> Hesperus East	<input type="checkbox"/> Hesperus West
Apartment size required (you may pick as many choices as are available):	<input type="checkbox"/> Studio	<input type="checkbox"/> One bedroom
	<input type="checkbox"/> One bedroom	
	<input type="checkbox"/> Two bedrooms	<input type="checkbox"/> Two bedrooms
Parking required	<input type="checkbox"/> Yes <input type="checkbox"/> No	Locker required <input type="checkbox"/> Yes <input type="checkbox"/> No
Interested in communal dining <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you currently receiving assisted living (PSW) services from a community agency? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you requesting a subsidized unit? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you requesting a market unit? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If you selected Hesperus West as a building choice and you are requesting a subsidized unit, you must apply directly to York Region Housing Services. If you selected a subsidized unit in Hesperus East, or a market unit in either Hesperus West or East, you apply directly to Hesperus Village by submitting this application and other required documents.		

Planned Occupancy	
<i>Note: New residents are required to live fully independently with or without assistance.</i>	
Taking into account your age and personal circumstances, when do you think you are ready to move in?	Year/Month
Additional Comments	

SECTION 3 - GENERAL INFORMATION

How did you hear of Hesperus?

Have you had any experience living in community?

Would you be interested in receiving our newsletter and notices of events, activities and programs via email?

Yes No

Would you be interested in volunteering at Hesperus Village, or learning more about these opportunities?

Yes No

SECTION 4 – RELEASE & CONSENT, DECLARATION TO BE SIGNED

(Please make sure you sign on pages 5 and 6)

Release and Consent: This is your legal agreement with us to consent to the release of your personal information.

1. I understand that The Regional Municipality of York (“Region of York”), Ontario Ministry of Health and Long-Term Care (“MOHLTC”) and any housing provider listed in my application for subsidized housing assistance are permitted under the Social Housing Reform Act, 2000 (SHRA) and/or the Municipal Freedom of Information and Protection of Privacy Act (MFIPPA) to collect personal information about me so long as they comply with the standards for collecting, using, disclosing and safeguarding information as set out in the applicable legislation.
2. I understand and agree to release any personal information and required documents to either the Region of York, MOHLTC, and/or the housing provider for the purpose of processing my application for subsidized housing assistance which may include determining:
 - a. my initial and ongoing eligibility for subsidized housing assistance;
 - b. the size and type of unit that I may be eligible for;
 - c. where I am on the waiting list for subsidized housing assistance; and
 - d. the amount of subsidized housing assistance I will be required to pay. Any personal information collected by the Region of York, MOHLTC and/or the housing provider about me for the above mentioned purpose will be hereafter referred to as “my personal information”.
3. I agree to release to the Region of York, MOHLTC and/or the housing provider information about any bank account, safety deposit box, assets of any nature or kind held by me, or on my behalf, or by or on behalf of any of my dependants or children temporarily in my care, alone or jointly with any other person in any financial institution, in order to verify my initial or ongoing eligibility for subsidized housing assistance.
4. For the purpose set out in paragraph 2, I allow the Region of York, MOHLTC and/or the housing provider to obtain any credit information about me from any credit agency or any other source.
5. I allow the Region of York, MOHLTC and/or the housing provider to share my personal information, without further notice to me, with the Ministry of Municipal Affairs and Housing, the Ontario Housing Corporation, the Social Housing Services Corporation, other municipal service managers or district social services administration boards or lead agencies as defined under the Social Housing Reform Act, 2000, and each person or organization providing services by contract to any of them, if it is needed to make decisions or verify my eligibility for assistance under any housing program offered by York Region from time to time, the Social Housing Reform Act, 2000, the Ontario Works Act, 1997, the Ontario Disability Support Program Act, 1997 or the Day Nurseries Act.
6. I understand that any of my personal information given by the Region of York, MOHLTC and/or the housing provider to a government or body mentioned above in paragraph 5 is confidential and will only be given in accordance with SHRA and/or MFIPPA.
7. I understand that any of my personal information provided by me to the housing provider is given on the understanding that the housing provider is collecting this information on behalf of the Region of York and MOHLTC.
8. I understand that any inquiries with respect to my personal information may take the form of electronic data exchanges.

9. I confirm that if I have any questions or concerns about the collection, use or disclosure of my personal information, I should contact:

Supervisor, Housing Access Unit
The Regional Municipality of York
17150 Yonge Street | Newmarket, ON
L3Y 8V3t
1-877-464-9675

Personal information contained in this form or in any attachments to it is collected by The Regional Municipality of York and/or the housing provider, pursuant to the *Social Housing Reform Act, 2000* and/or the *Municipal Freedom of Information and Protection of Privacy Act* and will be used only as set out in this form. The information will be used to determine current/on-going eligibility to subsidized housing assistance, as well as for statistical reporting. The information provided may be cross-referenced with other municipal data pertaining to the household.

_____ Applicant's Name (Please print)	_____ Signature	_____ Date
_____ Co-Applicant's Name (Please print)	_____ Signature	_____ Date
_____ Other Household Member (Please print)	_____ Signature	_____ Date
_____ Other Household Member (Please print)	_____ Signature	_____ Date

Declaration:

I declare:

1. I declare that everything I have written in this document is true and that no information that is required to be given has been withheld or omitted.
2. I understand that all of my personal information I give to the Region of York, MOHLTC and/or the housing provider will belong to them.
3. I understand that only the people I have listed on this document may live with me in subsidized housing.
4. I understand that the Region of York, MOHLTC and/or the housing provider will use my personal information that I give them to determine if I am eligible or continue to be eligible for subsidized housing assistance; the size and type of unit I may be eligible to receive; my placement on waiting lists; and the amount of subsidized housing assistance payable by me.
5. I declare that I am in Canada legally.
6. I understand that I must pay back or arrange to pay any money I may owe to any subsidized housing project.
7. I understand that it is an offence, under the *Social Housing Reform Act, 2000* for an individual to knowingly obtain or assist a household member to obtain RGI assistance for which they are not entitled. Such an offence carries a fine and/or imprisonment as well as a prohibition from re-applying for assistance for a minimum period of two years. If something on this document is missing, incorrect or false, the Region of York, MOHLTC and/or

the housing provider may request additional information, or may cancel my eligibility for subsidized housing assistance and may request my household to reimburse the Region of York and MOHLTC for the amount of subsidized housing assistance paid on behalf of my household.

8. I understand that if the Region of York, MOHLTC and/or the housing provider request a household to reimburse the Region of York and MOHLTC, the members of the household who are parties to the lease or the occupancy agreement for the unit are jointly and severally liable to pay the amount owing to Region of York.

Applicant's Name (Please print) Signature Date

Co-Applicant's Name (Please print) Signature Date

Other Household Member (Please print) Signature Date

Other Household Member (Please print) Signature Date

Thank you for completing this form.

*'Living in Community' requires social and community commitment.
If you are not familiar with Hesperus' Social philosophy and its roots in Anthroposophy, please visit the www.hesperus.ca website or contact Hesperus and we will arrange a tour and a conversation at:*

Email: info@hesperus.ca Tel: 905.764.0840, www.hesperus.ca

PLEASE MAIL OR DELIVER TO:

**Hesperus Village
1 Hesperus Road, Unit 130
Vaughan, Ontario L4J 0G9**