



## CHIPPEWAS OF KETTLE & STONY POINT FIRST NATION RENTAL HOUSING APPLICATION

Personal information on this form will be used to assess eligibility for the rental housing program provided by KSPFN. Questions about the collection and use of your personal information should be directed to the Housing Department. If additional space is required in order to provide complete information, please attach additional pages to this application form.

1. GENERAL INFORMATION	
<b>1A. Applicant Information (required)</b>	
<b>Applicant Name</b> (FIRST) (MIDDLE) (LAST)	<b>Band Membership Number</b> (if applicable)
<b>Date of Birth</b>	
<b>Mailing Address</b> (Street address, unit number, city and postal code)	
<b>Phone Number</b>	<b>Relationship Status</b> (select one) <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Common-law
<b>Email Address</b>	
<b>Are you currently employed?</b> <input type="checkbox"/> Yes – if yes, do you work <input type="checkbox"/> Full time / <input type="checkbox"/> Part time <input type="checkbox"/> No	<b>Name of current employer</b> (indicate if self-employed)
<b>How long have you worked for your current employer?</b>	<b>Employer Phone Number</b>
<b>Work Address</b> (Street address, unit number, city and postal code)	
<b>1B. Co-Applicant Information (not required)</b>	
<b>Co-Applicant Name</b> (FIRST) (MIDDLE) (LAST)	<b>Band Membership Number</b> (if applicable)
<b>Relationship to Applicant</b>	<b>Date of Birth</b>
<b>Mailing Address</b> (Street address, unit number, city and postal code)	
<b>Phone Number</b>	<b>Relationship Status</b> (select one) <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Common-law
<b>Email Address</b>	
<b>Are you currently employed?</b> <input type="checkbox"/> Yes – if yes, do you work: <input type="checkbox"/> Full time / <input type="checkbox"/> Part time <input type="checkbox"/> No	<b>Name of current employer</b> (indicate if self-employed)

How long have you worked for your current employer?	Employer Phone Number
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Work Address ((Street address, unit number, city and postal code)

**1C. Other Residents - complete the below chart with all additional family members who will reside in the housing being applied for.**

Last Name	First Name	Band Membership Number	Date of Birth	Gender	Relationship to applicant(s)

**In the space below or on a separate piece of paper, please introduce yourself and the other residents and any special considerations the Housing Department should be aware of in reviewing your application.**

## 2. INCOME INFORMATION

Sources of Family Income - complete the below chart to detail all sources of income of the applicant(s) and other contributors.

Source of Income	Applicant (Amount per month)	Co-Applicant (Amount per month)	Other Contributors (Name & Amount per month)
Employment (From All Sources)			
Ontario Works			
Provincial Family Benefits			
OAS Pension (Old Age Security)			
Alimony/Support			
EI Benefits			
ODSP (Ontario Disability Support Program)			
Lease Property Income			
Other (Specify)			
Total Gross Family Income:			

Note: If an Applicant is on ODSP and requires a letter for their Caseworker from Housing, stating that they are applying for an apartment. Please contact Whitney Henry at [whitney.henry@kettlepoint.org](mailto:whitney.henry@kettlepoint.org) with your Caseworker's email address. Housing will provide a letter stating the monthly amount of rent and that you are applying for a unit.

## 3. HYDRO ACCOUNTS

Please call Hydro One at 1-888-664-9376, then hit 2 for billing and 6 for other. Ask the representative to email you a Credit Reference Letter and attach the copy with this application. They will ask you the last address you had used with Hydro One. This letter will confirm how long you were with Hydro One and if there were any disconnection trips, due to unpaid bills. If you never had an account with Hydro One, please ask the representative for a letter confirming this. If you have never had an account with Hydro One, please check this box:

## 4. ENBRIDGE ACCOUNTS

For those currently set up with Enbridge or have used Enbridge in the past: please provide the latest copy of your Enbridge Gas bill, to confirm you are not in arrears. You can request this by calling 1-877-362-7434, then hit 1 for English, 3 for main menu, 2 for account balances, then 0 for customer service. You can also receive a copy of your latest bill by going to: <https://myaccount.enbridgegas.com/>.

If you have never had an account with Enbridge, please check this box:

## 5. FINANCIAL STANDING WITH KSPFN

Please provide a current letter of good standing from the KSPFN finance department for each applicant. Failure to provide such letter of good standing for all applicants will result in an incomplete application. Please call Marcia Branton at 519-786-2125 x 107 or email her at [marcia.branton@kettlepoint.org](mailto:marcia.branton@kettlepoint.org) to request a letter of good standing.

## 6. PRESENT HOUSING

<b>Current housing arrangement</b> (select one) <input type="checkbox"/> Rental <input type="checkbox"/> Own <input type="checkbox"/> Other (please describe):	<b>How long have you lived at this address?</b>
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If you currently are staying a family / friend's dwelling, please state your relationship with the person:

If you are currently staying at family / friend's house, or rent/own your own place - please state how many people live in this dwelling and how many bedrooms there are inside the dwelling:

Number of bedrooms in the dwelling:          Number of people living in the dwelling:

Question	Yes	No	If yes, describe
Does your current housing present any health or safety concerns for you or any members of your family?	<input type="checkbox"/>	<input type="checkbox"/>	
Do you have other concerns about your current housing situation?	<input type="checkbox"/>	<input type="checkbox"/>	(Please attach an additional page if more space is required)

## 7. RESIDENCE HISTORY

Please list all current and former residences of the applicant(s) for the past 10 years

Applicant	Co-Applicant	Address	Landlord Information (Name, phone number)	Date of residence (mm/yyyy to mm/yyyy)
<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/>	<input type="checkbox"/>			

**8. CHECKLIST SUMMARY OF DOCUMENTS NEEDED FOR A COMPLETE APPLICATION**

Did you review each page completely and ensure there are no spaces that are left blank or unanswered in any of the boxes from Numbers #1 to #7?	<b>Yes</b>	<b>No</b>
Did you submit (2) copies of your last sources of income with your application? This includes for both the applicant and co-applicant.	<b>Yes</b>	<b>No</b>
Did you provide a copy of a Letter of Good Standing? This includes for the both the applicant and co-applicant.	<b>Yes</b>	<b>No</b>
Did you attach a Credit Reference Letter from Hydro One? Or if you never had an account did you check the box in #3?	<b>Yes</b>	<b>No</b>
Did you attach a copy of your last bill from Enbridge? Or if you never had an account did you check the box in #4?	<b>Yes</b>	<b>No</b>
Did you fill out the #1C Introduction Letter or attach one on a separate piece of paper?	<b>Yes</b>	<b>No</b>
Did you attach copies of <b>either:</b> Two Reference Checks from Previous Landlords Or Two Character References from Non-Family Members  Note: For either reference checks from previous Landlords or character references from non-family members <b>these must be a small written letter.</b>	<b>Yes</b>	<b>No</b>

**Note: If any boxes are circled “No” your application is not complete.**

**Please fully review your application and ensure it is completed before submitting.**

**Applications must be 100% completed to be considered.**

**9. DECLARATION**

I authorize the Kettle and Stony Point First Nation to make any inquiries that it deems necessary to verify the information given in this Application and I authorize any person, corporation or agency having knowledge of any such required information to release the information to the Kettle and Stony Point First Nation. I agree to provide any supporting material the Kettle and Stony Point First Nation may require.

I certify that the information provided is true and I understand that where my application contains false information, my application may be refused.

<b>Signature of Applicant</b>	<b>Date</b>	<b>Signature of Co-Applicant</b>	<b>Date</b>
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