

**Ehrlo Housing Application Form**

**Lakeshore Village** provides one- and two-bedroom apartments in a 44-unit housing complex in the Hillsdale neighbourhood. It is intended to provide affordable housing for families, with one - two dependents.

Creative Corners Daycare is on site and requires a separate application process.

Singles and seniors may be considered on the waitlist if we do not have eligible families for units as they become available.

Reporting income and family composition on an annual basis is required for affordable housing units.

**Chaz Court** provides bachelor apartments in an eight-unit complex located in the Heritage neighbourhood. These units are available to single youth (age 16 - 24), who are seeking independent living and can do so with or without supports.

If all eligibility requirements are met, applications will be considered on a first come, first served basis.

References will be checked including a search into the Canadian Legal Information Institute (CANLII) database, for any previous landlord/tenant disputes.

**Ehrlo Housing Office**

#2-3535 Hillsdale St.

Regina, SK S4S 3Y4

306-751-5666 or 306-584-3313

Email: housingapplications@ranchehrlo.ca

Applications can be emailed, mailed, or dropped off in-person during the hours of 8 a.m. – 4 p.m.

Rental Rates

Rates are determined based on the maximum rents published by Saskatchewan Housing Corporation (SHC). They are adjusted periodically to reflect changes in the median market rents in this community (see Appendix 1 for current year maximums).

Ehrlo Housing reviews rental rates annually based on SHC’s updated Rate Schedule and proposes any rent increase, which then must be approved by the board of directors of Ranch Ehrlo Society. All notice of rental rate increases will follow the guidelines of the Residential Tenancies Act, 2006, and be reported to SHC.

Annual Review

Every year, between April 1st and July 31st, the tenant must provide proof of the total annual income of each member in the household and verification of family composition. Failure to provide either document on an annual basis will result in a 30-day Notice to Vacate.

If You Are No Longer Eligible

If it is determined that your income or family composition has changed and you are no longer eligible for affordable housing, Tenants will be given a 90-day notice (3 months) in which to find other suitable accommodations.

Ehrlo Housing Office

Our office is located at #2-3535 Hillsdale St. Regina, SK S4S 3S4.

Our in-office hours are 8 a.m. – 4 p.m., or by appointment. You can contact our office at 306-751-5666 or 306-584-3313 to schedule an appointment.



 APPLICATION

**CONTACT INFORMATION**

1. Applicant’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Birthdate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Phone number: (H) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (W)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Cell)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Please check your housing preference:
* Lakeshore Village – 23rd Ave & Hillsdale St. (families with dependent children)
* Chaz Court – 1747 Montreal St. (single youth only)
1. Is there a Co-Applicant? (If no, skip to PART A) \_\_\_\_Y \_\_\_\_N
2. Co-applicant’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Relationship to applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Birthdate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PART A – ELIGIBILITY**

1. Are you in Canada on a student visa or as a visitor? \_\_\_\_\_\_\_Y \_\_\_\_\_\_\_ N
2. Complete the table for each household member except yourself (Applicant) and the Co-applicant (if applicable).

|  |  |  |  |
| --- | --- | --- | --- |
| Last Name  | First Name | Relationship to Applicant  | Date of Birth(DD/MM/YYYY) |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

1. I have my child(ren) (check one that applies) \_\_All the time; \_\_Most of the time; \_\_Some of the time; \_\_Never
2. If anyone in your household has a permanent disability that has a housing-related impact, please describe:

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

1. To allow us to determine your income, attach all income information for each household member 19 or older, except dependants 25 or younger who are full-time students, and check what is attached.

\_\_Most recent Income Tax Notice of Assessment up to and including line 150.

\_\_Pay stubs if income has changed since filing the most recent T1 General or if no T1 General was filed.

\_\_ If on Assistance, attach current month pay stub as verification.

\_\_Proof of non-taxable income from the past year (student grant and bursaries, band funding).

1. Provide your household’s current total GROSS monthly income: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

**REFERENCES**

1. Current address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Are you renting? \_\_ Y \_\_ N

Landlord name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact number (phone, fax, email): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you are not renting at this address, what are the current arrangements you have in place for your residency (staying with friends or family, shelter, etc.)

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

1. Why are you leaving your current housing arrangement? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

1. Previous landlords in last five years:

a). Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dates rented:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Contact Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

b). Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dates rented:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Contact Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

c.) Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Dates rented: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Contact Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

d.) Any others? Name and contact number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

1. If there is a Co-applicant, do they have different rental references?

Name and contact numbers: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. If you have no rental references, who can we contact that will provide a character reference on your behalf (teacher, guidance counsellor, employer, support worker, etc.)

 Name and contact number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Were you referred to us by someone or by an organization? Please provide name and contact information: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Do you know or are you related to anyone lives (or has lived) at any Ehrlo Housing Property? If yes, who? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Where did they live? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **PART B – PRIORITY ASSESSMENT**

If you meet the requirements in PART A, we will use PART B to assess your current level of need.

1. I am/we are currently (check one):
* Homeless or at immediate risk of homelessness (living on the street, in a vehicle, motel, shelter or temporarily with family or friends).
* Living in a home that I/we rent.
* Living in a home that I/we own.
* Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
1. My/our current home has:
* Hazards that make my current home unsafe. Please describe: \_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

3. Check all that apply:

* My family is separated or at risk of being separated. Please explain:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

* I need to move because of stress or conflict between current household members.
* I have received a notice of eviction. Reason? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.
* I/we have poor access to work/services/school/childcare because of limited or no access to transportation.

4. I receive income from the Saskatchewan Income Support (SIS), Saskatchewan Assured Income for Disabilities (SAID), or Provincial Training Allowance (PTA). \_\_\_\_Y \_\_\_\_N

 **PART C: OTHER**

Ehrlo Housing will consider your answers in PART C along with other information to identify an appropriate housing unit for your household.

1. Do you currently own a pet? \_\_\_Y \_\_\_\_ N If yes, do you understand we have a **NO PET** **POLICY** at Ehrlo Housing and what are the arrangements you have made for your pet?

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

1. Do you expect your household to increase (i.e.: new baby), when (DD/MM/YYYY) \_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Please read the attached Declaration and Consent that form part of this application. By signing, you agree to its terms.

Declaration and Consent

I declare that all the facts given by me in this application are true and complete. I understand that if any fact is found to be false, my application will not be considered or, if I have been placed in a rental unit, I may be required to vacate.

I understand this application does not obligate Ehrlo Housing to provide me with an affordable housing unit.

I give my consent to Ehrlo Housing to collect, use, and disclose any of the facts given by me in Part A of this application form for any of the following reasons:

* To determine if I am eligible for housing under the Affordable Housing Program.
* To make inquiries to my previous landlords or respond to inquiries from future landlords regarding my tenant history.
* To SHC (excluding names) for audit purposes.
* To collect rent arrears or any other amount owing by me to Ranch Ehrlo Society.

I give my consent to Ehrlo Housing to collect, use and disclose of any of the facts given by me in Part B and Part C of this application for any of the following reasons:

* To assess and prioritize my need for housing.
* To consider my preferences for housing.

I understand that the facts given by me in this application form will be collected, used, kept, and disposed of as required by law.

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

Signature of Applicant Date (DD/MM/YYYY)

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

Signature of Co-applicant Date (DD/MM/YYYY)

Received by Ehrlo Housing:

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

Signature Date (DD/MM/YYYY)

Appendix 1

2024-25 Ehrlo Housing Rental Rate

Bachelor Suites - Chaz Court - $498 plus power

1-bedroom units – Lakeshore $850 plus power; Renovated units $1,000 plus power

2-bedroom units – Lakeshore $900 plus power; Renovated units $1,100 plus power

2024-25 Income Maximums

Bachelor Suites Single, no dependents – $40,500

1-bedroom units Single/Couple; 1 dependent - $52,000

2-bedroom units Single/Couple; 2 dependents - $57,500