



Ajax Municipal Housing Corporation

1 Richards Lane Ajax, Ontario, L1T 3M3
Phone (905) 683-9269 Fax (905) 683-7324
Email: amhc@amhchousing.ca

Application for Housing (Market Rent)

*Please note: All application forms received incomplete will be delayed and could affect your chances of being selected *

Section A - Applicant

Full Name: _____ DD/MM/YYYY
Last First M.I. Date of Birth (DD/MM/YY)

Gender: _____ S.I.N.: _____

Address: _____
Street Address Apartment/Unit #

_____ *City Province Postal Code*

Best number for us to reach you: (H): _____ (C): _____

Email: _____

<i>Person to contact in your absence or to act as interpreter</i>		<i>Relationship to applicant (circle one)</i>	
<i>Name:</i> _____	<i>Phone:</i> _____	<i>Friend</i>	<i>Interpreter</i>
		<i>Relative</i>	<i>Other</i>

Do you presently rent or own the home you reside in? Yes No

Do you presently rent from a relative? Yes No

Present Landlord Name: _____ Telephone No. _____

Address: _____

How long have you lived at present address? Years: _____ Month(s) _____

Present Rent or Mortgage amount: \$ _____

Previous to residing at the address above, did you rent or own your home? Yes No

If you rented, did you previously rent from a relative? Yes No

Previous Landlord Name: _____ Telephone No. _____

Address: _____

From: _____ To: _____ Reason for leaving: _____

Section B - All Persons/Family members to reside in Accommodation applied for:

Last Name	First Name	Date of Birth			Gender	Relationship	Do they currently reside with you?
		Day	Month	Year			
						(SELF)	
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No

NOTE: All persons over the age of 18 or persons who do not currently reside with you, must fill out a **Section D. If you have multiple persons who need to fill out **Section D** please obtain additional application forms.**

Section C – All Applicants Source of Income

Source of Income	Gross Monthly Income (Before Deduction)		
	Applicant	Co-Applicant	Other Family
Employment (From all Employers)	\$	\$	\$
Social Assistance (Ontario Works or ODSP)	\$	\$	\$
Old Age Security/Canada Pension/Monthly Pensions	\$	\$	\$
Alimony/Support	\$	\$	\$
Employment Insurance (E.I)	\$	\$	\$
Workplace Safety Insurance Board (WSIB)	\$	\$	\$
Other(Please Specify)	\$	\$	\$

Section D – Co Applicant

Do you wish this person to be listed as a lease holder? Yes No

Full Name: _____ DD/MM/YYYY
Last *First* *M.I.* *Date of Birth (DD/MM/YY)*

Gender: _____ S.I.N.: _____

Address: _____
Street Address *Apartment/Unit #*

_____ *City* _____ *Province* _____ *Postal Code*

Best number for us to reach you: (H): _____ (C): _____

Email: _____

Do you presently rent or own the home you reside in? Yes No

Do you presently rent from a relative? Yes No

Present Landlord Name: _____ Telephone No. _____

Address: _____

How long have you lived at present address? Years: _____ Month(s) _____

Present Rent or Mortgage amount: \$ _____

Previous to residing at the address above, did you rent or own your home? Yes No

If you rented, did you previously rent from a relative? Yes No

Previous Landlord Name: _____ Telephone No. _____

Address: _____

From: _____ To: _____ Reason for leaving: _____

Section E - Declaration

I hereby make the following Representations and Warranties knowing that they will be relied upon by Ajax Municipal Housing Corporation (AMHC) to access my qualifications for rental accommodations. The information given in the form is accurate and complete; I understand that if rental accommodation is provided to me, that accommodation is to be occupied only by me and those members of my family approved by AMHC.

I give my consent and authorization to AMHC to make any inquiries that it deems necessary to verify the information given in this form and I authorize any person, corporation or any social agency having knowledge of any such required information to release the information to AMHC. This includes credit and reference checks. I also agree to provide further material that AMHC may require.

Applicant Signature: _____ Date: _____

Witness: _____

CO-Applicant Signature: _____ Date: _____

Witness: _____

Section F - Schedule "A"

(For one or two co-tenancy applicant otherwise complete a separate Application for additional Co-Applicants)

Definition Information

The word "Information" means credit information, personal information, information about the services you use that are provided by the Landlord as listed in this rental application and information relating to your tenancy at the Premises applied for in this rental application including information regarding the duration of your tenancy, monthly rent, emergency contacts and any matters relating to your lease/tenancy agreement; including misrepresentations relating to, defaults under/or breaches of your lease/tenancy agreement or any other matter experienced by the landlord.

"Credit information" means information about you, including your name, age, date of birth, occupation, place of residence, previous places of residence, occupation length, marital status, co-occupant's/spouse's/same-sex partner's name and age, number of dependents, particulars of education or professional qualifications, field of employment, places of employment, employment duration, estimated income, paying habits, outstanding debt obligations, cost of living obligations, involvement in bankruptcy proceedings or landlord and tenant disputes, assets, and banking information (including account and credit card information).

"Personal Information" Means information about you other than credit information that is relevant to your suitability as a tenant, including information gathered from references (provided by you to the landlord) concerning your character, reputation, physical characteristics or mode of living or about any other matter or experience concerning you that is relevant to your suitability as a tenant.

Collection Use and Disclosure of information;

In consideration for the landlord accepting you as a tenant and entering into a lease/tenancy agreement with you. You expressly consent to and authorize the following:

1. The Landlord may obtain information about you through a tenancy and/or credit report conducted by *Rent Check Credit Bureau* and as permitted or required by law. You expressly authorize *Rent Check Credit Bureau* to provide Credit information regarding you to the Landlord.
2. The Landlord may use information about you to determine your suitability as a tenant and as a permitted or required by law.
3. The landlord may disclose Credit information about you to *Rent Check Credit Bureau*, as permitted or required by law, for inclusion within a database or rent-roll information and within a tenancy file on you, for purposes of:
 - Tenant reporting and credit reporting in accordance with provincial credit and consumer reporting acts;
 - Establishing a credit history and/or rental history;
 - Maintaining aggregate statistical data for purposes of tenancy and credit scoring; and
 - Supporting the credit approval process in accordance with government legislation
4. You expressly authorize *Rent check Credit Bureau* to retain positive Credit information regarding you for the purposes outlined in section 3 above, for up to 20 (twenty) years. Negative Credit information shall be maintained on record in accordance with provincial credit and consumer reporting acts.
5. You agree that all Statements on this Residential Rental agreement Application are true and you expressly authorize all references given to release information about you to the Landlord for verification subject to sections A to E.

Please provide you consent by checking the following box and signing in the approved space below

Yes I have read and agree to the collection use and disclosure of information as outlined above. I have read and understand voluntarily agree to the terms and conditions outlined above.

Yes I have read and agree to the collection use and disclosure of information as outlined above. I have read and understand voluntarily agree to the terms and conditions outlined above

_____ X
Applicant's Signature

_____ X
Co-Applicant's Signature

_____ X
Print Name

_____ X
Print Name

_____ X
Date (YYYY/MM/DD)

_____ X
Date (YYYY,MM,DD)

Required Documents Checklist

Thank you for your interest in AMHC!

Please review the checklist below to ensure you have all necessary documents before you submit. We do require some additional supporting documentation along with the completed application form.

- Completed Section A – Section C of the application form
- Completed Section D: For **ALL** persons over the age of 18
- Applicant and Co-Applicant** Sign & Date along with a witness
- Complete Section E: **Applicant and Co-Applicant** Sign name, Print name and date
- Submit Copies of Current Income Information for the **Applicant and Co-Applicant**
 - Employment related Income – 8 weeks of current paystubs
 - Employment Insurance/Ontario Works/Ontario Disability Support Program – Current Statement
 - Canada Pension Plan/Old Age Security – Current Statement
- Submit Current Copy (Back & Front) of Valid government issued photo-ID for **Applicant and Co-Applicant**

Please Note

- The application and supporting documents can be dropped in the 24hr drop-box located beside the front door of our Head Office at 1 Richards Lane, Ajax, Ontario, L1T 3M3.
- Tenants will be chosen based on credit score, income information and landlord references.
- Only successful applicant(s) will be contacted for an in-person unit viewing.
 - Successful candidates are required to provide a certified cheque and/or money order for first and last rent to eligible to sign the lease.
- We do not return any paperwork provided. Please ensure you submit copies and not original documents.