

# **Application for Public Housing**

### **Eligibility Requirements**

To be placed on a waitlist for public housing, you (and your household) must meet the eligibility criteria below:

- The total gross household income (income before deductions) of all household members must be below the Household Income Limits (HILs) for your selected areas.
  - o For current Household Income Limits, contact your local office.
- You and every member of your household must be either a Canadian Citizen or have Permanent Resident status.
- You must be a resident of Nova Scotia and currently living in the province.
  - Exemption: If you are not a resident of or living in Nova Scotia but are applying for Priority Access under the Family Violence Stream, NSPHA will waive the residency requirement if you are eligible. You must submit the Priority Access Family Violence Referral Form at the same time as your application.
- You must be at least 19 years old, unless you have dependents (children), in which case eligibility begins at 18.
- If you were previously a public housing tenant and have outstanding arrears, you must commit to a repayment plan.
- If you are currently living in public housing, you must be listed as a household member for that unit.
- You must not own any residential property that could reasonably serve as suitable, safe, or accessible year-round housing. For more information on property ownership and eligibility, see our <u>Property Ownership Policy</u> or Tenant Handbook.

## **How To Fill Out This Application**

- Complete each section of the form and ensure that the information provided is accurate.
- Read Section 6: Declaration and Consent carefully. This is your legal promise that the information you provided is truthful. You and your co-applicant (if you have one) must sign this declaration on behalf of your household.
- Prepare copies of supporting documentation as they are required to verify the information in your application.
- If you cannot answer one or more questions, make note of all the questions you have and contact NSPHA by email or phone. Contact information for each district is provided on the last pages of this form or online at <a href="nspha.ca">nspha.ca</a>.

Social



## **Section 1: Household Information**

Please provide the following information for you and all members of your household who will be living with you. This information will be used to assess your eligibility for public housing.

#### Applicant(s)

Household members who will sign the lease agreement.

		Full Name (First, Middle, L		Date of I	_	Gender	Number (SIN)
1. A	pplicant						
	o-applicant applicable)						
		nold Members ho are a part of the hou	ısehold but w	vill not sig	n the	lease.	
		Full Name t, Middle, Last)	Date of Birth	Gender	Ins	Social surance sher (SIN)	Relationship to Applicant(s)
3.	(1 110	t, Middio, Edoty	(dd//////yyyy)	Condo			/ (ppilouni(o)
4.							
5.							
6.							
7.							
8.							
Statu	s in Canada						
	Every member	er of my household is a	Canadian cit	izen.			
	Every member	er of my household is a	Permanent F	Resident.			
<u>Nova</u>	Scotia Resid	<u>ency</u>					
(Selec		nt below that applies to	•	,			
	All members	of my household are re-	sidents of an	d living in	Nova	a Scotia.	
	<b>Exemption F</b>	Request to Nova Scotia	a Residency	requirer	nent:	Members	of my

household are not residents of or living in Nova Scotia, but my household will be applying for priority access to public housing under the Family Violence stream.



## **Contact Information**

Your contact information is the primary way that NSPHA will let you know of any status changes to your application for public housing. It is your responsibility to inform NSPHA of any changes to your contact information. You can use the online Applicant Portal at NSPHA.ca or call your district office to make changes at any time.

If you do not have a fixed address, we recommend that you provide an email address and opt-in to email communication under **Communication Preferences** or provide an alternate address where we can reach you by mail under **Mailing Address**.

Please only pr	ovide contact info	ormation where it is	safe to contact you	J.				
Applicant(s) C	Contact Informat	<u>ion</u>						
	Cell Phone	Home Phone	Work Phone	Other				
Applicant								
Co-applicant (if applicable)								
Email:								
Mailing Addre	<u>ess</u>							
Unit # Street # Street Name								
City/Town	F	rovince	Postal Code	•				
Providing an al friend. We will you would like	Alternate Contact(s) – OPTIONAL  Providing an alternate contact is optional. An alternate contact can be a family member or friend. We will use this contact if we are unable to get a hold of you. Provide only information you would like us to use.							
Name		Phone Number	Email					
1.								
2.								
Communication Preferences								
(Select all that ap	ply)							
☐ Email	Phone	☐ Mail						



## **Section 2: Income Information**

## **Household Income**

To assess whether your household meets the income eligibility requirement, NSPHA requires the total gross monthly income of all household members (this is any income **before taxes or deductions**).

deductions).				
	Household Member Name	Household Member Name	Household Member Name	Household Member Name
Income Type	Amount	Amount	Amount	Amount
Gross Employment Income (before deductions)				
Canada Pension Plan (CPP)				
Canada Pension Plan – Disability (CPP-D)				
Capital Gains				
Dividends				
Employment Insurance				
Gratuities				
Immigrant Sponsorship				
Income Assistance				
Interest				
Investment Income				
Long-term Disability Income				
Old Age Security (OAS) / Guaranteed Income Support (GIS) / Spousal Allowance				
Other Country Social Security				
Other Pension				
Rental Income				
RRSP/RIF				
Spousal Support (Alimony)				

# **NSPHA**

# **Section 2: Income Information**

Student Loan					
Veteran Pensions & A	Allowance				
Workers' Compensati	ion				
Total Monthly Incom	ie				
Students in Your Ho	ousehold				
Is this household men student? (Yes or No)	nber a				
If your household has complete the Income	Information	pages (4 &			ceiving income,
Current Address	asing mis	tory			
Current Address:	Unit #	Street #	Street Name		
	City/Town		Province		Postal Code
Move-in date: (mm/dd/yyyy)					
Current Living Arrangement:			family/friends ry/Transitional	Housing/H	lomeless
If you are renting at the	nis address, p	lease provi	de your landlo	rd contact i	information below.
Name:			Phone Nu	mber:	
Email:			<u> </u>		
Property Managemer					



# **Section 3: Housing History**

# Participation in Housing Programs

		Yes	No			
Are you receiving a rer Scotia?						
, , , , , , , , , , , , , , , , , , , ,	pplied for public housing with the Nova ing Agency (formerly Housing Authority)?					
	een a tenant with the Nova Scotia ency (formerly Housing Authority)?					
Property Ownership						
☐ I do not own	residential property					
☐ I own resider	ntial property					
Important to know: Applicants who own residential property suitable for year-round housing must divest (sell, transfer or permanently dispose of the property) within one year of signing a lease with NSPHA.  Exceptions may apply for <i>Non-Disqualifying Property Ownership</i> , which includes situations where the property cannot reasonably be used as safe, suitable or accessible year-round housing.  All residential property must be disclosed, even if believed to be non-disqualifying. For more information, see the Tenant Handbook or visit the NSPHA website (nspha.ca).  Previous Addresses If you have lived at any other address then your current address within the past five years, please provide the details below.						
Address:						
Move in date: (dd/mm/yyyy)	Move out date (dd/mm/yyyy)	ə: 				
Previous Living Arrangement:						
If you were renting at this address, please provide your landlord contact information below.						
Name:	Phone Number	er:				
Email:						
Property Management	Company if applicable:					



# **Section 3: Housing History**

Address:	
Move in date: (dd/mm/yyyy)	Move out date:(dd/mm/yyyy)
Previous Living Arrangement:	<ul><li>☐ Owned</li><li>☐ Lived with family/friends</li><li>☐ Rented</li><li>☐ Temporary/Transitional Housing/Homeless</li></ul>
If you were renting at t	his address, please provide your landlord contact information below.
Name:	Phone Number:
Email:	
Property Management	Company, if applicable:
Address:	
Move in date: (dd/mm/yyyy)	Move out date: (dd/mm/yyyy)
Previous Living Arrangement:	<ul><li>☐ Owned ☐ Lived with family/friends</li><li>☐ Rented ☐ Temporary/Transitional Housing/Homeless</li></ul>
If you were renting at t	his address, please provide your landlord contact information below.
Name:	Phone Number:
Email:	
Property Management	Company, if applicable:
Evictions	
	ction notice while living in any of the properties listed above.
☐ Yes ☐ No	
If yes: What was your date? (dd/mm/y	
What was the eviction?	reason for



## **Section 4: Housing Needs**

U	nit	Si	ze
---	-----	----	----

Select the unit size you would like	Bachelor	1	2	3	4	5	6
your household to be considered for:							

**Important to know:** While you may select multiple unit size, NSPHA will consider the criteria below to determine a maximum unit size for your household.

- Couples share a bedroom
- No more than two people should share a bedroom
- Parents and children should have separate bedrooms
- Gender and age of household members

Your household will only be added to waitlists for eligible unit sizes from your selections.

### **Accessibility Needs**

NSPHA has properties that can meet a range of physical mobility requirements.

Please ensure you answer the following questions carefully as answering 'yes' to any of these questions will limit the type of unit you are offered.

	Yes	No
Do you or a member of your household require a unit without stairs?		
Do you or a member of your household have a disability that requires you to have a unit with street level access?		
Do you have limited physical mobility that requires the use of a wheel-chair full time? (Unit includes amenities such as lowered counters with roll under access, counter-mounted cooktop with wall oven, wheel-in shower, and grab bars)		
Do you have a limited physical mobility but do not require the use of a wheelchair full-time? (Unit includes amenities such as a walk-in shower and grab bars)		



## **Section 4: Housing Needs**

Do you own a vehicle and need parking?

Do you require a unit that allows pets?

If yes, please specify what kind of pet(s) you have and how many:

### **Priority Access**

About Priority Access:		
NSPHA provides priority access to public housing for individuals and situations. There are four Priority Access categories:  1. Homelessness	families in cer	tain urgent
2. Family Violence		
3. Inadequate Housing		
4. Life Sustaining Health Services		
To be eligible for Priority Access, your household must meet the crite Priority Access Referral Form and have a designated professional comore information or to download a Priority Access form, visit <a href="mailto:nspha.c.access">nspha.c.access</a> .	mplete the refe	erral. For
Are you submitting a Priority Access Referral form with this applicatio	n? 🗌 Yes	□ No
<b>Important to know:</b> If your circumstances change while on the waitlican apply for Priority Access by submitting a Priority Access Referral		ousing, you
Additional Preferences		
	Yes	No
Do you require a unit that allows smoking?		

9



## **Section 5: Building Selection**

NSPHA cannot process your application without your building selections. You will only be placed on the waitlist for buildings that you select and are eligible to live in.

Building lists for each district can be found on the Nova Scotia Provincial Housing Agency's website (<a href="mailto:nspha.ca/applicants/apply-housing">nspha.ca/applicants/apply-housing</a>).

If you received this application by mail, use the building list that is included. Be sure to select buildings from the list that match your household type:

- Individuals and Couples Applicants younger than 58 without dependents
- Families Household with at least one adult and one or more dependants
- Seniors Household where either the applicant or co-applicant is 58 years or older

#### Important to know: NSPHA Housing Offer Policies

- Offer Policy: If you've qualified for public housing, you will be offered a maximum of two units that fit your needs. If you refuse two units, your application will be cancelled.
- Rejoining the waitlist after cancellation: If your application is canceled and you wish
  to be readded to the waitlist, you must wait a minimum of 90 days (about three
  months) after cancellation before your application can be reactivated. You will need to
  contact NSPHA to request reactivation of your application either online using the
  applicant portal or by phone. NSPHA may request updated information from you to
  reactive your application.

Pleas	se check the boxes below to confirm:
	I/We understand and agree to the housing offer policies.
	I/We have included my/our Nova Scotia Provincial Housing Agency building selections with this application.



## **Section 6: Declaration and Consent**

By signing this declaration and consent, you confirm that the information provided is accurate and truthful to the best of your knowledge. Please note that withholding or falsifying any information may result in the cancellation of your application.

For NSPHA to process your application:

- 1. All lines need an initial by each applicant to show that they have read and understand each statement.
- 2. All applicants must sign and date this form.

### I (we), the person(s) who signed below, solemnly declare that:

1.	All statements made in this application are true and all documents provided to support this application are unaltered.	
2.	I (we) understand this application is meant to assess my (our) eligibility for the public housing program.	
3.	I (we) will advise NSPHA if any information (e.g., address, household composition, income) in this application changes as it may affect my (our) eligibility for the public housing program.	
4.	I (we) understand that the time it takes to be housed depends on the availability of units in my area that meet my (our) housing needs.	
5.	I (we) give permission to NSPHA to investigate any or all statements I (we) made on this application. This includes contacting me or any other person and collecting additional information with or without notice to me. If NSPHA finds any false or misleading statements, my (our) application will be cancelled. I (we) cannot hold NSPHA liable for damages.	
6.	<ul> <li>I (we) authorize NSPHA to collect, use, keep, disclose and dispose of personal information about me (us), in order to:</li> <li>a. Assess my (our) application and determine if I (we) am eligible for public housing</li> <li>b. Research, monitor, evaluate and promote programs</li> <li>c. Detect, investigate and respond to fraud and illegal activity</li> <li>d. Otherwise as allowed under the Nova Scotia Freedom of Information and Protection of Privacy Act.</li> </ul>	
7.	I (we) authorize NSPHA to reveal personal information about me (us) to third parties, for any of the above reasons.	



## **Section 6: Declaration and Consent**

	who signed below, solemnly declare the	who	person(s	(we), the	1
--	--	-----	----------	-----------	---

8.	I (we) give permission to any person or entity to reveal personal information about me (us) to NSPHA for any of the above reasons.	
9.	I (we) understand all these statements and have asked for and received an explanation on every point that was not clear to me (us).	

**Important to know:** To be eligible for public housing, applicants must meet the eligibility criteria, update the information provided in this form annually, and ensure your contact information is up to date. **If we cannot reach you, we will cancel your application** (you may re-apply at any time).

Applicant Co-applicant (if applicable)		
Co-applicant		
(if applicable)		
Date		

Personal information is collected, used and may be disclosed by NSPHA in accordance with the *Freedom of Information and Protection of Privacy Act:*<u>Freedom of Information and Protection of Privacy Act (nslegislature.ca)</u>

## Register for the online portal!

We encourage all applicants, no matter how they apply, to register for the online applicant portal at NSPHA.ca and opt-in to email communication.

Once NSPHA reviews your application, we will contact you and provide you with an application number. You can use that code and your email address to register for the online portal.

The online portal gives you real time access to your application so you can make changes to ensure we can match you with suitable housing options.



## How to submit your application:

The following pages include a list of NSPHA District Offices, addresses and contact information. You may use this information to submit your application to the appropriate district.

## **Metropolitan District**

Serving Halifax Regional Municipality

#### Email:

ApplicationsNSPHA.MD@novascotia.ca

#### Office Address (Mailing or In Person):

3770 Kempt Road, Suite #3 Halifax, NS **B3K 4X8** 

#### Questions? Call:

1-800-565-8859 or 902-420-6017

## Cape Breton Island District

Serving Cape Breton Island

#### Fmail:

ApplicationsNSPHA.CBID@novascotia.ca

#### By Mail:

18 Dolbin Street Sydney, NS B1P 1S5

#### In Person:

15999 Central 218 MacSween 18 Dolbin

Street St St

Sydney Inverness Port Hawkesbury

### Questions? Call: 1-800-565-3135

#### **Northern District**

Serving the communities of Guysborough County. Antigonish County, Pictou County, Cumberland County, Colchester County and Hants County (East)

#### Fmail:

ApplicationsNSPHA.Northern@novascotia.ca

#### By Mail:

144 Victoria St. 9 Church 7 Campbell's Lane

East St.

Amherst, NS Truro, NS New Glasgow. B4H 1Y1 B2N 3Z5 NS B2H 2H9

PO Box 1373 PO Box 249

Antigonish, NS Guysborough, NS

B2G 2L7 **B0H 1N0** 

In Person:

Terrace

144 Victoria St 9 Church 7 Campbell's Lane

St. East

20 Orchard Chedabucto Centre, H-9996 Hwy 16

Questions? Call: 1-800-565-3135

**Western District** 

Serving the communities of Kings County, Annapolis County, Digby County, Yarmouth County, Shelburne County, Queens County Lunenburg County and Hants County (West)

#### Email:

ApplicationsNSPHA.WD@novascotia.ca

### By Mail:

25 Kentucky Court PO Box 1000 New Minas, NS Middleton, NS **B4N 4N1** B0S 1P0

99 High Street 10 Starrs Road Bridgewater, NS Yarmouth, NS **B4V 1V8** B5A 2T1

#### In Person:

25 Kentucky 101 Magee 99 High Street Court Drive Bridgewater

New Minas Middleton

10 Starrs Road (Floor 2)

Yarmouth

## Questions? Call:

1-800-306-3331