

When a person who qualifies for public housing is experiencing family violence, they may be eligible for priority access to public housing and be placed on the Priority Access waitlist in chronological order.

Family violence occurs when someone uses abusive behaviour to control or harm a member of their family, or someone they are in an intimate relationship with. Examples of family violence include child abuse, elder abuse, parental abuse or intimate partner abuse.

Family violence includes many different forms of physical and emotional abuse, as well as neglect. It may include a single act of violence, or several acts that form a pattern of abuse. Examples of family violence include, but are not limited to:

- ✓ Physical Abuse
- √ Sexual Abuse
- ✓ Harassment and stalking
- ✓ Psychological Abuse
- √ Financial Abuse
- ✓ Failure to provide the necessities of life

To be granted approval for priority access to public housing due to family violence, applicants must provide the following documents to their Nova Scotia Provincial Housing Agency district office:

- 1. Public Housing Application Form ———— Completed by the applicant
- 2. Priority Access Referral Form Family Violence

Completed, dated and signed by qualified professional

The Priority Access Referral Form for Family Violence must be completed, dated, and signed by a qualified professional, as listed below.

Applicants may be eligible for priority access to public housing due to family violence if one of the following professionals provides a referral.

- ✓ Medical Professional
- ✓ Psychologist
- ✓ Counsellor
- ✓ Elder/Community Leader
- ✓ Support Worker through Victim Services
- ✓ Police Officer/Law Enforcement
- ✓ Transition House Worker

Professional referral cannot be by an applicant's friend, neighbour or relative.

If you or your referring professional have any questions or concerns about qualifying for priority access to public housing due to homelessness, please contact your district office by email at applicationsnspha.md@novascotia.ca or by telephone at 1-800-565-8859 or 902-420-6017.

A good thing to know... If there are any changes to your housing needs after you apply to Public Housing, you should contact your District Office, or use the online portal to ensure NSPHA always has the most current information.



Section A: To be completed by the applicant		
1. Applicant Information		
Last Name:	If you have an existing Public	
First Name:	Housing application, provide your Client P code below:	
Date of Birth:		
Contact Information		
We recognize that persons experiencing family violence want to ensure that we do not compromise your safety. Very select the most appropriate option for you.	Nork with your referring professional	
Complete below ONLY if you need to update your contact information or provide an alternate contact not currently listed in your Public Housing Application.		
Please only provide contact information where it is safe to contact you.		
	Whose information is provided?	
Phone:	☐ Applicant ☐ Alternate	
Email:	☐ Applicant ☐ Alternate	
Street Address:	☐ Applicant ☐ Alternate	
City/Town:		
Province: Postal Code:		
Name of alternate contact: Relationship to applicant:		
2. Applicant Acknowledgement		
I acknowledge that if I am eligible for priority access, I will be placed on all building waitlists that meet my required household size and will accept the first unit offered to me. Should I decline an offered unit, I will lose my priority status and be returned to the general chronological waitlist.		
Signature:	Date:	



Section B: To be completed by a qualified professional.	
1. Eligibility Criteria Checklist	
☐ The applicant is experiencing family violence.	
2. Special Housing Needs	
Some priority access applicants may need special housing needs due to their circumstances; examples can include:	
 ✓ The requirement for multiple exits within the unit ✓ The inability to live in a certain community or neighborhood 	
Please list below any housing needs required:	
Placing restrictions on the accommodation offered to by the NSPHA may increase the time in which you wait for public housing.	
$\hfill \square$ I understand that placing restrictions on the accommodation offered may increase the wait time for public housing.	
3. Professional Declaration	
Name (print):	
Position/Title:	
Organization:	
Phone: Email:	
I declare that, to the best of my knowledge, the information I have provided on this form is accurate.	
Signature: Date:	



FOR OFFICE USE ONLY	
Date:	day/month/year
Received by:	
Applicant #:	