



**Property Services
Notification of Changes Form**

Name

Address

Phone

Email

What has changed? Please check all that apply:

- | | |
|---|--|
| <input type="checkbox"/> Amount or Source of Household Income | <input type="checkbox"/> Employment Insurance (EI) |
| <input type="checkbox"/> Place of Employment | <input type="checkbox"/> Pension Income (OAS/GIC/ CPP) |
| <input type="checkbox"/> Attendance at School | <input type="checkbox"/> Household member has left the household |
| <input type="checkbox"/> Amount of Ontario Disability Support Programme (ODSP)/Ontario Works (OW) | <input type="checkbox"/> Child has joined the household |
| <input type="checkbox"/> Amount of Child Support you receive | <input type="checkbox"/> Custody changes of children |
| <input type="checkbox"/> Amount of Child Support you pay | <input type="checkbox"/> Immigration Status |
| <input type="checkbox"/> WSIB Income | |

When did this change occur?

Please provide information about the change, give as much detail as possible.

Please attach confirmation of this change:

For Income Changes:

- Paystubs and/or Employment Letter and/or Proof of Employment Form
- ODSP/OW statement, including the name of your worker
- Court order for child support; FRO statement; private agreement
- Bank statements clearly showing pension/WSIB deposit amount
- Letter from official agency confirming pension or WSIB amount
- Record of employment from previous employer (if you left your job)
- EI confirmation statement you are receiving

For School and Education Changes:

- OSAP document; confirmation of enrollment and full/part time status

For Household Member Changes:

- Birth certificate of new child
- Letter or court order detailing custody changes; permanent or temporary status
- Address of the household member who has left the household and/or letter asking they be removed from lease
- Immigration and Refugee Board of Canada documents

Consent and Declaration

All tenants and household members aged 16 and over must read and sign the following:

- I promise that all the information given by me in this form and attached documents is true and complete.
- I understand that if I give false or incomplete information to County of Wellington - Housing Services and/or Guelph Non-Profit Housing Corporation, my household could lose its rental subsidy.
- I allow County of Wellington - Housing Services and/or Guelph Non-Profit Housing Corporation to check the information I have given in this Notification of Changes Form.
- I allow any person, corporation or social agency that knows about my information to share that information with County of Wellington - Housing Services and/or Guelph Non-Profit Housing Corporation.
- I understand I must report any changes in the income, assets, immigration status, or the number and names of individuals residing in my household. I must do this in writing no later than 30 days after the change.
- I understand the rules regarding over-housed tenants.
- I understand that personal information is collected about me under the Housing Services Act (HSA) and that this information will be used by County of Wellington - Housing Services and/or Guelph Non-Profit Housing Corporation to determine:
 - If my household still qualifies for the housing we live in
 - If my household is still eligible for rent-geared-to-income assistance
 - How much rent-geared-to-income subsidy my household can receive
- I allow County of Wellington - Housing Services and/or Guelph Non-Profit Housing Corporation to give the information on this form and any other documents provided with this form to Social & Children’s Early Years Division and other Service Managers. This information may be used to verify my eligibility or make decisions about me for Social Housing, Ontario Works, Ontario Disability Support Program or programmes under the Day Nurseries Act.
- I understand that all household members over the age of 16 who are not in school full-time must also sign this consent and declaration to ensure they understand that their income information and status in Canada may be used to determine our household’s eligibility for geared-to-income subsidies and total monthly rent.

Tenant 1 (Please print name) **Signature:** **Date:**

Tenant 2 (Please print name) **Signature:** **Date:**

Other (16 years and older) (Please print name) **Signature:** **Date:**

Other (16 years and older) (Please print name) **Signature:** **Date:**

Other (16 years and older) (Please print name) **Signature:** **Date:**

Please return completed documents to:

County of Wellington - Housing Services Or **Guelph Non-Profit Housing Corporation**
 T: 519.824.7822 F: 519.837.6349 T: 519.766.1022 F: 519.837.6349

Office: 138 Wyndham Street North – Guelph, Ontario – N1H 4E8