

**Applicant**

First Name:	Last Name:	<input type="checkbox"/> Canadian Citizen	
Date of Birth (mm/dd/yyyy):	Social Insurance Number:	<input type="checkbox"/> Permanent Resident	
Street Address	Unit No.	City	Postal Code
Home Phone:	Cell Phone:	E-mail:	
Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Common Law <input type="checkbox"/> Single <input type="checkbox"/> Separated <input type="checkbox"/> Divorced			

**Co-Applicant**

First Name:	Last Name:	<input type="checkbox"/> Canadian Citizen	
Date of Birth (mm/dd/yyyy):	Social Insurance Number:	<input type="checkbox"/> Permanent Resident	

What is the total number of people living in your home? \_\_\_\_\_

What are the ages of any dependents living in your home? \_\_\_\_\_

**Employment History (provide 3 years history)**
**Applicant**

Start Date	End Date	Name of Employer	Job Title

**Co-Applicant**

Start Date	End Date	Name of Employer	Job Title

**Attach the following information to this application:**

- Child Care Benefits      A copy of your most recent Child Care Benefit Statement or a copy of your bank statement showing the direct deposits
- Other Income                A copy of your most recent pay stub or income statement

**Cities you are interested in (circle all that apply):**

St. Catharines    Niagara Falls    Welland    Port Colborne    Fort Erie    Lincoln  
 Grimsby    West Lincoln    Niagara-on-the-Lake    Pelham    Wainfleet    Thorold

## Income Information

*List all income for members of the household 18 years of age and older who are not full-time students*

Sources of Income	Type of Income	Please list the Gross monthly amount (Gross is the amount before deductions)		
		Applicant	Co-Applicant	Other Household Members
<b>Employment</b>	Employment			
	Employment Insurance (EI)			
	WSIB			
<b>Social Assistance</b>	Social Assistance (OW)			
	Ontario Disability (ODSP) (Shelter & Basic Benefit only)			
<b>Pension and Allowances</b>	Canada Pension Plan (CPP)			
	Old Age Security (OAS)			
<b>Other</b>	Child Tax Benefit (CTB)			
	Spousal Support			
	Child Support			
	Other income (specify)			
<b>Totals</b>				

Habitat for Humanity Niagara ("Habitat") is committed to protecting the security and confidentiality of the personal information that has been provided to us in this Application for a Habitat Home. Habitat collects, uses and discloses such personal information for the purposes of processing this Application, and for such other purposes where you consent or where such collection or use is required or permitted by law. The personal information Habitat collects and uses in relation to this application is kept in a secure and confidential file. Access to this file will be restricted to individuals at Habitat who require access in order to fulfil the purposes described above. The personal information contained in this Application will be kept by Habitat only as long as it is required in order to fulfil the purposes described above or as required by law.

**By completing and signing this Application, the Applicant(s) are consenting to Habitat's use and disclosure of the personal information contained in the Application for the purpose of making any inquiries Habitat deems necessary in order to make a decision regarding this Application, including contacting any references, obtaining credit history information from a credit reporting agency and/or financial institution.**

\_\_\_\_\_  
Dated

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of Co-Applicant

**Please return application to:** Habitat for Humanity Niagara  
150 Bunting Rd, St Catharines, ON L2P 3G5  
Fax: 905-685-7396

**Questions? Contact:** Family Services at 905-685-7395 Ext 406 or [familyservices@habitatniagara.ca](mailto:familyservices@habitatniagara.ca)