



## "Seniors Complex 1 bedroom Rental Unit"

Applications are now available and will be accepted from:  
July 4<sup>th</sup>,2023 until July 25<sup>th</sup>,2023 by 4:00pm

\* Need help filling out applications  
Contact the Housing office  
\* Remember to hand in supporting  
documents (Inspection reports,  
Doctor, Social worker support  
letters



\* Monthly Rent geared to income  
\* Seniors will have priority over ODSP  
\* No Pets Allowed (Approval needed)

### Eligibility Criteria

- Applicant(s) must either be Sixty (60) years of age or older OR be in receipt of ODSP benefits,
- Applicant(s) are NOT required to be Oneida Members (however, priority will be given to Oneida Members)
- Applicant(s) must be willing to provide at least (1) personal references and (1) previous landlord reference, if you do not have landlord you can submitted 2 personal references
- Applicant must be willing to complete financial assessment form;
- You no not need deposit with application, First month's Rent AND \$500 Security Deposit is required (Upon signing lease agreement)

#### APPLICATIONS ARE AVAILABLE:

- Administration office  
(2212 Elm Ave)
- BY MAIL, EMAIL OR FAX:
  - 519-652-3244 ext. 815, or 821 – email: [Valerie.Doxtater@oneida.on.ca](mailto:Valerie.Doxtater@oneida.on.ca) or Julie Atchison [housing.support@oneida.on.ca](mailto:housing.support@oneida.on.ca) fax: 519-652-9287

#### COMPLETED APPLICATIONS CAN BE DROP OFF AT:

- Administration Office Front Desk (2212 Elm ave)
- Email: [Valerie.doxtater@oneida.on.ca](mailto:Valerie.doxtater@oneida.on.ca)
- OR MAILED TO:  
Oneida Administration Office  
2212 Elm Ave, Southwold ON N0L 2G0

1. **Applicant Information: Senior's complex 1 bedroom unit**

**NOTE: YOUR APPLICATION WILL NOT BE CONSIDERED IF YOU HAVE OUTSTANDING DEBTS (ARREARS) WITH ANY DEPARTMENT OF THE ONEIDA NATION OF THE THAMES COUNCIL.**

**Instructions: 1. Complete all sections 2. Please print clearly**  
**(All Sections Must Be Completed in Order to Consider Your Application Complete)**

**HOUSING RENTAL APPLICATION**

Date of Application	
Name of Applicant	
Number of bedrooms needed	

Please list the names of all of the individuals who will be living in the home. The first name on the list should be the primary occupant (head of the household). Under 'Relationship to Primary Occupant' this could be spouse/partner, children/dependents (son, daughter), and other family member such as aunt, grandparent or someone not related to the primary occupant.

Name (First and Last Name)	Date of Birth	Male or Female	Relationship to Primary Occupant	Oneida membership #
1. Primary Occupant:				
2. Secondary Occupant: (co-occupant/spouse)				
3.				
4.				
5.				
6.				

2. **Current residential and postal address?**

Street No. & Name/Box Number/R.R. #:		
First Nation/City/Municipality:	Province:	Postal Code:

**Rental Application -Oneida Rental Unit What is your mailing address (if different from #2):**

Street No. & Name/Box Number/R.R. #:		
First Nation/City/Municipality:	Province:	Postal Code:

**3. Contact information:**

Primary Occupant	Home phone #	Work phone #	Cell phone #	Email:
Secondary Occupant				

**4. Alternate Contact in Your Absence for messages:**

Name: _____	Home phone #	Work phone #	Cell phone #
Relationship: _____ (i.e. friend, relative)			

**5. Employment History/Social Assistance Verification:**

The following salary or wage information will be verified by Oneida Nation of the Thames Housing Department. Verification is provided in strict confidence, as requested by the recipient to support his/her application for a RENTAL UNIT under the Oneida Nation of the Thames First Nation Housing Department.

Name of Employer		Employer's Address		Telephone No.
No. of years employed	Hours per week	Full time	Part time	Seasonal weeks per year
Present position or job classification		Gross income from previous two years (income before deductions)		
		20__ \$	20__ \$	
Present regular gross salary or wage rate (indicate one)				
\$ _____ per hour   \$ _____ per week   \$ _____ per year				
Does employee receive earnings from overtime work, bonuses, commissions, etc.? __ No __ Yes (explain)				
Prospects of continued employment and/or other comment				

**I certify the above information is true and correct**

Name (print clearly)	Title	Signature

Posted: July 4<sup>th</sup>,2023

The following Social Assistance information will be verified by Oneida Nation of the Thames Housing Department. Verification is provided in strict confidence, as requested by the recipient to support his/her application for a RENTAL UNIT under the Oneida Nation of the Thames First Nation Housing Department. **(Please inform your Case Worker that the Oneida Housing Department Staff will be contacting them to verify your social assistance information)**

Type of Benefit/Assistance Provided	
Financial Assistance Breakdown	
A. Basic Needs Allowance	\$ _____
B. Shelter Component Allowance	\$ _____
C. Heating Allowance (Including Hot Water)	\$ _____
D. Electrical Allowance (Excluding Heat and Hot Water)	\$ _____
E. Other Allowances (Medical, Telephone, etc.)	\$ _____
Total Monthly Benefits Available	\$ _____
Number of Months on Assistance	

Case Worker's Name	Office Address	Telephone

**6. FINANCIAL ANALYSIS: All steps 1,2 and 3 to complete**

**Step 1. Monthly Income:**

Monthly Income	Average Monthly Income Amount
Employment Income	\$
Social Assistance Benefits	\$
Pension Benefits	\$
Employment Insurance Benefits	\$
Alimony, Child Support	\$
Other Income	\$
<b>Total Monthly Income:</b>	<b>\$</b>

**Step 2. Monthly Expenses:**

Monthly Expenses	Average Monthly Amount
Rent/Mortgage	\$
Utilities	\$
Insurance (House, car, medical)	\$
Phone, Cable, Internet	\$
Car/Truck loan Payment	\$
Gas, and Other Transportation Costs	\$
Personal Loan Payments	\$
Credit Card Payments	\$
Groceries	\$
Clothing	\$
Entertainment	\$
Other	\$
<b>Total Monthly Expenses:</b>	<b>\$</b>

**Step 3. Amount Available For Other-Related Expenses:**

Total Monthly Income (Step 1)		\$
Total Monthly Expenses (Step 2)	<b>Minus</b>	\$
<b>Amount Available For Other Expenses:</b>	<b>Equals</b>	\$

**7. Information on your current and previous accommodation:**

Do you rent or own your current home (please check one)?				Rent <input type="checkbox"/>
				Own <input type="checkbox"/>
What is the monthly rent that you pay at your current address?				\$
<i>Please provide information on your current and last residence</i>				
	From Date	To Date	Name of Landlord (if applicable)	Phone number for landlord
Current address				
Previous address				

**8. Current Living Conditions: All Filed are points from the point system attached.**

- a. The current dwelling poses a health and/ or safety risk to the occupants (must be supported by documentation such as inspection report or someone with authority)  
Example: Doctor/social worker Etc.

Provided detail:


- b. What is considered an overcrowded situation by the National Occupancy Standards (NOS): (NTD: item in this section can be moved to a note at the end of the document)

1. National Occupancy Standards' guidelines.

a. Suitable housing:

- i. Suitable housing has enough bedrooms for the size and make-up of resident households, according to National Occupancy Standard (NOS) requirements. Enough bedrooms based on NOS requirements means one bedroom for:
  - ii. each cohabiting adult couple.
  - iii. unattached household member 18 years of age and over.
  - iv. same-sex pair of children under age 18;
  - v. and additional boy or girl in the family, unless there are two opposite sex children under 5 years of age, in which case they are expected to share a bedroom.
  - vi. A household of one individual can occupy a bachelor unit (i.e., a unit with no bedroom).

- c. The current household is overcrowded; please provide details with supporting documents by authoritative agent and using NOS's guidelines above.


- d. Presently are you residing in temporary type housing situation? If yes provide details and how long:

- e.  Yes       No


9. Number of household member(s) who require disabled access or special modifications, please elaborate and justify by proper documentation:


10. What type of Housing are you and your family requiring? The house must meet National Occupancy Standards.

- a.  1 bedroom     2 bedrooms       3 Bedrooms       4 Bedrooms

**11. Gross Monthly Income:**

Primary Applicant \$ \_\_\_\_\_/Month

Co-Applicant      \$ \_\_\_\_\_/Month

12. Two Reference Letters from either: **Must include to be consider complete application**

a. One landlord references are submitted (the references must be from the one most recent landlords).

i.  Yes  No  N/A

b. Have not rented before, One-character references letters are submitted (not immediate family).

i.  Yes  No  N/A

Primary occupant (please print)	
Signed	Date:

Secondary occupant (please print)	
Signed	Date:

*ALL INFORMATION PROVIDED WILL BE KEPT CONFIDENTIAL AND USED FOR THE PURPOSE DESCRIBED HEREIN*

For Housing Unit use only		
Check off appropriate box and print name where required		
1. Date Received: _____ Via: Person <input type="checkbox"/> mail <input type="checkbox"/> e-mail <input type="checkbox"/>	2. Acknowledge letter of receiving application and will be reviewed: Date: _____  by: _____	3. Review of application for completion? Date Reviewed: _____  Reviewer: _____  Complete: <input type="checkbox"/> Incomplete: <input type="checkbox"/>
For Housing Unit use only		
Check off appropriate box and print name where required		
7. Confirmation letter for eligibility or ineligibility sent  Date: _____  by: _____	8. Filed accordingly as eligible or Ineligible: Yes: <input type="checkbox"/> No: <input type="checkbox"/> Date: _____  Inputted into the Housing Waiting list: Yes: <input type="checkbox"/> No: <input type="checkbox"/> Date: _____	9. Date of Conditional Housing Offer : _____  by: _____  Accepted <input type="checkbox"/> Declined <input type="checkbox"/>
Authorized by Print:	Authorized by Signature:	Date:

**Oneida Nation of the Thames Housing Department**  
**Rental Program:**  
**Application Review and Point System**

Name of Applicant: \_\_\_\_\_

Date Application Received: \_\_\_\_\_

Reviewed by: \_\_\_\_\_

Review Date: \_\_\_\_\_

**Oneida Nation of the Thames Housing Department**  
**Rental Program:**  
**Application Review and Point System**

Name of Applicant: \_\_\_\_\_

Date Application Received: \_\_\_\_\_ Reviewed by: \_\_\_\_\_

Review Date: \_\_\_\_\_

**The purpose of Selection Criteria for Rental Units**

Applications that meet the eligibility requirements outlined below are assigned a score according to a selection criteria point-rating guide. The applications with the highest standing according to the list (below) shall be given priority.

The purpose of the selection criteria is to select applicants based on relative merit and in accordance with the community housing goals and this Policy. A completed Housing Application must include sufficient information to ensure that the Housing Department can apply the point-rating guide and assign an application a score. The point-rating guide assesses household size, present living conditions, references, and financial circumstances. To avoid any conflicts of interest and to keep the selection process fair, an anonymous scoring process will be used whereby the Housing Department will score the applicants. Only the scores and random identification number will be forwarded to the Housing Portfolio for acknowledgement of approval.

**\*\*NOTE: definitions for health and safety standards including overcrowding will be used and DOCUMENTED PROOF of living situations outlined below is required.**

	<b>Selection Criteria</b>	<b>Points</b>	<b>Total Points</b>
	<b>PLEASE NOTE SENIORS HAS PRIORITY OVER ODSP</b>		
1.	<b>Who is not eligible (An application will not be scored if this box has 1 or more check marks)</b> A) The applicant is over the age of 60 (Sixity); B) Does not have proof of income old age, OW or ODSP C) the applicant cannot afford the unit and all personal expenses (see: attached expense sheet) Monthly income is Less than 3 X monthly rent or S.A. not sufficient) D) The applicant owes money to Oneida; E) The applicant has a history of not complying with the "Rental Agreement"		
2.	<b>Family Structure</b>		
	a) For each applicant's on ODSP	1 point	
	b) Applicant this is over the age of 60	2 points	
	c) Applicants are members	1 point each	
3.	<b>Current Living Conditions:</b>		
	a) The current dwelling poses a health and/or safety risk to the occupants <b>(Must be supported by documentation such as inspection report).</b>	2 points	
	b) Applicant currently resides in a temporary housing situation <b>(This must be justified with documentation from an authority or acceptable agent).</b>	2 points	
	c) The household is considered overcrowded per the National Occupancy Standards <b>(Must be justified with documentation from an authority or acceptable agent).</b>	2 points	
	d) The current dwelling poses a health and/or safety risk to the occupants <b>(Without documentation from authority)</b>	1 point	
	e) Applicant currently resides in a temporary housing situation <b>(Without documentation from authority)</b>	1 point	
	f) The household is considered overcrowded per the National Occupancy Standards <b>(Without documentation from authority)</b>	1 point	



4	<b>Household Income: applies to the main applicant only.</b>	2 Points	
	a) Applicant's income affords all personal and housing related cost (monthly income is 3 X monthly rent) (Gross Monthly Income / Monthly Rent)		
	b) Applicant does not owe money to Oneida.	2 points	
	c) Applicant has confirmation from Ontario Works or ODSP for Shelter component (this section only applies if the monthly income is lower than 3.00%)	1 point	
<b>TOTAL Points:</b>			

**\*National Occupancy Standards** – enough bedrooms based on the following requirements means one bedroom for:

- Each cohabiting adult couple;
- Unattached household member 18 years of age and over;
- Same-sex pair of children under age of 18;
- And additional boy or girl in the family, unless there are two opposite sex children under 5 years of age, in which case they are expected to share a bedroom. A household of one individual can occupy a bachelor unit (i.e. a unit with no bedroom).
- A household of one individual can occupy a bachelor unit (i.e. a unit with no bedroom,

**First Tie Breaker income percentage (Gross monthly income/Monthly rent) :**

3.00 to 3.99	2 points	
4.00 to 4.99	3 points	
5.0+	4 points	

*Second Tie Breaker: The applicant who has applied for a Rental Unit the highest number of times shall be given priority.*