SCHEDULE H - APPLICATION FOR HOUSING BENEFIT



Canada - British Columbia Housing Benefit (CBCHB)

Application for Housing Benefit

READ AGREEMENT AND INSTRUCTIONS ON REVERSE

TREAD AGREEME	111 71110 1110				TIMEODI	A TION					
	PART I - APPLICANT INFORMATION										
Social Insurance Number	Name of	of applicant(s). Show SURNAME, GIVEN NAME and MIDDLE INITIAL CBCHB						CBCHB File #	le#		
Address of Rental Unit (Ho	me Address)		City				B.C.	Postal Code		Phone No.	
How much is your mor	Does your rent include heat? ☐ Yes ☐ No					Email.	Email.				
Mailing Address (if different from above)											
		Р	ART II - HOUS	SEHOL	D INFOR	RMATION					
PART II - HOUSEHOLD INFORMATION List below everyone in your household residing at the above rental unit. Proof of gross monthly income for each person with income must be attached. Do not											
include roommates.(if ac								•			
Full Name(s) (Last / First / Initial)		Birth Date Day / Month / Year	Relationship To Applicant	inco	oyment ome in ous vear	me in Source(s) of M		Current Gro Monthly Inco	oss (OVIDER/BCH USE ONLY. Comments/Calculation	
			Applicant	□ Ye	s 🗆 No						
				□ Ye	s 🗆 No						
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			16		s □ No						
				□ Ye	s □ No						
		PART III -	BENEFIT RE	CIPIE	NT AGRE	EMENT					
Housing Benefit By itself this App shall be used to have entered into The information penefits may be It is my/our responsive the number of This Application reported change of this Application return to BC House Signed	nd understand including the A under the Canalication for Houdetermine eligito an agreement provided in this adjusted or termine people sharing for Housing Bell, or the Housing the full rent am	ditional Terms on da-British Columbising Benefit does rollity and calculate at to occupy with the Application for Houninated if the audit dediately inform BC the rental Premise perit supersedes and Benefit has been	page two of the a Housing Bender Constitute as a Housing Benefit (a reveals errors Housing/Proves, so that my/my previous Apterminated as d. Provider/BC periods in which Signed	nis App nefit (C a Resid nefit un- and an or om ider of our Ho outline Housi ch the	elication, for BCHB) plential Teleder the Color of the Co	orms part rogram. nancy Agi BCHB pro s Applicat nges in my nefit can b ny, and is additional	of and reemen ogram fo tions) is y/our ad be adjus valid un Terms	is material to t or provide a or the rental to subject to ve dress, rent a sted according till the Expiry on page two payment of H paid. Date	right to o unit listed rification mount, mally Date in F	ace of this Application for ecupy the rental unit, but above for which I/we and audit, and Housing arital status, family size, Part IV, unless there is a enefits and I/we agree to	
Signed THI	S FORM MUST	Date BE SIGNED BY T	Signed THE APPLICA!		D ALL HO	OUSEHOL	_D MEN	Date MBERS AGE) 19 OR (OVER.	
	PART	IV - CALCULATIO	N OF CANAD	A - B	HOUSII	NG BENE	FIT (C	ВСНВ)			
BC Housing / Provide Does Not Form Part		IT(S) DECLARATION							CHECK ON		
PROVIDER NAME BC HOUSING								ERIOR-DH)	■ NEW BENEFIT ■ REAPPLICATION		
ELIGIBILITY ASSESSMEN						_					
UNDER THE CBCHB I							☐ ADDRESS CHANGE ☐ OTHER				
ELIGIBLE PREMISES (PRIVATE RENTAL, NOT SUBSIDIZED)? YES NO IF NO, WHY: DOES HOUSEHOLD APPEAR TO BE ELIGIBLE FOR RAP OR SAFERBENEFITS? YES NO							LI OTHE	к			
									Effective D	oto (Day / Month / Voor)	
ADJUSTED RENT CEILING (LESSER OF ACTUAL RENT OR CBCHB RENT CEILING)		Household Contribution		_	HOUSING BENEFIT (ENTER 0 IF NOT EI				Enecuve D	ate (Day / Month / Year)	
									Expiry Dat	e (Day / Month / Year)	
CALCULATED / ENTERED	DATE	,	REVISED) / ENTERED BY (IF APPLICABLE)		Date					

This form collects personal information for contact purposes and to determine eligibility for assistance through the Canada BC Housing Benefit program. The information is collected in accordance with Section 26(c) of the *Freedom of Information and Protection of Privacy Act.* If you have any questions about the collection and use of your information, please contact BC Housing's Chief Privacy Officer at (604) 433-1711 or 1-800-257-7756, or write to 1700-4555 Kingsway, Burnaby, BC, V5H 4V8.

ADDITIONAL TERMS:

- 1. "BC Housing" means the British Columbia Housing Management Commission.
- 2. "CMHC" means the Canada Mortgage and Housing Corporation
- 3. "Housing Benefit" means the funds received under the CBCHB program to offset a portion of the market rent paid for an eligible Premises.
- 4. "Landlord" means the person or agency with whom the Applicant has entered some form of agreement to occupy the Premises.
- 5. "Premises" means the residential rental unit, located in British Columbia, for which the Applicant has entered into an agreement to occupy.
- "Provider" means a non-profit provider or other third party that has entered into an agreement with BC Housing to administer CBCHB Housing Benefits.
- 7. The applicant understands that BC Housing will utilize anonymized baseline data to establish appropriate measures and effectively track the use of the benefits and report to CMHC.
- 8. The applicant understands that if benefits received from this program are more than \$500 in a tax year, a T5007 Statement of Benefits will be issued. For income tax purposes, payments received under this program must be included in either the applicant's income or the income of their spouse or partner (if applicable).
- 9. The applicant agrees:
 - a. to promptly provide or cause to be provided, all information and documentation that is reasonably requested by BC Housing or a Provider all information and documentation pertaining to his/her income and the income of all persons living with the Applicant in the Premises to determine eligibility for the Housing Benefit, or for audit purposes.
 - b. to provide a copy of their Tenancy Agreement or other agreement to occupy to BC Housing when initially applying for a Housing Benefit for a Premises, and to forward copy of all future rent increase notices for the same Premises.
 - c. That the Housing Benefit is not transferable to another person and they will not sub-let the Premises in whole or in part, or assign their Tenancy Agreement or any of their rights under it.
- 10. Acknowledges and agrees that the payment of money by BC Housing/Provider to the Applicant or landlord does not in any way alleviate the Applicant's liability, as a tenant, to the landlord for cost of repairs, excessive cleaning, or rent arrears.
- 11. Failure to disclose or misrepresent any information, in writing or by omission, may result in the termination or recovery of Housing Benefits in addition to any other remedies available in law or equity.
- 12. The Applicant acknowledges that the Housing Benefit is portable and if the Applicant relocates to an alternative eligible rental unit, the Housing Benefit may continue provided all other eligibility requirements are met. In the event the Housing Benefit is administered through a Provider, and the Provider is unable to continue providing the Housing Benefit due to geographic location, the Provider will advise BC Housing. BC Housing reserves the right to administer the Housing Benefit directly or reallocate the Housing Benefit funding to an alternative Provider
- 13. When an applicant wishes to move the Housing Benefit to another eligible Premises the following conditions apply:
 - a. The applicant must provide appropriate notice under the Residential Tenancy Act, or as outlined in their agreement to occupy, when they intend to vacate.
 - b. If the applicant fails to pay rent properly due arising from failure to give proper notice, there shall be no obligation for a Housing Benefit to be paid for the period and the full outstanding balance will be the responsibly of the Applicant.
 - c. The applicant must pay the landlord the cost of repairs or excessive cleaning for which they are legally liable. If they fail to do so, BC Housing/Provider shall not be obliged to pay such costs to a landlord.
 - d. When relocating to another premises, in order to continue to receive the Housing Benefit they must contact BC Housing or the Provider to complete an updated Application for Housing Benefit within 30 days following relocation.
 - e. In no case will more than one Housing Benefit be issued for any calendar month and the Applicant must return any Housing Benefits received for a month(s) where they were not paying rent for an eligible Premises.
- 14. The Housing Benefit shall be paid directly to the applicant by direct deposit or mail. The applicant agrees that BC Housing / Provider shall have no liability for any delay in the delivery of the Housing Benefit to the Applicant nor for the loss of the Premises by the Applicant for any reasons including non-payment of rent.
- 15. In addition to any other provision for termination of the Housing Benefit, this agreement may be terminated in the following events:
 - a. If the applicant has breached any term of this agreement.
 - b. If, in its discretion, Provider/BC Housing considers that the income of the applicant and/or those persons living with the applicant has increased to such an amount that a Housing Benefit is no longer required.
 - c. The Provider/BC Housing have determined that the Applicant is now eligible for assistance through either the Rental Assistance Program or Shelter Aid For Elderly Renters program.
 - d. At any time by Provider/BC Housing upon delivery of six (6) months' notice in writing to the applicant
 - e. If the applicant gives notice to Provider/BC Housing that they wish to terminate this agreement.

INSTRUCTIONS & NEXT STEPS:

- 1. Complete Application for Housing Benefits: Please verify that Parts I and Part II are completed in full.
- 2. **Sign & Date**: Read the Agreement in Part III on page 1. The Applicant(s) and anyone aged 19 years or over who is living at the rental unit must sign the Application for Housing Benefits.
- 3. Attach proof of income from all sources: (Do not send original documents)
 - Proof is required for all sources for the applicant and all household members age 19 or older
- 4. Attach proof of rent: (Do not send original documents)
 - Proof may include a copy of the Tenancy Agreement, a Notice of Rent Increase, etc.
 - 5. **Submit Application:** Return completed CBCHB Application for Housing Benefits with supporting documents to CLBC.

IMPORTANT INFORMATION Please have this translated 重要資料 請找人為你翻譯

RENSEIGNEMENTS IMPORTANTS Prière de les faire traduire これはたいせつなお知らせです。どなたかに日本語に訳してもらってください。

INFORMACIÓN IMPORTANTE Busque alguien que le traduzca 알려드립니다 이것을 번역해 주십시오

CHỈ ĐẮN QUAN TRỌNG Xin nhờ người dịch hộ ਜ਼ਰੂਰੀ ਜਾਣਕਾਰੀ ਕਿਰਪਾ ਕਰਕੇ ਕਿਸੇ ਕੋਲੋਂ ਇਸ ਦਾ ਉਲੱਥਾ ਕਰਵਾਉ

Canada-BC Housing BenefitApplication Package

Eligibility & Application Process

You are eligible if you:

- are eligible for CLBC services.
- live in market rental housing and pay rent. You could also be moving into living in a market rental.
- live independently or with some supports.
- spend more than 30% your gross monthly income on your rent.
- are up to date on filling your tax return. (i.e. 2024 tax return).
- live in BC and are a Canadian citizen or a permanent resident of Canada

You are not eligible if:

- you live in a rental that is paid for or subsidized by government at any level. This includes home sharing but does not include PWD.
- you own your home. This does not include a manufactured home where the applicant pays rent for the pad (site).
- you are renting a room or property from an immediate family member (your spouse, parents, children or siblings)
- you live in private assisted living or any residence where you pay for room and board
- your landlord increases your rent increases because you start receiving the benefit. The benefit must be used to increase your quality life by making your rent more affordable.
- you are an employee of CLBC.
- you are eligible for <u>Shelter Aid for Elderly Renters (SAFER)</u> or the <u>Rental Assistance Program (RAP).</u>



Application process

- 1. Applicant assesses their eligibility based on the above criteria.
- 2. Applicant faxes their completed application and required documents to CLBC.
- 3. CLBC reviews application and determines if eligibility is met.
- 4. CLBC sends a letter to all applicants to let them know if their application was approved, denied or is being held in case a spot opens or more funding is granted to CLBC.
- 5. Approved applications will receive a Direct Deposit Application (DDA) form from CLBC, so the applicant can receive payments electronically, directly into their bank account.
- 6. Applicant completes and sends their DDA form back to CLBC.
- 7. CLBC sets up direct deposit of the housing benefit to the recipient or landlord.
- 8. Direct payments will begin in early 2026. Payments will be received one week before rent is due.
- 9. The recipient is responsible to report any changes in their housing situation to CLBC (i.e. move, change in tenants, income changes, etc.).
- 10. The recipient is required to reapply annually to continue to receive the benefit, starting in 2027.

Contact information

- Questions can be sent by email to: <u>clbc.housingbenefit@gov.bc.ca</u>.
- For in-person, online or phone for support with your application, visit the <u>Find Your Local CLBC Office page on our website</u>.



Checklist: Application for Housing Benefit

Preparing your application

The	following steps can be found on page 1 : Application for Housing Benefit.
	Complete Parts I & II of the Application for Housing Benefit
	Review and sign the Agreement in Part III
	All residents aged 19 and older living at the rental unit must sign
	Complete Appendix A (page 6) – required
Pro	ovide proof of income
•	ch household member aged 19+ must provide proof of income. Employment: Three current, consecutive pay stubs or a letter from your employer (both options must include gross monthly salary) PWD: Income assistance cheque stub or Ministry Release of Information stating support and shelter.
□	Attach copies of income documents from all sources. Do <u>not</u> send original documents.
Pro	ovide proof of rent
□	Include copies of documents showing current rent amount Examples: Tenancy Agreement, Notice of Rent Increase Do <u>not</u> send original documents.
Su	bmit your application
	Return completed Housing Benefits application including Appendix A Include all supporting documents Fax to CLBC at 236-468-1007 or bring into local CLBC office (do not drop off – staff need to fax it and hand it back to you)

BRITISH COLUMBIA

Appendix A

Ch	eck all that apply to you
	Check if you are currently unhoused .
	Check if you are at risk of losing your housing within:
	30 days
	60 days
	90 days
	Check if you have children who live with you.
	Check if you are fleeing violence.
	Check if you identify as First Nations, Metis, Cree, or Inuit.
Ad	ditional Contact
	If you are approved for this benefit, CLBC's Housing team will need to contact you from time to time . If we can't reach you, or your contact information changes, we will reach out to your additional contact.
	Please provide contact information for someone we can contact if we can't reach you.
Nar	me:
Age	ency name*:
*if y	ou are applying with the help of an agency/Service Provider
Em	ail:
Pho	one number:

