

## COMMUNITY HOUSING ACCESS CENTRE (CHAC)

235 King Street East, 6<sup>th</sup> Floor, Kitchener, ON N2G 4N5
Phone: (519) 575-4400 Fax: (519) 893-8648

<u>CHAC E-Mail</u> (chac@regionofwaterloo.ca)

<u>CHAC Website</u> (www.regionofwaterloo.ca/chac)

## **Applicant Information Change Form**

Form completed by:		Dated:				
Form completed by:Dated:						
Please Print						
Applicant Name:	File Number:					
Change of Address						
Old Address:		Unit	:			
City:	Postal Code:					
New Address:		Unit:	Move In Date:			
City:	Postal Code:					
New Landlord Name:		Phone	e Number:			
Present Accommodation: Renting	」□ Own/co-own □	Tempora	ry 🗆			
Staying with relative or friend ☐ Monthly Housing Amount: \$						
Change of Phone Number(s)						
Home Phone:	Work Phone		Cell Phone:			
Adding New Alternate Contacts						
Contact Name:			Phone Number:			
Do you give us permission to talk about your application with this person? Yes □ No □						
Contact Name:	Relationship:		Phone Number:			
Do you give us permission to talk about your application with this person? Yes □ No □						
Removing Alternate Contacts						
Contact Name:	Relationship:		Phone Number:			
Contact Name:	Relationship:		Phone Number:			

Change in Family Compo	sition (a	add or remove a	nyone under 10	S years of age)
☐ Add to household	Name	:		Date of Birth:
	Name	:		Date of Birth:
☐ Remove from household		Name:		
		Name:		
Note: To add or remove ar	nyone, 1	6 years of age or	older, you must	complete a new application form
Additions to Building Sel	lections	(maximum 5 site	es)	
To add more than 5 new si	ites, you	must complete a	new building se	lection form.
Removal of Building Sele	ections (	(maximum 5 site	s)	
To remove more than 5 no	w sitos	vou must somplet	o o now building	a coloction form

To remove more than 5 new sites, you must complete a new building selection form.

If there are other changes to report, please contact our office to determine what additional information and/or documentation we may require.