



Region of Waterloo

COMMUNITY SERVICES

# Community Housing Access Centre

235 King Street East, 6<sup>th</sup> Floor, Kitchener, ON N2G 4N5

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Website: [www.regionofwaterloo.ca/chac](http://www.regionofwaterloo.ca/chac)

## Request for Deferral of Application

**To Be Completed by Applicant/Co-Applicant:**  
(Note: All adult household members must sign the request)

**Applicant Name** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_

**Co-Applicant Name** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_

**Address** \_\_\_\_\_ **City/Town** \_\_\_\_\_

**Postal Code** \_\_\_\_\_ **Phone #** \_\_\_\_\_

**Until what date do you want defer your application:** \_\_\_\_\_

I am requesting that my application for Rent Geared-to-Income assistance with the Waterloo Region Co-ordinated Access System be deferred for the following reason:

- I/we just signed a one-year lease
- I/we are unable to move presently due to a household member's serious medical issue. Please explain: \_\_\_\_\_
- I/we need to leave the area to attend to a family emergency
- The primary household member will be in a time-limited treatment program or facility and unable to move
- Other: Please explain  
\_\_\_\_\_

**Signed** \_\_\_\_\_ **Dated** \_\_\_\_\_

**Signed** \_\_\_\_\_ **Dated** \_\_\_\_\_

**Signed** \_\_\_\_\_ **Dated** \_\_\_\_\_

### For Office Use Only:

File #: \_\_\_\_\_

Date Reviewed \_\_\_\_\_ Request Approved:  Yes  No

Decision: \_\_\_\_\_

If not approved, reason for declining request:  
\_\_\_\_\_