



Region of Waterloo

COMMUNITY SERVICES

Community Housing Access Centre (CHAC)

Phone: (519) 575-4400 TTY: (519) 575-4608

Email: housingapplication@regionofwaterloo.ca

Website: www.regionofwaterloo.ca/chac

Address: 20 Weber St E, Kitchener, ON N2H 1C3

Request for Homeless Status

What is Homeless Status?

Homeless Status may be assigned to an applicant household who is unsheltered and meets one of the following criteria:

1. Is living on the street; or
2. Using the emergency shelter system as the primary residence; or
3. Their housing was destroyed by fire or natural disaster in the last 3 months; or
4. Is awaiting release from a hospital or a time-limited treatment facility and is unable to return to their former place of residence and will not be released until suitable housing is found.

Who is eligible for Homeless Status?

Any member of a household applying for community housing in the Region of Waterloo, that is 16 years of age or older, may request the household be given Homeless Status. Only applicant households who satisfy the homeless criteria listed above, who have resided in the Region of Waterloo for the last 12 consecutive months and have a monthly income that is less than the amounts listed below will be considered for this status.

The Household income cannot exceed the following:

| Unit Size | Maximum Monthly Income |
|----------------|------------------------|
| Bachelor | \$1,925 |
| One Bedroom | \$2,525 |
| Two Bedroom | \$3,050 |
| Three Bedroom | \$3,400 |
| Four + Bedroom | \$4,175 |

* Effective: January 1, 2025

How to Apply

• **If you are not currently on the waiting list for Community Housing**, you must complete the Application for Community Housing along with the request for Homeless Status.

Copies of both forms are available on our website at:

<https://www.regionofwaterloo.ca/en/living-here/find-affordable-housing.aspx>

For other options on how to obtain the forms, please contact our Service First Contact Centre by calling **519-575-4400**.

• **If you are already on the waiting list for community housing**, you will only need to complete and submit the Request for Homeless Status.

Applicant Contact Information

| | | | |
|---|-----------|--------------|--|
| Full Name: | | Telephone #: | |
| Email: | | | |
| Street address: | | Unit #: | |
| City: | Province: | Postal Code: | |
| Alternative contact person's name and number: | | | |

Declaration and Consent to Disclosure

This section must be completed by the person experiencing homelessness. If that person is unable for any reason to sign the consent or to give valid consent, the consent may be signed on their behalf by: the parent or guardian, a power of attorney that gives consent on their behalf; or a person who is otherwise authorized to give the consent on their behalf.

I request that my application be given Homeless Status on the waiting list.

I confirm that all the information provided on this form is true and complete.

I understand that all information I give to CHAC will belong to them.

I, _____, hereby authorize and consent for CHAC to verify all information and documents provided to access my eligibility for Homeless Status. That includes permission to contact the issuer of any supporting documentation.

I hereby authorize _____ my, _____ to
(Name of Professional) (Professional relationship (i.e.: doctor))

Complete this form and consent to the disclosure of any supporting information requested by CHAC to assess my application.

Applicant's Signature:

Date:

Parent/Guardian's Signature:

Date:

Personal information contained on this form is collected under the authority of the Housing Services Act, 2011 and subject to the Municipal Freedom of Information and Protection of Privacy Act, R.S.O. 1990, c. M.56. The information will be kept confidential and used only for the purpose of assessing eligibility for Homeless Status.

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Professional Verification of Homeless Status

Information for Professionals Providing Verification of Homeless Status

In order to request Homeless Status, this form must be completed by a qualified professional within the **local homeless sector partner agency** who can verify that the household meets the Homeless Status criteria. If an Application for Community Housing has not already been submitted, please ensure one is completed. Only those households who are eligible for community housing will be considered for this status.

CHAC relies on the assessment and written verification of Homelessness from a professional to ensure applicants meet all the eligibility criteria for this status.

Information about Verifier

| | | |
|---|--------------------------------|--------------|
| Professional's Information and Declaration: | | |
| Full Name: | Position/Title: | |
| Professional Designation: | Registration / License Number: | |
| Organization: | | |
| Street Mailing Address: | | Unit #: |
| City: | Province: | Postal Code: |
| How long have you known/worked with the applicant in a professional capacity? | | |

