



County of Hastings 2017 Home Ownership Down Payment Assistance

Application Package



Home Ownership Down Payment Assistance

APPLICATION FORM

APPLICANT(S)/PURCHASER(S)

Circle: MR MRS <input type="checkbox"/> MISS <input type="checkbox"/> MS	Last Name	First Name	
Social Insurance Number		Date of Birth (DD/MM/YYYY)	
Status in Canada (Circle): <input type="checkbox"/> Canadian Citizen <input type="checkbox"/> Landed Immigrant <input type="checkbox"/> Refugee <input type="checkbox"/> Refugee Claimant <i>Immigration/refugee documentation required</i>			
Circle: MR MRS <input type="checkbox"/> MISS <input type="checkbox"/> MS	Last Name	First Name	
Social Insurance Number		Date of Birth (DD/MM/YYYY)	
Status in Canada (Circle): <input type="checkbox"/> Canadian Citizen <input type="checkbox"/> Landed Immigrant <input type="checkbox"/> Refugee <input type="checkbox"/> Refugee Claimant <i>Immigration/refugee documentation required</i>			
Unit/Apt No.	Street Address		
City		Postal Code	# of bedrooms
# of dependants	Circle the type of home: Semi-detached Single Condo Duplex		
Home Phone	Work Phone	Email:	

PLEASE FOLLOW THE CHECKLIST PROVIDED BELOW AND WHERE APPLICABLE ATTACH THE REQUIRED INFORMATION TO YOUR COMPLETED APPLICATION.

	Eligibility Requirements	Documents REQUIRED	✓
1.	The applicant/purchaser(s) is aged 18 years or older.	Copy of birth certificate, photo ID (i.e. Passport, Photo Driver's License)	<input type="checkbox"/>
2.	Proof of Household income. Income must be at or below \$72,800.	Copies of applicant/purchaser(s) 2016 Canada Revenue Agency "Notice of Assessment"	<input type="checkbox"/>
3.	Applicant/purchaser(s) does not currently own a home in whole or in part, or have any vested interest in a residence including recreation or cottage property.	Self-declared. Attach copy of latest, dated rent receipt for rental unit in Hastings County/Quinte West.	<input type="checkbox"/>
4.	The home purchased will be the applicant/purchaser(s)' sole and principal residence valued at \$311,017.00 or less and must be located in Hastings County including Belleville or Quinte West.	Offer of Purchase and Sale	<input type="checkbox"/>
5.	<i>Applicant/purchaser(s) does not have outstanding rental arrears with any Ontario social housing provider.</i>	<i>Office use only</i>	<input type="checkbox"/>
6.	Applicant/purchaser(s) is eligible for a pre-approved mortgage appropriate to the value of the home to be purchased.	Mortgage approval documents from a certified lender MUST be attached to this application.	<input type="checkbox"/>

ACKNOWLEDGEMENT

I/WE HEREBY DECLARE AND CERTIFY THAT THE ABOVE INFORMATION IS CORRECT. I/WE UNDERSTAND THAT THIS IS AN APPLICATION FOR A FORGIVABLE LOAN UNDER THE HOME OWNERSHIP DOWN PAYMENT ASSISTANCE PROGRAM, THE PURPOSE OF WHICH IS TO ALLOW HASTINGS COUNTY'S HOUSING SERVICES TO DETERMINE IF THE PURCHASER AND THE HOME ARE ELIGIBLE. FINAL CONFIRMATION OF ELIGIBILITY WILL BE REQUIRED AFTER COMPLETION OF THE HOME, IF APPLICABLE, AND PRIOR TO ANY FORGIVABLE LOAN BEING MADE.

PERSONAL INFORMATION CONTAINED IN THIS FORM OR ANY ATTACHMENTS HERETO IS COLLECTED BY HASTINGS COUNTY'S HOUSING SERVICES FOR THE PURPOSE OF THE MUNICIPAL FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT, R.S.O. 1990, C. M. 56 (MFIPPA) AND WILL BE USED TO DETERMINE ELIGIBILITY FOR HOME OWNERSHIP FUNDING. THE APPLICANT ACKNOWLEDGES THAT THE INFORMATION IN THE APPLICATION FORM AND THE ATTACHMENTS TO IT MAY BECOME AVAILABLE TO THE PUBLIC AND CONSENTS TO THE RELEASE OF THAT INFORMATION. ANY QUESTIONS REGARDING THE COLLECTION OR RELEASE OF THIS INFORMATION SHOULD BE DIRECTED TO THE CHIEF ADMINISTRATIVE OFFICER.

_____	_____	_____
<i>SIGNATURE</i>	<i>PRINT NAME</i>	<i>DATE</i>
_____	_____	_____
<i>SIGNATURE</i>	<i>PRINT NAME</i>	<i>DATE</i>

NOTE: ALL APPLICATIONS MUST BE SUPPORTED BY ORIGINAL PHOTO IDENTIFICATION AND EVIDENCE OF INCOME AND PRICE SATISFACTORY TO THE COUNTY OF HASTINGS.

FOR OFFICE USE ONLY

THIS APPLICATION IS **ELIGIBLE** FOR A CONDITIONAL COMMITMENT

_____	_____	_____
<i>PRINTED NAME</i>	<i>SIGNATURE</i>	<i>DATE</i>

THIS APPLICATION IS **NOT ELIGIBLE** FOR A CONDITIONAL COMMITMENT

_____	_____	_____
<i>PRINTED NAME</i>	<i>SIGNATURE</i>	<i>DATE</i>

FOR ENQUIRIES: PLEASE CALL 613.966.1311

SUBMIT COMPLETED APPLICATIONS WITH REQUIRED DOCUMENTATION TO:

**COUNTY OF HASTINGS, HOUSING SERVICES
228 CHURCH STREET, P. O. BAG 6300
BELLEVILLE, ONTARIO K8N 5E2**