



**Hastings County  
2024 Home Ownership Assistance Program**

**APPLICATION PACKAGE**

**Home  
Ownership  
Assistance  
Program**



**Home Ownership Down Payment Assistance**  
**APPLICATION FORM**

**Applicant(s)/Purchaser(s)**

<b>Last Name</b>		<b>First Name</b>	
<b>Social Insurance Number</b>		<b>Date of Birth (DD/MM/YYYY)</b>	
<b>Status in Canada (Circle):</b> <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>			
<b>Last Name</b>		<b>First Name</b>	
<b>Social Insurance Number</b>		<b>Date of Birth (DD/MM/YYYY)</b>	
<b>Status in Canada (Circle):</b> <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>			
<b>How many children are currently residing with you?</b> _____			

**Current Address**

<b>Unit/Apt No.</b>	<b>Street Address</b>		
<b>City</b>	<b>Postal Code</b>	<b># of bedrooms</b>	
<b>Home Phone:</b>	<b>Work Phone:</b>	<b>Email:</b>	

**Address of Property to be Purchased**

<b>Unit/Apt No.</b>	<b>Street Address</b>		
<b>City</b>	<b>Postal Code</b>	<b># of bedrooms</b>	
<b>Circle the type of home (Circle):</b> Semi-detached                  Single                  Condo                  Duplex			

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

	<b>Eligibility Requirements</b>	<b>Documents REQUIRED</b>	<b>✓</b>
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 \$90,000.	Copies of applicant/purchaser(s) 2023 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 stake in a residence including recreation or cottage property.	Self-declared. Attach copy of latest, dated rent receipt for rental unit in Hastings County, including the Cities of Belleville and Quinte West.	<input type="checkbox"/>
4.	The home purchased will be the applicant/purchaser(s)' sole and principal residence valued at \$428,467 or less and must be located in Hastings County, including the Cities of Belleville and Quinte West.	Agreement 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 <b>MUST</b> be attached to this application.	<input type="checkbox"/>

\*\* Eligible applicants may receive 10% of the purchase price (up to a maximum of \$30,000)

## DECLARATION & 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 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.

\_\_\_\_\_  
*SIGNATURE*

\_\_\_\_\_  
*PRINT NAME*

\_\_\_\_\_  
*DATE*

\_\_\_\_\_  
*SIGNATURE*

\_\_\_\_\_  
*PRINT NAME*

\_\_\_\_\_  
*DATE*

### FOR OFFICE USE ONLY

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

\_\_\_\_\_  
PRINTED NAME

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

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

\_\_\_\_\_  
PRINTED NAME

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

**FOR ENQUIRIES: Please call 613.966.1311 Ext. 4301  
or email [HOMEOWNERSHIP@HASTINGSCOUNTY.COM](mailto:HOMEOWNERSHIP@HASTINGSCOUNTY.COM)**

**SUBMIT COMPLETED APPLICATIONS WITH REQUIRED DOCUMENTS TO:**

**[HOMEOWNERSHIP@HASTINGSCOUNTY.COM](mailto:HOMEOWNERSHIP@HASTINGSCOUNTY.COM)**

**OR**

**COUNTY OF HASTINGS, HOUSING SERVICES**

**228 CHURCH STREET, P.O. BAG 6300**

**BELLEVILLE, ON K8N 5E2**

**FAX #: 613-966-4598**

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