

Application Instructions

Step 1: Complete, sign and date all sections of the application form.

Step 2: Gather and provide copies of supporting documents.

Step 3: Submit your application by mail, fax, email or drop off at our office or your local Community Liaison worker's office for submission to the NHC.

Step 4: Wait for our letter advising your application has been processed.

Completed applications with all supporting documents will be reviewed in the order they are received.

Applications submitted without required documents can be held for a maximum of 90 days.

Subsidized housing is long-term housing where the rent is set based on Nunatsiavut Housing Commission policy. The Nunatsiavut Housing Commission uses this information to select tenants when units become available. There are more people applying for housing than vacant units. It is not possible to predict when units may be available.

Who is Eligible?

Everyone may apply and is eligible for Affordable Rental Housing; however, you will be prioritized for the Program if your household meets the following conditions:

1. One of the following household groups:
 - Family
 - Senior (55+)
 - Person with Disabilities
 - Single people or couples at risk of homelessness
 - On a fixed-income
2. Reside in Nunatsiavut
3. Meet residency requirements
4. Are able to live independently

All information collected in this application will be kept confidential with the staff and Board members of the Nunatsiavut Housing Commission

The NHC may complete additional checks to assess a household's ability to uphold the obligations of a tenancy agreement. These may include:

- Updated information on household members, income, and assets
- Reference checks
- Personal interviews
- Consent for a credit or criminal record check

Successful applicants will be required to sign a tenancy agreement and addendum covering topics on pets, smoking, etc.

Contact Us

Hours:

8:30am - 4:30pm
Monday - Friday

Toll-Free:

Phone: 1-709-896-4081
Fax: 1-709-896-2610

Please do not submit original documents.

The Nunatsiavut Housing Commission

Affordable Rental Housing Application Checklist

Required Documents:

☐ **Proof of status in Nunatsiavut for all household members**

- Copy of Status as a Nunatsiavut Beneficiary
- Copy of Canadian birth certificate(s) or Canadian passport(s) if born in Canada and a non-Beneficiary.
- If not born in Canada, please provide **one** of the following:
 - o Record of Landing (IMM1000) or Confirmation of Permanent Residence (IMM5292/IMM5688); or
 - o Permanent Resident Card (front/back); or
 - o Any immigration document showing the date landed and the immigration code; or
 - o Canadian Citizenship Card, Canadian Citizenship Certificate, or Canadian Passport; or
 - o Refugee Protection Claimant Document (RPCD) or Notice of Decision.

☐ **Proof of student status** for all adult children aged 19 – 30 who are full-time students.

☐ **Proof of address and rent**

- Copy of current rent receipt or recent rent increase notice; or
- Copy of lease or tenancy agreement showing current rent amount; or
- If you own your home, or stay with family in a privately-owned home, provide proof of address with a utility bill, or letter from homeowner stating you reside at the address and that they are the homeowner—further explanation as to why you cannot remain at this address would be valuable.

☐ **Proof of income or disability assistance** (required for all household members aged 19+)

- If receiving income assistance or disability assistance from Advanced Education, Skills and Labour NL: copy of cheque stub or confirmation of monthly assistance.
- If employed: proof of **current** gross monthly income (last three consecutive cheque stubs or letter from employer).
- Copies of cheque stubs, bank statements showing direct deposit of pensions, or other confirmation of income for any other income source.

Additional Documents (If Applicable)

☐ **Copy of Notice to End Tenancy** (if you answered Yes to Question 7d).

☐ **Optional: Supplemental Application Information** only needs to be completed if you wish to receive extra consideration for:

- Homelessness or risk of homelessness;
- Health Condition affected by current housing;
- Being at risk of being separated from children due to an inadequate housing assessment; or
- Fleeing abuse or violence.

Submit application with supporting documents by:

Mail: Attn: NHC

**P.O. Box 2760,
Station B, HV-GB,
NL, A0P 1E0**

Email:

Brenna.jarrar@nunatsiavut.com

Fax:

709-896-2610

Please Print Clearly

FOR OFFICE USE ONLY

File:

Date:

1. Applicant Information

List yourself and all potential household members for subsidized housing. If required, attach a separate sheet for more names.

Last Name	First name(s)	Relationship to Applicant	Date of Birth (dd/mm/yyyy)	Gender Identity	Status in Nunatsiavut*
		Applicant			

**Status in Nunatsiavut: Beneficiary or non-Beneficiary*

2. Residential Address *Those who currently reside in Nunatsiavut will be prioritized for the Affordable Rental Program.*

Apt #	Street #	Street name		City	Postal code
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Mailing Address If different from home address.

Apt #	Street #	Street name	City	Postal code
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3. Contact Information

Cell phone	Other phone	Email
Optional: Name of person we can leave messages with		Message person phone number
Optional: Authorized contact* name and relationship to you		Authorized contact phone number

Note: By providing an authorized contact, you are giving permission for NHC to exchange information with that authorized contact in order to maintain and update your applicant file. To remove an authorized contact, please contact the NHC.

4. Residence History

4a. Please provide information on where you have lived for the last five years. If space is needed, attach a separate sheet.

Current Address (street, city)	From (mm/yyyy)	To (mm/yyyy)	Landlord Name	Landlord Phone Number
Reason for Leaving:				

Previous Address (street, city)	From (mm/yyyy)	To (mm/yyyy)	Landlord Name	Landlord Phone Number
Reason for Leaving:				

Previous Address (street, city)	From (mm/yyyy)	To (mm/yyyy)	Landlord Name	Landlord Phone Number
Reason for Leaving:				

Please provide the suggested proof of address and rent documents as stated in the checklist.

4b. Have you or any members of your household ever lived in subsidized housing? ☐ Yes ☐ No

If so, list the name(s) on the tenancy: _____

Building name and/or address: _____

Note: Failure to declare any previous subsidized tenancies may result in cancellation of your application. Past tenants with debt may be required to either repay the debt or enter into a repayment agreement.

5. References (Optional)

If you did not list a current or previous landlord in Question 5, please include a reference that has observed your character over a reasonable amount of time. Examples: employer, past employer, pastor, outreach worker or health worker.

Name	Relationship	Phone Number

6. Income Information

6a. List all gross (before deductions) monthly income for household members aged 19 and older.

If required, attach a separate sheet.

Name	Income Source (Income Assistance, employment, EI, pension, etc.)	Gross Monthly Income (\$)	Disability Income?
		\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
		\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
		\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
		\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
		\$	<input type="checkbox"/> Yes <input type="checkbox"/> No

8b. Is any adult child (ages 19 – 24) a full-time student in the household?

☐ Yes ☐ No

Please provide required proof of full-time student status and suggested proof of income documents as stated in the checklist.

7. Current Accommodation

7a. Are you currently renting? ☐ Yes ☐ No

If you are renting, how much is your monthly rent payment? \$_____

7b. Please describe your current living arrangements.

☐ House/Townhouse

☐ Apartment/Basement

☐ Manufactured Home/Trailer

☐ Sleeping Outside

☐ Staying with Family

☐ Staying with Friends

☐ Motel/Hotel

☐ Transition Home

☐ Second Stage Housing

☐ Care Facility or Treatment Centre

☐ Emergency Shelter

☐ Other: _____

7c. How long have you been in your current living arrangement? _____ (in months or years)

7d. Have you received a legal Notice to End Tenancy?

☐ Yes ☐ No

If yes, when do you have to move by? _____

Please provide a copy of the Notice to End Tenancy form (if applicable) as stated in the checklist.

7e. Is there anything else that you want to share with a potential landlord about your current living situation?

8. Health and Mobility Information

8a. Do you, or any members of your household, have challenges with stairs?

☐ I/We can do stairs ☐ I/We cannot do stairs ☐ I/We can only do a few stairs. How many? _____ steps

8b. Do you, or any member of your household use a: Wheelchair? ☐ Yes ☐ No Scooter? ☐ Yes ☐ No

If yes, who? _____ Used inside the home? ☐ Yes ☐ No

8c. Please only list health conditions or disabilities that would affect your housing needs.

Name of Household Member	Health Condition or Disability

8d. Please describe any health concerns that are affected by your current housing.

8e. Please describe any special requirements or features that you may need in your housing (e.g., grab bars, a ramp).
Please note that special requirements or features may limit the number of units that you are eligible for.

9. Housing Options

9a. Are you willing to live in a non-smoking/vaping free building and sign a non-smoking agreement? ☐ Yes ☐ No

9b. Provide the following information for all household pets.

Type	How Many?	Accredited dog under the "Guide Dog and Service Dog Act:" <input type="checkbox"/> Yes <input type="checkbox"/> No Please submit proof of guide dog accreditation (if applicable).
Dog		
Cat		
Other Animal		Describe:

10. Where do you want to live?

Please use the Housing Listings in the most recent public announcements on unit availability to tell us where you would like to apply, if relevant. You can request a physical copy of the Housing Listings by phone at 709-896-4081. Please be careful when selecting buildings and be sure you are prepared to live in any of the buildings or areas that you list.

Note that you may apply at any time and indicate a general preference for a community only, if no unit vacancies are currently advertised. You will be added to the waitlist until a unit in your preferred community becomes available for consideration.

Option #1: Buildings.

From the Housing Listings, please record the Code for each of the buildings you are interested in (e.g., HOP-100). There is no limit on the number of buildings that can be selected for your application.
If the building does not have a Code, contact the NHC directly.

Option #2: Communities

Please record the Inuit Communities you are willing to live in (Nain, Hopedale, Postville, Makkovik, and Rigolet).

11. Optional Supplemental Application (If Applicable)

The NHC may give additional consideration to applicants who:

- are homeless or at risk of homelessness;
- are at risk of being separated from your children due to an inadequate housing assessment;
- are fleeing domestic violence or abuse; or
- have a serious health condition, including addictions, that is affected by current housing.

Applicants who meet these criteria can provide details below, or in an attached letter:

PLEASE READ AND SIGN

I/We declare:

- This is my/our application; and
- All the information in it is correct and complete to the best of my/our knowledge.

I/We permit:

- The Nunatsiavut Housing Commission to make any inquiries that are necessary to verify the information given in this application;
- Any person, corporation or social agency to release to the Nunatsiavut Housing Commission any information pertinent to the assessment of my/our application;
- Members of the Nunatsiavut Housing Commission to receive and exchange with credit bureaus and my/our previous landlords' credit and other tenancy information about me/us, to be used in the decision-making process to provide me/us with housing;
- The Department of Advanced Education, Skills and Labour NL to release information to the Nunatsiavut Housing Commission regarding my/our income.

I/We understand:

- That this application is not an agreement on the part of The Nunatsiavut Housing Commission or its members to provide me/us with housing;
- That if I/we are being considered for an available unit, the Nunatsiavut Housing Commission will gather additional information in order to assess my/our ability to uphold the obligations of a tenancy agreement and it is my/our responsibility to provide or cause to be provided information requested to assist with this assessment;
- That it is my/our responsibility to tell the Nunatsiavut Housing Commission of any changes to the information given in this application and to provide any supporting documents required;
- That false information given by me/us may result in my/our application being cancelled from consideration;
- That if I/we have deliberately worsened my/our current housing situation (e.g., terminated a tenancy for no reason) that my/our application may not be accepted or my/our current living situation may not be taken into consideration.

This application must be signed by all household members aged 19 and older.

Applicant (<i>print name</i>)	Signature of Applicant	Date
Additional Applicant (<i>print name</i>)	Signature of Additional Applicant	Date
Additional Applicant (<i>print name</i>)	Signature of Additional Applicant	Date
Additional Applicant (<i>print name</i>)	Signature of Additional Applicant	Date
Additional Applicant (<i>print name</i>)	Signature of Additional Applicant	Date

Purpose of this form: This form collects personal information for contact purposes and to determine eligibility for subsidized housing through the Affordable Rental Program.