

APPLICATION CHECKLIST

NOTE: We cannot process your Assisted Homeownership Application if required documentation is missing.

YOU MUST ATTACH PROOF OF ALL SOURCES OF INCOME TO THIS APPLICATION.

The following information must be attached to your completed Assisted Homeownership Application:

<input type="checkbox"/>	Mortgage Pre-qualification	<p>Note: If you do not qualify for a mortgage, you cannot apply for homeownership assistance.</p> <p>Attach verification from a financial institution or lender that you qualify for a mortgage. If you require a mortgage, your bank or mortgage lender can assist you with the mortgage pre-qualification process.</p>
<input type="checkbox"/>	Photo Identification	<p>For applicant(s) to be registered on title attach a photocopy of two pieces of photo ID; front and back. (e.g. Ontario Driver's License, Status Card, Canadian Passport, Ontario Photo Card, Métis Card, Valid Firearm's Licence, Military ID)</p>
<input type="checkbox"/>	Income	<p><u>For each Aboriginal Family/Household member over age 18</u>(excluding children in school full time and non-occupant guarantors), attach copies of 2015 documentation verifying sources and amount of all income (T4's, T5's, and most recent pay stubs, etc.).</p>
<input type="checkbox"/>	Notice of Assessment	<p>Attach a copy of your Tax Year 2015 Notice of Assessment from Canada Revenue Agency <u>for each applicant and person over the age of 18 in the household</u> (excluding children attending school full time and non-occupant guarantors). If you do not have your Assessment, visit your local office or to go www.cra.gc.ca for more information.</p>

Please attach the following if applicable:

<input type="checkbox"/>	Letter from Social Housing Provider	<p>Attach copy of letter from Social Housing provider showing that your rent is paid to date, with no arrears owing.</p>
<input type="checkbox"/>	Canada Child Tax Benefit Notice (including Ontario Child Benefit, National Child Benefit Supplement)	<p>To show payment period of 2015, please attach your Base Year 2013, and Base Year 2014 Canada Child Tax Benefit Notice. If you do not have copies please call Canada Revenue Agency at 1-800-387-1193 and request they be sent to you. (If applicable)</p>
<input type="checkbox"/>	Universal Child Care Benefit Notice	<p>To show payment period of 2015, please attach your Base Year 2013, and Base Year 2014 Universal Child Care Benefit Notice. If you do not have copies please call Canada Revenue Agency at 1-800-387-1193 and request they be sent to you. (If applicable)</p>



Appendix A: Assisted Homeownership Application, FIMUR 2014/20 (confidential)

This program was developed in concert with the Ontario Native Woman's Association, the Métis Nation of Ontario, and the Ontario Federation of Indian Friendship Centres. Thank you for applying to the First Nation, Inuit, Métis Urban and Rural 2014/20 Housing Program's Assisted Homeownership Program. All applicants must complete this application for evaluation. Guidelines and FAQ's can be viewed on our website at <http://www.ontarioaboriginalhousing.ca/>

Process:

Step 1: Complete application

Step 2: Include required attachments

Step 3: Mail it in

The following definitions apply when completing the application:

Combined Gross Household Income is the total gross income of the Aboriginal Family/Household, excluding children (under age of 18) and non-occupant guarantor(s). Total gross income of the household cannot exceed 2015 60th income percentile. Further information on the 60th income percentile is available in the Guidelines.

The following sources of income are included in the calculations:

- Gross salaries, wages, overtime payments, commissions, bonuses, tips, gratuities;
- The greater of the net income from the business or the total withdrawals from the business as personal salary of purchaser(s) household that is self-employed;
- The gross amount of Employment Insurance benefits;
- The gross amount of WSIB payments or other industrial accident insurance payments made because of illness or disability;
- The living allowance portion or grant portion of any education assistance fund;
- The gross amount of any Old Age Security, federal Guaranteed Income Supplement and spouse's allowance and financial assistance under the Ontario Guaranteed Annual Income System (GAINS);
- The gross amount of every kind of pension, allowance, benefit, and annuity whether from a federal, provincial, or municipal government of Canada or any other country or state or from any other source, (land claim settlements excluded);
- The gross amount of alimony, separation, maintenance, or support payments;
- The gross amount of gains from investments including RRSP's as well as interest or dividends, stocks, shares, and other securities and where the actual income cannot be determined, an imputed rate of return set by the land;
- The gross interest income from savings or chequing accounts in a bank, trust company or a credit union;
- The gross amount of interest earned or payable from bonds, debentures, term deposits or investments, certificates, mortgages, capital gains, or lump sum payments or other assets;

Household

For the purpose of calculating the combined Total Gross Household Income, the amount of and proof of income will be required for every person of the "Household" where "Household" is defined as:

- a) an Aboriginal (First Nations, Inuit, Métis,) individual, the individual's spouse or partner and all of the children (age 18 and over) of both or either of them who are living with them and not attending school full time,
- b) an Aboriginal individual and the individual's spouse or partner living with them, if neither has any children,
- c) an Aboriginal individual and the individual's children (age 18 and over) living with them and not attending school full time, if the individual has no spouse or partner, or
- d) an Aboriginal individual, if the individual has no spouse or partner and no children.
- e) extended family

1. Applicant Information

Primary Applicant:

_____ / ____ / ____
 First Name Initial Surname Date of Birth (Day/Month/Year)

 Street Address City Postal Code Female Male

 Mailing address if different than above (R.R. #, Box # etc.)

H phone: () ____ - ____ W phone: () ____ - ____ C phone: () ____ - ____

Email address: _____ Add to OAHS email list? Yes No

Marital Status: Single Married Common Law Separated Divorced Widowed Other

Aboriginal Status (check one): First Nations Métis Inuit Non-Status Non-Native

Secondary Contact # - Name: _____ Primary Phone: () _____
 (other than those listed on this application)

Co-Applicant:

_____ / ____ / ____
 First Name Initial Surname Date of Birth (Day/Month/Year)

 Street Address City Postal Code Female Male

 Mailing address if different than above (R.R. #, Box # etc.)

H phone: () ____ - ____ W phone: () ____ - ____ C phone: () ____ - ____

Email address: _____ Add to OAHS email list? Yes No

Marital Status: Single Married Common Law Separated Divorced Widowed Other

Aboriginal Status (check one): First Nations Métis Inuit Non-Status Non-Native

2. Household composition, excluding applicant(s)

Name	DOB D/M/Y	m/f	Relationship (daughter, son, partner, spouse etc.)	For each household member, please check the appropriate column				
				FN	Métis	Inuit	Status Non-	Native Non-
1								
2								
3								
4								

Do all of the people listed live with you full time? Yes No

If no, provide the name of the person(s) & number of days per week they live with you.

Name	# of days/week	Reason for not living with you full time
1		
2		

3. Combined Gross Household Income

What is your combined Gross Household Income (definition on page 1)? \$ _____
Is it less than the 2015 60th income percentile (please refer to Appendix C)? Yes No

Please submit the following proof of income (copies) with this request: Tax Year 2015 Notice of Assessment and Notice of Reassessment (if applicable), 2015 T4 slip(s), 2015 T5 slip(s), and two current stubs from source(s) of income.

For **self-employed applicants**, 2015 Notice of Assessments will be required if applying after August 15, 2016.

For this application, self-employment income will be reduced by all deductions allowed by the Canada Revenue Agency, except for the following:

1. Capital Cost allowances for the depreciation of assets;
2. Rent paid by the individual, where the individual operates the business from their residence;
3. Childcare expenses.

4. Program Priorities

Are you moving from Transitional Housing, a crisis shelter, or emerging from a violent partnership/relationship?
 Yes No

Do you currently reside in Rent Geared-to-Income, Subsidized, Affordable or Social housing?
 Yes No

If you are a current tenant, please provide name and phone number of the Social Housing provider:
Name: _____ Phone #: _____

5. Financial Obligations

Are you currently in arrears and/or have outstanding debt with a Social Housing provider, or any landlord?
 Yes No

If yes, please provide contact information (Name, phone number, address):
Name: _____ Phone # _____ Address: _____

If yes, have you entered into a repayment plan with the provider?
 Yes No
Please provide your repayment agreement with your application.

Is any applicant entitled to receive or required to pay spousal and/or child support?
 Yes No If yes, monthly amount \$ _____

Is any applicant in default of a spousal and/or child support order?
 Yes No If yes, Applicant # _____

6. Present Accommodations (If without accommodation select N/A)

At present, do you:

Rent or Own N/A

Amount of monthly rent (if any) \$ _____ Are utilities included? Yes No

Do you or your spouse/partner currently own a home, or have ownership in any home or any real estate?

Yes No If yes, provide reason(s) below

If homeowner, are you unable to reside in the home you currently own?

Yes No If yes, provide reason(s) below

7. Additional Information

Have you signed an Agreement of Purchase and Sale? Yes No

If you require FIMUR funds for a home purchase, please **do not make an offer on a home unless you have received written confirmation that your FIMUR 2014/20 Assisted Homeownership Application has been approved.**

Are you employed by OAHS or an associated provincial territorial organization?

Yes No

If yes, please check your employer:

OFIFC ONWA MNO OAHS

Please indicate applicant and co-applicant employer(s) name, address and/or other sources of income. This information **must** be supplied.

1.

2.

3.

8. Residence History

Please provide your residence history (addresses) for the last three (3) years.	Period of residency (dd/mm/yyyy) to (dd/mm/yyyy)
1.	
2.	

9. How did you hear about FIMUR 2014/20 Assisted Homeownership Program?

Please choose all that apply:

- Aboriginal media Friendship Centre ONWA local MNO local Information Session
 Word of mouth OAHS website Other _____

10. OAHS Terms

*OAHS will enter into an agreement with each successful Aboriginal Household prior to advancing funds and will ensure that the terms of the agreement include a covenant by the Aboriginal Household to repay all or part of the advanced funds to OAHS if the property is sold/transferred/rented by the Aboriginal Household within ten (10) years following the date of purchase. **This agreement will be registered as a Charge/Mortgage against the title to your property until such time as your commitment under the agreement has been fulfilled. This represents our mutual security in the case of default in the terms of the loan.***

If successful, funds will be advanced to the solicitor acting for the purchaser to be held in trust pending completion of the sale. No funds will be advanced to any other party. The funds advanced are subject to the trust condition that the funds will be returned to OAHS if the transaction is not completed for any reason. If funds are returned to OAHS, and the applicant wants to re-apply for the funding, the applicant must re-submit their application and meet the eligibility requirements.

All applicants who give personal information to OAHS shall be required to consent to the release of that information to MMAH in order to comply with the Personal Information Protection and Electronic Documents Act (PIPEDA) and Freedom of Information and Protection of Privacy Act (FIPPA). The information provided on this application will be used for the purpose of determining eligibility and potential successful selection for the FIMUR 2014/20 Assisted Homeownership program.

The undersigned consents to the release of information in this application form and the attached documents if required by law. Any questions regarding the collection or release of this information should be directed to:

FIMUR Homeownership Program
Ontario Aboriginal Housing Support Services Corporation
500 Bay Street
Sault Ste. Marie, ON P6A 1X5
Phone: (866)-391-1061
Fax: (705) 256-2671
Email: info@oahssc.ca

Please view our Privacy Policy on the OAHS website:

http://www.ontarioaboriginalhousing.ca/index.php?option=com_content&view=article&id=133&Itemid=359

Please be advised that completion and submission of the FIMUR 2014/20 Homeownership Assistance Program Application Form does not guarantee application approval.

11. Applicant Declaration

The undersigned hereby understands, agrees, and declares that:

- the information provided on this request will be used for the purpose of determining preliminary eligibility for the FIMUR 2014/20 Assisted Homeownership Program.
- a final written confirmation of eligibility for program funds will be issued after all other program requirements are met and prior to any forgivable loan agreement being signed;

I/we consent to the sharing of my/our information with your partners.

I/we, _____, verify that the information I/we have provided in this application is true and accurate to the best of my/our knowledge. I/we acknowledge that knowingly making a false or fraudulent application shall be considered sufficient cause for refusal of my/our application for the FIMUR Homeownership Assistance Program. I/we also understand the conditions outlined above. **It is also understood that OAHS reserves the right to reject this application at their sole discretion.** I/we have read, and understand these conditions.

Before submitting this application, the signature (s) MUST be witnessed & dated using the space provided below:

Primary Applicant Name (required) (please print)

Primary Applicant Signature

Date

Co-Applicant Name (if applicable) (please print)

Primary Applicant Signature

Date

Witness Name (required) (please print)

Witness Signature

Date

For assistance with this application or questions regarding your submission, please contact:

Karen Benford
Program Delivery Assistant
FIMUR Homeownership Program
Ontario Aboriginal Housing Services
500 Bay Street,
Sault Ste. Marie, ON
P6A 1X5
Phone (866) 391-1061 ext. 216
Fax: (705) 256-1664
Email: kbenford@oahssc.ca

Appendix B: Average Market Value Table

Service Manager Area	Average MLS® Resale Price (2016 – Source: CMHC)
City of Brantford (Brantford Region)	\$300,000
City of Cornwall	\$197,000
City of Greater Sudbury	\$238,000
City of Hamilton (Metro Hamilton)	\$458,000
City of Kawartha Lakes	\$298,000
City of Kingston (Kingston and area)	\$290,000
City of London	\$271,000
City of Ottawa	\$362,000
City of Peterborough	\$293,000
City of St. Thomas	\$216,000
City of Stratford	\$258,000
City of Windsor (Windsor-Essex)	\$206,000
County of Bruce	\$246,000
County of Dufferin	\$415,000
County of Grey	\$246,000
County of Hastings	\$235,000
County of Huron	\$258,000
County of Lambton	\$217,000
County of Lanark	\$276,000
County of Lennox & Addington	\$290,000
County of Norfolk	\$272,000
County of Northumberland	\$315,000
County of Oxford	\$261,000
County of Renfrew	\$218,000
County of Simcoe	\$361,000
County of Wellington	\$394,000
District Municipality of Muskoka	\$355,000
Municipality of Chatham Kent	\$153,000
Regional Municipality of Waterloo	\$360,000
Regional Municipality of Niagara	\$283,000
United Counties of Leeds & Grenville	\$278,000
United Counties of Prescott & Russell	\$267,000
Algoma DSSAB	\$157,000
Cochrane DSSAB	\$150,000
Kenora DSSAB	\$200,000
Manitoulin-Sudbury DSSAB	\$238,000
Nipissing DSSAB	\$216,000
Parry Sound DSSAB	\$302,000
Rainy River DSSAB	\$139,000
Sault Ste. Marie DSSAB	\$157,000
Thunder Bay DSSAB	\$219,000
Timiskaming DSSAB	\$150,000

Appendix C: Maximum Household Income Level, 2016*

CMSMs	Income at 60th Percentile*
City of Brantford	\$78,900
City of Cornwall	\$72,200
City of Greater Sudbury	\$83,700
City of Hamilton	\$81,700
City of Kawartha Lakes	\$74,700
City of Kingston	\$83,300
City of London	\$78,500
City of Ottawa	\$88,900
City of Peterborough	\$77,000
City of St. Thomas	\$78,500
City of Stratford	\$84,600
City of Windsor	\$78,800
County of Bruce	\$88,600
County of Dufferin	\$88,900
County of Grey	\$75,000
County of Hastings	\$71,500
County of Huron	\$76,200
County of Lambton	\$86,200
County of Lanark	\$85,200
County of Lennox & Addington	\$78,400
County of Norfolk	\$81,300
County of Northumberland	\$81,300
County of Oxford	\$84,400
County of Renfrew	\$78,900
County of Simcoe**	\$88,900
County of Wellington**	\$88,900
District Municipality of Muskoka	\$79,700
Municipality of Chatham Kent	\$68,900
Regional Municipality of Waterloo**	\$88,900
Regional Municipality of Niagara	\$77,600
United Counties of Leeds & Grenville	\$82,500
United Counties of Prescott & Russell	\$88,900
Algoma DSSAB	\$62,500
Cochrane DSSAB	\$80,700
Kenora DSSAB	\$79,600
Manitoulin-Sudbury DSSAB	\$71,800
Nipissing DSSAB	\$75,700
Parry Sound DSSAB	\$72,000
Rainy River DSSAB	\$72,200
Sault Ste. Marie DSSAB	\$76,700
Thunder Bay DSSAB	\$79,100
Timiskaming DSSAB	\$66,600
ONTARIO**	\$88,900

* Based on Statistics Canada 2011 National Household Survey, indexed to 2016, rounded to the nearest hundred.

** In areas where 60th income percentile is greater than the provincial level, the provincial level 60th income percentile is used.