

CITY OF GREATER SUDBURY HOUSING APPLICATION FOR RENT-GEARED-TO-INCOME ASSISTANCE

Prior to completing the housing application, it is recommended that you review the Rent-Geared-to-Income assistance program at www.greatersudbury.ca/housing and select Housing Services.

Please review the following information to assist you in completing your application:

- Complete all sections on the application form and provide necessary documentation.
- Incomplete applications cannot be reviewed for eligibility. Household applicants who have an incomplete application will be contacted and asked to provide any missing information. If the application remains incomplete after 30 calendar days, it will be necessary to make a new application.
- All household applicants who are 16 years of age or older will need to sign both the Release and Consent as well as the Declaration.
- Any changes in the information provided in the original application must be reported to Housing Registry Office within 30 calendar days of the change. Failure to report changes may result in the application being cancelled and removal from the wait list. The Housing Registry contact information is at the bottom of this page.

Please include the following documents:

- Most recent Notice of Assessment (NOA).
- If you are a newcomer to Canada in the last 12 months and have not filed the appropriate documents with the Canada Revenue Agency (CRA), you will need to provide 3 months of bank statements from all Canadian and foreign accounts.
- Verification of Canadian citizenship (Canadian birth certificate, passport, status card, permanent resident card, verification that you applied for permanent residence, immigration documentation).
- Ontario Works/Ontario with Disability Support Program statement and drug card verification.
- Verification of school registration at a post-secondary institution.
- If you have not worked in Canada in the last 12 months and do not have an NOA, you will need to provide a 1 month bank account statement.
- Additional documents/information may be requested to determine eligibility.

Modified Unit, Special Priority and Urgent Status

- Modified units are altered to accommodate household applicants that are in wheelchairs and have other mobility issues.
- Special priority is designated when personal safety or that of their family is at risk because of abuse by another individual or because of human trafficking.
- Urgent status is designated for household applicants that are homeless, loss of home due to fire, home has been condemned, waiting release from an institution, and risk of apprehension of child/children or will not be returned by a child protection agency due to inadequate housing.
- Household applicants must be deemed eligible first before requesting a modified unit, special priority or urgent status. Additional forms are available at www.greatersudbury.ca/housing and select Housing Services or contact the Housing Registry.

Housing Registry Contact Information

| | |
|---|--|
| City of Greater Sudbury Housing Services 199 Larch Street, Suite 603 Sudbury, ON P3E 5P9 | Phone: 705-674-4455 Email: housing.registry@greatersudbury.ca Fax: 705-671-0825 Drop Box: Lobby 199 Larch Street, Sudbury |
|---|--|

Personal information contained on this form or in attachments is collected, pursuant to the *Housing Services Act, 2011*, Sections 169, 170, 171, 172, 173, 174, 175 and 176 and the *Municipal Freedom of Information and Protection of Privacy Act, (R.S.O. 1990, c M.56)*.

This information may be used to determine suitability and eligibility for housing applied to, continuation of housing and the appropriate rent scale and rent-geared-to-income charge. Personal information may be disclosed to housing providers, other municipal or provincial departments and agencies that assist in the provision of social housing and social agencies providing social assistance to the applicant.

All applicants must consent to the verification, disclosure and the transfer of information given on this form and attachments by or to any of the above entities. All applicants are required to provide supporting documentation.

Primary Applicant

*Indicates that the information is required to process your application

| | | | |
|--|---|---------------------------------------|--------------------------------------|
| Mr. ___ Mrs. ___ Ms. ___ | Last Name * | First Name* | Middle Name |
| Gender Male ___ Female ___ Other _____ | Date of Birth* (yyyy/mm/dd) | Social Insurance Number | Maiden name (if applicable) |
| Status in Canada* | | | |
| Canadian Citizen ___ Landed immigrant ___ Refugee or Refugee claimant ___ Applied for permanent residence ___ Other (specify) * _____ | | | |
| Marital Status | | | |
| Single ___ Married ___ Common law ___ Divorced ___ Widowed ___ Other _____ | | | |
| What is your preferred language? | | English | French |
| Mailing Address | | | |
| Apartment Number | Mailing Address (street number, street name, street direction) | | |
| City | | Province | Postal Code |
| Current Address if Different from Above | | | |
| Apartment Number | Current Address (street number, street name, street direction) | | |
| City | | Province | Postal Code |
| Is this a subsidized unit? | Yes | No | Is this unit in arrears |
| | | | Yes |
| | | | No |
| Contact Information | | | |
| Home Phone () | Cell Phone () | Work Phone () | |
| Email: | Indicate your preferred method of contact: Email ___ Phone ___ | | |
| Notes – Are there any special notes about contacting you? | | | |
| Alternate contact name to leave a message | | Alternate daytime phone number () | Alternates Relationship to Applicant |
| Alternate contact email address: | | | |
| Do you give permission to discuss your application with your alternate contact? * | | Yes | No |

Other Information - Current Living Situation

| | | | | | |
|---|-----|------|-----------------------------------|-----------|--|
| What is your current living situation? Please select one. | | | | | |
| Co-own | Own | Rent | Staying with a friend or relative | Temporary | Homeless/hostel, hotel (explain living situation)* |

Current Residence

| | | |
|---|--|------------------------------------|
| Please provide information regarding your current landlord | | |
| Landlord's full name | | Landlord's telephone number () |
| Landlord's apartment number | Landlord's street address (street number, street name, street direction) | |
| Landlord's city | Landlord's province | Landlord's postal code |
| Date you moved into your current residence (yyyy/mm/dd) | How much rent do you pay? | How much do you pay for utilities? |

Previous Tenancy in Social Housing Accommodations in Ontario

| | | | |
|---|--|--|--------------------------------|
| Have you previously resided in social housing in Ontario such as a non-profit, co-operative, housing corporation, rent supplement unit, federal projects or Aboriginal housing? | | Yes | No |
| If Yes specify: | | | |
| Applicant Name (Last & First Name) | | Name of other household member 16+ (Last & First Name) | |
| Occupancy date from (yyyy/mm/dd) | | Occupancy date to (yyyy/mm/dd) | |
| Name of Social Housing Provider | | Social housing provider's telephone number () | |
| Housing Provider's street address (street number, street name, street direction, unit number) | | | |
| Housing Provider's city | | Housing Provider's province | Housing Provider's postal code |
| Are there arrears/rent owing on this residence? | | | No |

Previous Address(es)

Please list all the addresses where you have lived for the past 5 years (prior to your current)

Name *: _____

| | | | |
|-----------------------------|--|----------------------------|---------------------------------|
| Apartment number | Street address (street number, street name, street direction) | Date moved IN (yyyy/mm/dd) | |
| City | Province | Postal code | Date moved OUT (yyyy/mm/dd) |
| Landlord's full name | | | Landlord's telephone number () |
| Landlord's apartment number | Landlord's street address (street number, street name, street direction) | | |
| Landlord's city | Landlord's province | Landlord's postal code | |

Name *: _____

| | | | |
|-----------------------------|--|----------------------------|---------------------------------|
| Apartment number | Street address (street number, street name, street direction) | Date moved IN (yyyy/mm/dd) | |
| City | Province | Postal code | Date moved OUT (yyyy/mm/dd) |
| Landlord's full name | | | Landlord's telephone number () |
| Landlord's apartment number | Landlord's street address (street number, street name, street direction) | | |
| Landlord's city | Landlord's province | Landlord's postal code | |

Name *: _____

| | | | |
|-----------------------------|--|----------------------------|---------------------------------|
| Apartment number | Street address (street number, street name, street direction) | Date moved IN (yyyy/mm/dd) | |
| City | Province | Postal code | Date moved OUT (yyyy/mm/dd) |
| Landlord's full name | | | Landlord's telephone number () |
| Landlord's apartment number | Landlord's street address (street number, street name, street direction) | | |
| Landlord's city | Landlord's province | Landlord's postal code | |

All Household Members / Co-Applicant(s) / Dependent (s) Details

List the name of all persons, who will be living in the rent-geared-to-income unit. Only the persons listed as members of this household can live in the subsidized unit. If additional names are required, please provide the information on a separate sheet.

Relationship to primary applicant includes – child, friend, grandchild, grandparent, parent, spouse, sibling, other relative, other

| | | | | | |
|---|------------|-----------------------------------|---|----------------------------|-------------------------|
| Last Name | First Name | Relationship to Primary Applicant | Gender | Date of Birth (yyyy/mm/dd) | Social Insurance Number |
| | | | | | |
| Status in Canada* Canadian Citizen__ Landed immigrant __ Refugee or Refugee claimant __ Applied for permanent residence__ Other (specify) | | | | | |
| Marital Status Single__ Married__ Common law__ Divorced __ Widowed__ Other __ | | | What is your preferred language? English __ French __ | | |
| Last Name | First Name | Relationship to Primary Applicant | Gender | Date of Birth (yyyy/mm/dd) | Social Insurance Number |
| | | | | | |
| Status in Canada* Canadian Citizen__ Landed immigrant __ Refugee or Refugee claimant __ Applied for permanent residence__ Other (specify) | | | | | |
| Marital Status Single__ Married__ Common law__ Divorced __ Widowed__ Other __ | | | What is your preferred language? English __ French __ | | |
| Last Name | First Name | Relationship to Primary Applicant | Gender | Date of Birth (yyyy/mm/dd) | Social Insurance Number |
| | | | | | |
| Status in Canada* Canadian Citizen__ Landed immigrant __ Refugee or Refugee claimant __ Applied for permanent residence__ Other (specify) | | | | | |
| Marital Status Single__ Married__ Common law__ Divorced __ Widowed__ Other __ | | | What is your preferred language? English __ French __ | | |
| Last Name | First Name | Relationship to Primary Applicant | Gender | Date of Birth (yyyy/mm/dd) | Social Insurance Number |
| | | | | | |
| Status in Canada* Canadian Citizen__ Landed immigrant __ Refugee or Refugee claimant __ Applied for permanent residence__ Other (specify) | | | | | |
| Marital Status Single__ Married__ Common law__ Divorced __ Widowed__ Other __ | | | What is your preferred language? English __ French __ | | |

Co-Applicant Details if Different than Applicant

| | | | | | |
|--|-----|--|---|-------------------|--------------------------------------|
| Current Address | | | | | |
| Apartment Number | | Current Address (street number, street name, street direction) | | | |
| City | | | Province | | Postal Code |
| Is this a subsidized unit? | Yes | No | Is this unit in arrears | Yes | No |
| Contact Information | | | | | |
| Home Phone () | | Cell Phone () | | Work Phone () | |
| Email: | | | Indicate your preferred method of contact: Email ____ Phone ____ | | |
| Notes – Are there any special notes about contacting you? | | | | | |
| Alternate contact name to leave a message | | | Alternate daytime phone number () | | Alternates Relationship to Applicant |
| Alternate contact email address: | | | | | |
| Do you give permission to discuss your application with your alternate contact? * | | | Yes | | No |

Housing Requirements

Please indicate if any of the following apply to you or the household members listed on the application.

Application for Special Priority – Victims of Domestic Violence and Human Trafficking

I/We currently live in or have moved from an unsafe or abusive relationship.

Please select one of the following statements that best reflects your situation:

I am applying for Special Priority status because I am currently living with a person who is abusing me or a member of the household and I intend to separate permanently.

Yes ___ No ___

I am applying for Special Priority status because I am a survivor of human trafficking.

Yes ___ No ___

I am applying for Special Priority status because I previously lived with the abuser, have lived apart from the abuser for less than three months and I intend to separate permanently.

Yes ___ No ___

You will need to complete a Request for Special Priority Status for Abuse form and provide documentation verifying you resided with the abusive individual in the past three (3) months

A Confirmation of Abuse Form will be required with a letter of support verifying the abuse.

Application for Urgent Status

Please check off one or more of the following reasons:

| Reason | Check all that apply |
|--|-----------------------------|
| I reside in a hostel/shelter, on the street | |
| My home has been destroyed by fire or natural disaster | |
| My home has been condemned by the municipality and I have an Order of the Court or the Landlord and Tenant Board to vacate | |
| I currently reside in an institution (e.g. hospital, long term care facility) and I cannot be released until suitable housing is found | |
| My child/children are at risk of apprehension or will not be returned by a child protection agency due to not having adequate housing | |

Complete a Request for Urgent Status Form explaining your situation

A Confirmation of Urgent Status Form will be required with documentation verifying your situation

Support Services

Are you currently in receipt of support services? Yes ___ No ___ If "Yes", from what Agency: _____

If you require support services in order to reside independently, the applicant(s) is responsible to ensure that these support services are in place prior to moving into the unit. Confirmation will be required from support service agencies prior to being housed.

Modified Unit

I/We require a wheelchair accessible/modified unit for any of the following reasons:

| Reason | Check all that apply |
|---|-----------------------------|
| Wheelchair accessibility | |
| Visual/hearing devices | |
| Roll in shower | |
| Elevator access | |
| Grab bars | |
| Accessible parking | |
| Second bedroom to store substantial medical equipment or for an overnight attendant | |
| Other (Please Specify) | |

An Attending Physician's Report or an Additional Bedroom Form is required to verify this statement.

Housing Preferences

I/we am applying for the following: Senior Only ___ Non Senior ___ No Preference ___

I/we wish to apply for the following size of unit

The number of bedrooms granted is determined by the Service Manager, and is based on household composition. The household will qualify for **only one size unit** (i.e. one, two, three, four or five bedroom). Households may not be on the wait list for certain buildings if there is no eligible sized units within the building selected. Households are unable to choose specific floors, units or amenities.

| | | | | | |
|----------|-----------|-----------|-----------|-----------|-----------|
| Bachelor | 1 Bedroom | 2 Bedroom | 3 Bedroom | 4 Bedroom | 5 Bedroom |
|----------|-----------|-----------|-----------|-----------|-----------|

| | |
|---|---|
| Type of preferred accommodation: Any___ Townhome__ Apartment__ | |
| Can you climb stairs: Yes___ No ___ | Parking required: Yes ___ No __ Handicapped __ |
| Is a baby expected? No __ Yes___ If yes, provide verification and date expected * | |
| Do you share custody of the children listed in this application? Yes ___ No ___ If yes, please provide custody documents. | |
| Did you apply for housing within one year of entering Canada Yes ___ No___ If yes when did you enter Canada (yyyy/mm/dd)* | Is the applicant or co-applicant 16 years old? Yes ___ No___ |
| Do all household members reside in present accommodation? Yes _____ No _____ If no, explain. | |

NOTE – It is the responsibility of the applicant to ensure that the unit meets their needs regarding parking, washer, dryer, fridge, stove etc.

Statement of Monthly Income

All monthly income is all amounts received **BEFORE DEDUCTIONS (gross amount)** for all persons/family members who will live in the unit. **ALL SOURCES MUST BE DELCARED.** Supporting documentation must be provided to confirm eligibility for rent-geared-to-income assistance. Information will be need to be updated at least once a year.

.....
 (GST/Child Tax Benefit /Trillium Payments are **NOT** to be included as a monthly source of income.)

| INCOME SOURCES See Appendix A – Source of Income and Income Producing Assets | GROSS MONTHLY TOTAL (BEFORE DEDUCTIONS) | | |
|--|---|--------------|-----------------------|
| | APPLICANT | CO-APPLICANT | OTHERS ON APPLICATION |
| Ontario Works (Social Assistance) | \$ | \$ | \$ |
| Ontario Disability Support Program (ODSP) | \$ | \$ | \$ |
| Full/Part Time Employment | \$ | \$ | \$ |
| Employment Insurance (E.I.) | \$ | \$ | \$ |
| Workplace Safety and Insurance Benefits (W.S.I.B.) | \$ | \$ | \$ |
| Old Age Security (O.A.S.) | \$ | \$ | \$ |
| Provincial Guaranteed Annual Income System (GAINS) | \$ | \$ | \$ |
| Canada Pension Plan (C.P.P.) | \$ | \$ | \$ |
| Private Pension/Pension from other countries/Disability Pension | \$ | \$ | \$ |
| Student Grants/Allowance/Band Allowance | \$ | \$ | \$ |
| Ontario Student Assistance Program (O.S.A.P.) | \$ | \$ | \$ |
| Child Support/Alimony | \$ | \$ | \$ |
| Other Income (specify): | \$ | \$ | \$ |

Statement of Assets

List all income and non-income assets owned by you for all persons/family members who will live in the unit. **ALL SOURCES MUST BE DELCARED.** Information will be need to be updated at least once a year.

| ASSET TYPE See Appendix A – Source of Income and Income Producing Assets | VALUE | | |
|--|-----------|--------------|-----------------------|
| | APPLICANT | CO-APPLICANT | OTHERS ON APPLICATION |
| Bank, Trust Company, Credit Union (savings & chequing) | \$ | \$ | \$ |
| Stocks, Bonds, GIC's, Debentures, Term Deposits, etc. | \$ | \$ | \$ |
| RRSP, Annuities, RRIFs, TFSA | \$ | \$ | \$ |
| Rent Revenue | \$ | \$ | \$ |
| Business Assets | \$ | \$ | \$ |
| Monies owed to you over \$500.00 | \$ | \$ | \$ |
| Life Insurance Policies (interest earned & value) | \$ | \$ | \$ |
| Other Assets (specify): | \$ | \$ | \$ |

Do you or any other person listed on this application own property – i.e. house, farm, land, cottage, etc.

Yes ___ No ___

If YES, indicate the type of property, address and estimated value:

Have you or any other person listed on this application transferred assets? Yes ___ No___

If YES, indicate the type of property, address, estimated value and date transferred:

Release and Consent

Here is your legal agreement with us. Please read it carefully, and sign in the spaces below. All people 16 years of age and older who are going to live with you must sign this form.

1. I understand there are laws that allow the City of Greater Sudbury Housing Registry to collect personal information about me.
2. I understand that the City of Greater Sudbury Housing Registry will use the information I give them to see if I qualify for the housing I have applied for, to see if I continue to qualify for rent-geared-to- income assistance and to see how much assistance I am eligible to receive.
3. I allow the City of Greater Sudbury Housing Registry to give the information on this form and any attachments to the social services offices, other municipal service managers or district social services administration boards, housing providers, without further notice to me, if the information is necessary for the purpose of making decisions or verifying eligibility for assistance under the Housing Services Act, 2011, the Ontario Works Act, 1997, the Ontario Disability Support Program Act, 1997, or the Day Nurseries Act.
4. I allow the City of Greater Sudbury Housing Registry to give the information on this form and any attachments to the Government of Canada, a department, ministry, or agency of it, without further notice to me if the information is necessary for the purpose of administering or enforcing the Income Tax Act (Canada) or the Immigration Act.
5. I allow the City of Greater Sudbury Housing Registry to give the information on this form and any attachments to any government or body with whom the housing providers in my area of preference has made an agreement under the Housing Services Act, 2011, without further notice to me, for the purpose of conducting research related to a social benefit program, social housing, or rent-geared-to-income assistance program.
6. I understand that any information on this form and any attachments given by the City of Greater Sudbury Housing Registry to a body listed above is confidential and will only be given in accordance with the Housing Services Act, 2011 and associated Regulations.
7. I understand that I am giving my consent and authorization to all housing providers in my area of preference to complete a credit check and complete landlord references.

For convenience, this Agreement may be executed and delivered in counterparts by facsimile or by email transmission of the executed Agreement scanned in a Portable Document Format (PDF file) to the extent such electronic execution is permitted under Ontario’s Electronic Commerce Act, 2000, S.O. 2000, c. 17. Each instrument when executed in counterpart, scanned and delivered shall be deemed an original and collectively all such instruments shall constitute the Agreement to be valid and binding upon the parties. Any party executing this Agreement and transmitting it via facsimile or email using PDF shall immediately upon request provide an originally signed counterpart of this Agreement, provided however, that any failure to provide such originally signed counterpart shall not constitute a breach of this Agreement.

“ Personal information contained in this form or in attachments is collected by the City of Greater Sudbury Housing Registry pursuant to the Housing Services Act, 2011, the Freedom of Information and Protection of Privacy Act (R.S.O. 1990 c.F31.) or the Municipal Freedom of Information and Protection of Privacy Act (R.S.O. 1990 c.M.56). This information may be used to determine eligibility for housing applied to, continuation of housing and may be used for the appropriate rent-geared-to-income charge.”

Date: _____ Applicant signature: _____

Date: _____ Applicant signature: _____

Date: _____ Applicant signature: _____

Date: _____ Applicant signature: _____

Date: _____ Applicant signature: _____

Declaration

1. I attest that everything I/we have written in this application is correct and complete
2. I understand that all information I/we give to the City of Greater Sudbury Housing Registry will belong to them and they will give my information to the housing providers I have chosen.
3. By choosing Email, I am acknowledging, based on your own policy, that any inquiries with respect to the personal information contained for any person I listed in this application may take the form of electronic data exchanges and that applicants and co-applicants agree to receive notices and documents by email at the email addresses included in this application.
4. If something on this application is incorrect or not true, the City of Greater Sudbury Housing Registry or the housing providers I have applied to may request additional information, may cancel my application or both and I may be prohibited from re-applying for assistance for a minimum period of two (2) years under the Housing Services Act, 2011
5. I understand that only the people I have listed on this application form may live with me in subsidized housing.
6. I understand that the City of Greater Sudbury Housing Registry will use the information I give them to see if I qualify for the housing I have applied for, to see if I continue to qualify for rent-geared-to-income assistance, and to see how much assistance I am eligible to receive.
7. I attest that I am in Canada legally.
8. Before I can receive housing, I understand that I must pay back or make arrangements to pay any money I owe to any subsidized housing project.
9. I understand that I must re-apply once I have accepted a rent-geared-to-income unit if I wish to continue to be included on the rent-geared-to-income centralized wait list.
10. I understand that my application will be removed from the centralized wait list if I surpassed the maximum refusal count.

Date: _____ Applicant signature: _____

Date: _____ Applicant signature: _____

Date: _____ Applicant signature: _____

Date: _____ Applicant signature: _____

Date: _____ Applicant signature: _____

Appendix A - Source of Income and Income Producing Assets

EXAMPLES OF POSSIBLE SOURCES OF INCOME (Domestic or Foreign)






















| | | |
|--|--|--|
| <p>Pensions and Allowances</p> <ul style="list-style-type: none"> • Old Age Security (OAS) • Guaranteed Income Supplement (GIS) • Guaranteed Annual Income Supplement (GAINS) • Canada Pension Plan (CPP)/Quebec Pension Plan • Social Security (other countries)Widow’s Pension | <ul style="list-style-type: none"> • Company Pension • Private Pension • Public Service Pension • Civilian War Pension • Disability Pension War Veterans Allowance (DVA) | <ul style="list-style-type: none"> • War Veterans Allowance (other countries) • Military/Militia/Civil Defence Allowances • Canada Manpower Retraining Allowance • Training Allowances |
| <p>Income Producing Assets</p> <ul style="list-style-type: none"> • Farm property which produces income • Real estate (residential, commercial, farmland, cottage, mobile home) which produces rental income | <ul style="list-style-type: none"> • Savings accounts (bank, trust company, credit union), annuities, Guaranteed Investment Certificates, stocks or shares, bonds, debentures, mortgages, loans, notes, term deposits | <ul style="list-style-type: none"> • Licence which produces income (i.e. Taxi Licence) • Business interest which produces income |
| <p>Non-Income Producing Assets</p> <ul style="list-style-type: none"> • Life Insurance (with a cash surrender value) • Registered Retirement Savings Plan (unless locked-in) | <ul style="list-style-type: none"> • Real estate (house, condominium, summer cottage, farmland, commercial or vacant land) in any country collection of, or investments in, other valuable non-income producing assets (i.e. coins, stamps, antiques, art, etc.) | <ul style="list-style-type: none"> • Business asset which does not produce income • Non-interest bearing chequing accounts |
| <p>OTHER SOURCES OF INCOME</p> <ul style="list-style-type: none"> • Employment (full-time, part-time, casual, seasonal, odd jobs) • Self-employment (child care, music teacher, business) • Tips, gratuities • Vacation pay • Workers’ Compensation payments • Insurance payments • Provincial or Municipal payments • Ontario Works (OW) • Ontario Disability Support Plan (ODSP) | <ul style="list-style-type: none"> • Employment Insurance Commission payments • Payments under compensation for Victims of Crime Act • Payments from official Guardian or Public Trust • Payments from Children’s Aid Society or Catholic Children’s Aid • Separation payments • Alimony payments/Support Payments (for spouse or child) • Support from relatives or other source | <ul style="list-style-type: none"> • Mortgage income • Immigration allowance • Student grants |

PROJECT SELECTION SHEET












March 2026



| | | | |
|---|--|-----------------------------------|---|
| LEGEND | All Families, senior, couples, singles | Apt Apartment | GSHC Greater Sudbury Housing Corporation |
| Modified Unit  | Seniors - over 65 | T.H. Townhouse | |
| Elevator  | | Semi-D Semi-Detached House | |
| | | Single House | |

SUDBURY - SENIORS









| Social Housing Provider | Telephone number | Project Name & Address | Target | Number of Units | Unit Size | Type | Number of modified units | Additional information |
|---|-------------------|------------------------|---------|-----------------|-----------|--|---|--|
| GSHC | Tel: 705-674-8323 | 1052 Belfry Ave. | Seniors | 100 | 1 BR | Apt  | | utilities included |
| GSHC Rent Supplement | Tel: 705-674-8323 | 111 Larch Street | 60+ | n/a | 1 BR | Apt  | | 50+ if disabled utilities included |
| GSHC | Tel: 705-674-8323 | 1310 Sparks Street | Seniors | 14 | 1 BR | Apt.  | (5)  | utilities included smoke-free |
| All Nations Family Housing Corporation | Tel: 705-671-1634 | 518 Morris Street | Seniors | 32 | 1 BR | Apt.  | (2)  | utilities included |
| Casa Bella Senior Citizen Apartments Inc. | Tel: 705-675-8080 | 340 McLeod Street | Seniors | 46 | 1 BR | Apt.  | (2)  | pay electric heat & hydro smoke-free |
| | | | | 14 | 2 BR | Apt.  | | |
| La Societe Nolin de Sudbury Inc. | Tel: 705-673-6976 | 160 Leslie Street | Seniors | 32 | 1 BR | Apt.  | (1)  | utilities included smoke-free |
| | | | | 8 | 2 BR | Apt.  | | |
| Rockview Seniors Co-operative Homes | Tel: 705-523-0856 | 211 Caswell Drive | Seniors | 35 | 1 BR | Apt.  | (1)  | utilities included smoke-free no cats/dogs |
| | | | | 5 | 2 BR | Apt.  | (1) | |
| Solidarity Lodge Seniors' Apartments | Tel: 705-670-1085 | 111 Notre Dame Avenue | Seniors | 30 | 1 BR | Apt.  | (1)  | utilities included |
| | | | | 3 | 2 BR | Apt.  | | |
| Ukrainian Centre of Sudbury | Tel: 705-674-1649 | 30 Notre Dame Avenue | Seniors | 29 | 1 BR | Apt.  | (2)  | pay electric heat & hydro |
| | | | | 6 | 2 BR | Apt.  | | |

SOUTH END / LOCKERBY






| Social Housing Provider | Telephone number | Project Name & Address | Target | Number of Units | Unit Size | Type | Number of modified units | Additional information |
|---|-------------------|------------------------|--------|-----------------|-----------|--|---|--|
| GSHC Rent Supplement | Tel: 705-674-8323 | 1147 Ramsey View Court | All | n/a | 1 BR | Apt  | | utilities included |
| GSHC | Tel: 705-674-8323 | 1920 Paris Street | All | 100 | 1 BR | Apt  | | utilities included |
| GSHC | Tel: 705-674-8323 | 1960 "A" Paris Street | All | 100 | 1 BR | Apt  | | utilities included |
| GSHC | Tel: 705-674-8323 | 1960 "B" Paris St. | All | 30 | 1 BR | Apt.  | | utilities included |
| | | | | 121 | 2 BR | Apt.  | | |
| | | | | 35 | 3 BR | Apt/T.H. | | |
| | | | | 12 | 4 BR | T.H. | | |
| | | | | 4 | 5 BR | T.H. | | |
| GSHC Rent Supplement | Tel: 705-674-8323 | 884 Regent St. | All | n/a | 1 BR | Apt | | utilities included |
| Guhbawin Co-operative Housing Corporation | Tel: 705-523-1306 | 2120 Wayne Road | All | 16 | 1 BR | T.H. | (2)  | utilities included smoke-free |
| | | | | 17 | 2 BR | T.H. | | |
| | | | | 17 | 3 BR | T.H. | | |
| Habitat Boreal | Tel: 705-566-0000 | Scattered | All | 1 | 3 BR | Semi-D | | pay own utilities |
| Isles of Innisfree Non-Profit Homes Inc. | Tel: 705-671-1908 | 216 Copper St. | All | 24 | 1 BR | Apt | (2)  | pay heat/hydro and hot water tank rental |
| | | | | 28 | 2 BR | T.H. | (1)  | |
| | | | | 5 | 3 BR | T.H. | | |
| | | | | 1 | 4 BR | T.H. | | |
| Shamrock Non-Profit Homes Inc. | Tel: 705-523-3307 | 50 Walford Road | All | 23 | 1 BR | Apt  | (1)  | utilities included |
| | | | | 23 | 2 BR | Apt  | | |
| | | | | 8 | 3 BR | Apt | | |

| | | | |
|---------------|--|-----------------------------------|---|
| LEGEND | All Families, senior, couples, singles | Apt Apartment | GSHC Greater Sudbury Housing Corporation |
| Modified Unit |  Seniors - over 65 | T.H. Townhouse | |
| Elevator |  | Semi-D Semi-Detached House | |
| | | Single House | |

DOWNTOWN

| Social Housing Provider | Telephone number | Project Name & Address | Target | Number of Units | Unit Size | Type | Number of modified units | Additional information |
|---|-------------------|------------------------|--------|-----------------|-----------|--|---|--|
| All Nations Family Housing Corporation | Tel: 705-671-1634 | 518 Morris St. | All | 32 | 2 BR | Apt  | (2)  | utilities included |
| Centreville 1 & 2 Non-Profit Housing Inc. | Tel: 705-673-3000 | 285 Lourdes St. | All | 56 | 1 BR | Apt  | (8)  | utilities included |
| Raiffeisen Co-operative Homes Inc. | Tel: 705-674-6818 | 151 Mont Adam | All | 28 | 1 BR | Apt | (2)  | pay heat/hydro and hot water tank rental |
| | | | | 17 | 2 BR | Apt/T.H. | | |
| | | | | 15 | 3 BR | T.H. | | |
| Raiffeisen II Non-Profit Homes Inc. | Tel: 705-586-3035 | 117 Mont Adam | All | n/a | 1 BR | Apt  | | smoke-free |
| Silo Co-operative Homes | Tel: 705-677-0020 | 139 Pearl Street | All | 12 | 1 BR | Apt | (1)  | pay heat/hydro and hot water tank rental |
| | | | | 8 | 2 BR | Apt | | |
| | | | | 16 | 3 BR | Apt | | |
| GSHC | Tel: 705-674-8323 | 159 Louis Street | All | 64 | 2 BR | Apt | | apts - utilities included THs - pay hydro |
| | | | | 24 | 3 BR | Apt/T.H. | | |
| | | | | 15 | 4 BR | T.H. | | |
| | | | | 6 | 5 BR | T.H. | | |
| GSHC | Tel: 705-674-8323 | 166 Louis Street | All | 30 | Bach. | Apt | | utilities included |
| | | | | 20 | 1 BR | Apt | | |
| GSHC Rent Supplement | Tel: 705-674-8323 | 263 Brady Street | All | n/a | 1 BR | Apt  | | utilities included |

FLOURMILL / DONOVAN





| Social Housing Provider | Telephone number | Project Name & Address | Target | Number of Units | Unit Size | Type | Number of modified units | Additional information |
|-------------------------------|-------------------|--------------------------|--------|-----------------|-----------|---|---|----------------------------------|
| Ashwood Co-operative Homes | Tel: 705-524-2155 | 905 Cambrian Heights | All | 17 | 2 BR | T.H. | (2)  | utilities included |
| | | | | 23 | 3 BR | T.H. | | |
| | | | | 4 | 4 BR | T.H. | | |
| Lighthouse Non-Profit Homes | Tel: 705-524-0485 | 675 Bruce Avenue | All | 6 | 1 BR | Apt | (1)  | utilities included smoke-free |
| | | | | 14 | 2 BR | T.H. | | |
| | | | | 20 | 3 BR | T.H. | | |
| Prism Co-operative Homes Inc. | Tel: 705-524-5900 | 775 Cambrian Heights Dr. | All | 30 | 2 BR | Apt/T.H. | (2)  | utilities included |
| | | | | 18 | 3 BR | T.H. | | |
| | | | | 2 | 4 BR | T.H. | | |
| Unicorn Non-Profit Homes Inc. | Tel: 705-524-6693 | 725 Bruce Avenue | All | 6 | 1 BR | T.H. | (2)  | utilities included |
| | | | | 25 | 2 BR | T.H. | | |
| | | | | 25 | 3 BR | T.H. | | |
| | | | | 4 | 4 BR | T.H. | | |
| Habitat Boreal | Tel: 705-566-0000 | Scattered | All | 1 | 3 BR | Single | | pay own utilities |
| GSHC | Tel: 705-674-8323 | Cabot/Hearne/Burton | All | 20 | 2 BR | Apt | | pay hydro |
| | | | | 24 | 3 BR | T.H./Semi-D | | |
| | | | | 8 | 4 BR | Semi-D | | |
| GSHC | Tel: 705-674-8323 | 715 Burton Avenue | All | 20 | 1 BR | Apt | | utilities included |
| GSHC | Tel: 705-674-8323 | 720 Bruce Avenue | All | 250 | 1 BR | Apt  | | utilities included |
| GSHC | Tel: 705-674-8323 | 744 Bruce Avenue | All | 45 | 2 BR | T.H. | | pay hydro |
| | | | | 93 | 3 BR | T.H. | | |
| | | | | 12 | 4 BR | T.H. | | |



| | | | |
|---|--|-----------------------------------|---|
| LEGEND | All Families, senior, couples, singles | Apt Apartment | GSHC Greater Sudbury Housing Corporation |
| Modified Unit  | Seniors - over 65 | T.H. Townhouse | |
| Elevator  | | Semi-D Semi-Detached House | |
| | | Single House | |

NEW SUDBURY

| Social Housing Provider | Telephone number | Project Name & Address | Target | Number of Units | Unit Size | Type | Number of modified units | Additional information |
|-------------------------|-------------------|------------------------|--------|-----------------|-----------|---------------|--------------------------|--|
| Habitat Boreal | Tel: 705-566-0000 | Scattered Units | All | 1 | 2 BR | Semi-D | | pay heat/hydro and hot water tank rental |
| | | | | 14 | 3 BR | Semi-D/Single | | |
| | | | | 4 | 4 BR | Semi-D | | |
| GSHC | Tel: 705-674-8323 | 1200 Attlee Street | All | 24 | 2 BR | T.H. | | pay hydro |
| | | | | 16 | 3 BR | T.H. | | |
| | | | | 29 | 4 BR | T.H. | | |
| | | | | 7 | 5 BR | T.H. | | |
| GSHC | Tel: 705-674-8323 | 1528 Kennedy Street | All | 8 | Bach. | Apt | | utilities included |
| | | | | 12 | 1 BR | Apt | | |
| GSHC | Tel: 705-674-8323 | 1778 Lasalle Blvd. | All | 16 | 3 BR | T.H. | | pay hydro |
| | | | | 11 | 4 BR | T.H. | | |
| | | | | 3 | 5 BR | T.H. | | |
| GSHC Rent Supplement | Tel: 705-674-8323 | 183 Mitchell Street | All | n/a | 1 BR | Apt | | utilities included |
| | | | | n/a | 2 BR | Apt | | |
| GSHC | Tel: 705-674-8323 | 1950 Lasalle Blvd. | All | 20 | 2 BR | T.H. | | pay hydro |
| | | | | 74 | 3 BR | T.H. | | |
| | | | | 12 | 4 BR | T.H. | | |
| GSHC Rent Supplement | Tel: 705-674-8323 | 721 Lasalle Blvd. | All | n/a | 1 BR | Apt | | utilities included |
| | | | | n/a | 2 BR | Apt | | |

MINNOW LAKE




| Social Housing Provider | Telephone number | Project Name & Address | Target | Number of Units | Unit Size | Type | Number of modified units | Additional information |
|---|-------------------|------------------------|--------|-----------------|-----------|----------|---|--|
| Co-operative Homes of Prosperity and Equality | Tel: 705-525-2276 | 80 Barry St. | All | 23 | 1 BR | Apt | (1) | pay heat/hydro and hot water tank rental |
| | | | | 11 | 2 BR | Apt/T.H. | (1)  | |
| | | | | 10 | 3 BR | T.H. | | |
| | | | | 2 | 4 BR | T.H. | | |
| Habitat Boreal | Tel: 705-566-0000 | 2146 Highgate | All | 12 | 2 BR | T.H. | (1)  | utilities included |
| | | | | 5 | 2 BR | Apt | | |
| | | | | 4 | 3 BR | Apt | | |
| Habitat Boreal | Tel: 705-566-0000 | Scattered | All | 1 | 2 BR | Single | | pay own utilities |
| | | | | 6 | 3 BR | Semi-D | | |
| Horizon Co-operative Homes Inc. | Tel: 705-525-2307 | 159 Second Avenue | All | 8 | 1 BR | Apt/T.H. | (2) | utilities included |
| | | | | 24 | 2 BR | Apt/T.H. | (2)  | |
| | | | | 25 | 3 BR | T.H. | (2) | |
| | | | | 3 | 4 BR | T.H. | | |
| Palace Place Co-operative Homes Inc. | Tel: 705-524-9517 | 129 Second Avenue | All | 32 | 2 BR | T.H. | (3)  | utilities included |
| | | | | 18 | 3 BR | T.H. | | |
| GSHC | Tel: 705-674-8323 | 241 Second Avenue | All | 36 | 3 BR | T.H. | | pay hydro |
| | | | | 26 | 4 BR | T.H. | | |
| | | | | 8 | 5 BR | T.H. | | |
| GSHC | Tel: 705-674-8323 | 491 Camelot Drive | All | 20 | 2 BR | T.H. | | pay hydro |
| | | | | 22 | 3 BR | T.H. | | |

| | | | |
|---|--|-----------------------------------|---|
| LEGEND | All Families, senior, couples, singles | Apt Apartment | GSHC Greater Sudbury Housing Corporation |
| Modified Unit  | Seniors - over 65 | T.H. Townhouse | |
| Elevator  | | Semi-D Semi-Detached House | |
| | | Single House | |










ONAPING FALLS

| Social Housing Provider | Telephone number | Project Name & Address | Target | Number of Units | Unit Size | Type | Number of modified units | Additional information |
|--|-------------------|----------------------------|--------|-----------------|-----------|--------------|--------------------------|------------------------|
| Place Cartier Habitation A but Non-Lucratif de Dowling | Tel: 705-855-9185 | 69 Douglas Cresc., Dowling | All | 6 | 1 BR | Stacked T.H. | | utilities included |
| | | | | 9 | 2 BR | T.H. | | |
| | | | | 5 | 3 BR | T.H. | | |

WALDEN

| Social Housing Provider | Telephone number | Project Name & Address | Target | Number of Units | Unit Size | Type | Number of modified units | Additional information |
|--------------------------------------|-------------------|----------------------------|---------|-----------------|-----------|---|---|----------------------------------|
| Walden Municipal Housing Corporation | Tel: 705-692-7243 | 5 Coronation Blvd., Lively | Seniors | 24 | 1 BR | Apt  | (1)  | utilities included smoke-free |
| | | | | 6 | 2 BR | Apt | | |
| GSHC Rent Supplement | Tel: 705-674-8323 | 1 Coronation Blvd., Lively | All | n/a | 1 BR | Apt  | | utilities included |
| GSHC | Tel: 705-674-8323 | 240 "B" St., Lively | All | 26 | 1 BR | Apt | | utilities included |

RAYSIDE BALFOUR




| Social Housing Provider | Telephone number | Project Name & Address | Target | Number of Units | Unit Size | Type | Number of modified units | Additional information |
|---|-------------------|---------------------------------|---------|-----------------|-----------|---|---|---|
| Azilda Seniors Citizen's Non-Profit Housing Corp. | Tel: 705-983-5517 | 10 Champlain St. Azilda | Seniors | 16 | 1 BR | Apt | (1)  | utilities included smoke-free |
| | | | | 4 | 2 BR | Apt | | |
| Balfour Co-operative Homes Inc. | Tel: 705-855-8997 | 3604 Keith Ave., Chelmsford | All | 21 | 2 BR | Semi-D | (2)  | pay heat, hydro & hot water tank rental |
| | | | | 20 | 3 BR | Semi-D | | |
| | | | | 4 | 4 BR | Semi-D | | |
| Friendship Place d'Amitie Residence (Rayside Balfour) | Tel: 705-855-1685 | 296 Cote Ave. Chelmsford | All | 9 | 1 BR | Modified | (9)  | utilities included smoke-free |
| | | | | 9 | 2 BR | Modified | | |
| | | | | 2 | 3 BR | Modified | | |
| Habitat Boreal | Tel: 705-566-0000 | Azilda Chelmsford | All | 1 | 2 BR | Single | | pay own utilities |
| | | | | 1 | 3 BR | Semi-D/Single | | |
| La Co-operative d'Habitation Antigonish Inc. | Tel: 705-983-0515 | 429 Notre Dame Ave. W., Azilda | All | 5 | 1 BR | T.H. | (1)  | pay heat, hydro & hot water tank rental |
| | | | | 10 | 2 BR | T.H. | | |
| | | | | 15 | 3 BR | T.H. | | |
| Le Centre D'Habitation de Chelmsford Inc. | Tel: 705-855-0021 | 3512 John St., Chelmsford | All | 6 | 1 BR | Stacked T.H. | (1)  | utilities included |
| | | | | 30 | 2 BR | T.H. | | |
| | | | | 14 | 3 BR | T.H. | | |
| Place Bonne Entente des Aînés de Chelmsford | Tel: 705-855-1402 | 3545 Montpellier, Chelmsford | Seniors | 36 | 1 BR | Apt  | (2)  | utilities included smoke-free |
| | | | | 4 | 2 BR | Apt | | |
| Whitewater Seniors Residence (Legion 553) Inc. | Tel: 705-983-5230 | 15 Ellen St. Azilda | Seniors | 26 | 1 BR | Apt  | (2)  | utilities included smoke-free |
| | | | | 2 | 2 BR | Apt | | |
| GSHC | Tel: 705-674-8323 | 3553 Montpellier Rd. Chelmsford | All | 41 | 1 BR | Apt | | utilities included |

| | | | |
|---------------|--|-----------------------------------|---|
| LEGEND | All Families, senior, couples, singles | Apt Apartment | GSHC Greater Sudbury Housing Corporation |
| Modified Unit |  Seniors - over 65 | T.H. Townhouse | |
| Elevator |  | Semi-D Semi-Detached House | |
| | | Single House | |


CAPREOL

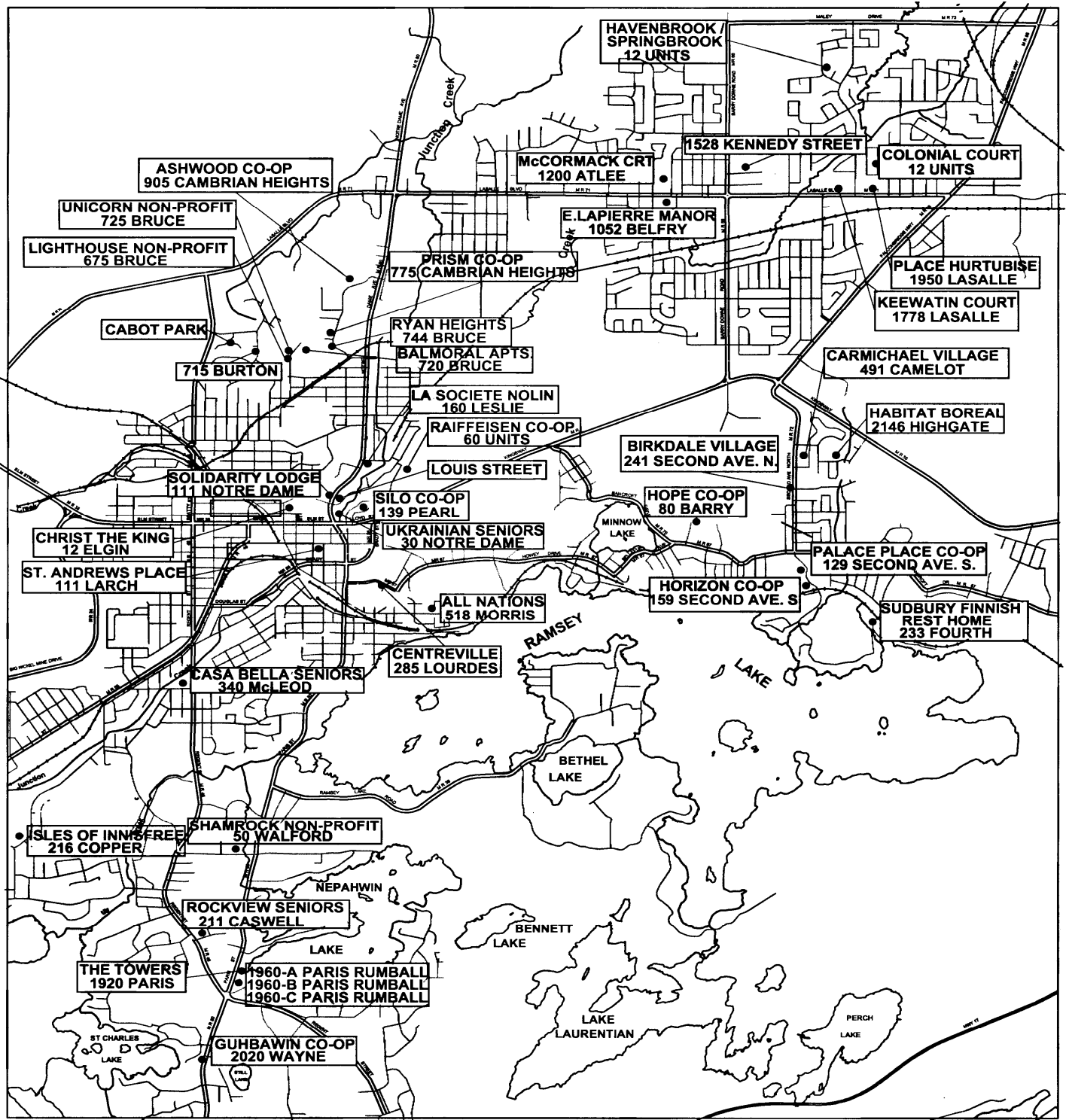
| Social Housing Provider | Telephone number | Project Name & Address | Target | Number of Units | Unit Size | Type | Number of modified units | Additional information |
|--|-------------------|---------------------------|---------|-----------------|-----------|------|--------------------------|--------------------------|
| Capreol Non Profit Housing Corporation | Tel: 705-858-3498 | 38 Coulson Ct. Capreol | Seniors | 18 | 1 BR | Apt. | | pay electric heat, hydro |
| | | | | 2 | 2 BR | Apt. | | |
| GSHC | Tel: 705-674-8323 | 27 Hanna Avenue | All | 20 | 1 BR | Apt. | | utilities included |

VALLEY EAST

| Social Housing Provider | Telephone number | Project Name & Address | Target | Number of Units | Unit Size | Type | Number of modified units | Additional information |
|--|-------------------|---------------------------------|---------|-----------------|-----------|----------|---|--|
| Habitat Boreal | Tel: 705-566-0000 | Hanmer Val Caron | All | 1 | 3 BR | Single | | pay own utilities |
| | | | | 2 | 3 BR | Single | | |
| La Societe Des Bons Amis de la Vallee Inc. | Tel: 705-897-2438 | 1699 St. Jean St., Val Caron | Seniors | 16 | 1 BR | Apt | (1)  | utilities included |
| | | | | 4 | 2 BR | Apt | | |
| Les Maisons Co-operative Val Caron Inc. | Tel: 705-897-1757 | 1845 Main St., Val Caron | All | 8 | 1 BR | Apt/T.H. | (1)  | utilities included no animals |
| | | | | 20 | 2 BR | T.H. | | |
| | | | | 10 | 3 BR | T.H. | | |
| | | | | 2 | 4 BR | T.H. | | |
| Maisons Co-operative St. Jacques | Tel: 705-969-7527 | 300 Christa Ct. Hanmer | All | 5 | 1 BR | T.H. | (2)  | pay heat, hydro & hot water tank rental |
| | | | | 28 | 2 BR | T.H. | | |
| | | | | 21 | 3 BR | T.H. | | |
| | | | | 1 | 4 BR | T.H. | | |
| GSHC | Tel: 705-674-8323 | 155 Lapointe St., Hanmer | All | 27 | 1 BR | Apt | | utilities included |

NICKEL CENTRE

| Social Housing Provider | Telephone number | Project Name & Address | Target | Number of Units | Unit Size | Type | Number of modified units | Additional information |
|------------------------------------|-------------------|-------------------------------|--------|-----------------|-----------|------------|---|--|
| Springhill Co-operative Homes Inc. | Tel: 705-693-7006 | 300A Springhill Dr. Garson | All | 4 | 1 BR | Apt/Semi-D | (1)  | pay heat, hydro & hot water tank rental |
| | | | | 17 | 2 BR | Semi-D | | |
| | | | | 9 | 3 BR | Semi-D | | |
| Habitat Boreal | Tel: 705-566-0000 | Garson | All | 1 | 3 BR | Single | | pay own utilities |
| GSHC | Tel: 705-674-8323 | 35 Spruce St. Garson | All | 24 | 1 BR | Apt | | utilities included |



CITY OF GREATER SUDBURY

