

Application for Housing – Near Market

Thank you for considering a Heartland Housing Foundation (HHF) Near-Market community as place to call home. If you meet the criteria listed below, your application may be accepted and reviewed. **IMPORTANT: HHF does not operate an emergency housing program.** There are chronological (first-come-first-serve) waitlists for each building. If you require emergency housing supports, please reach out to your local family and community services for assistance.

WHO IS ELIGIBLE TO APPLY?

- ☐ Adults 18 years of age or older
- ☐ Applicants not currently listed on the Government of Alberta's high-risk offender list
- ☐ Based on unit size, have a household annual income **equal to or less than** the thresholds listed below
- ☐ **HHF reserves the right to approve tenancies based on a sustainable rent-to-income ratio to ensure successful tenancy.** Applicants can visit <https://www.heartlandhousing.ca/allages-nearmkt-application-eligibility> for details

This 2025 income threshold table defines occupancy limits and the **maximum annual income a combined household can make** by the unit size applied for. These thresholds are reviewed annually by HHF.
HHF reserves the right to amend occupancy limits on a case-by-case basis.

| Unit Size | Studio | 1 Bedroom | 2 Bedrooms | 3 Bedrooms |
|---|------------------------------------|-------------------------------------|--------------------------------------|--------------------------------------|
| Minimum and Maximum Household Size by Suite | Min: 1 Occupant Max: 1 Occupant | Min: 1 Occupant Max: 2 Occupants | Min: 2 Occupants Max: 4 Occupants | Min: 3 Occupants Max: 6 Occupants |
| Maximum Annual Income | \$43,500 | \$51,500 | \$63,500 | \$72,000 |

COMMON Q&A'S

What is considered a household?

- We define a household to include the following:
 - *The spouse, common-law, or adult interdependent partner*
 - *Dependent(s) – A dependent includes a member of the household who is not self-supporting. A dependent is an individual under 25 years of age and related by blood, marriage, or adoption to another member of the household, or by virtue of an adult interdependent relationship.*
 - *Adults co-applying for housing who are none of the above*

I have a pet - can I bring it with me?

- There is a limit to **one** animal (in most instances) per household, and dogs must weigh 35lbs or less (at adult size). Approved pets are subject to a monthly pet fee. If your dog is a Registered Service Animal, they are not considered a pet and therefore are not subject to the size restriction.
- If you would like to apply to house your pet, a separate pet application (**AD0076**) with the animal's photo, license and up-to-date vaccination records are required. For your pet to be approved, they must fall under HHF's list of permissible pets. You can find a detailed list of approved pets with guidelines in our pet application.

What is the definition of a barrier-free unit?

- Barrier-free or adaptable homes have accessible building entrances without steps or changes in level. Units may also have wider clearances/doorways, walk-in showers with handheld shower heads & grab bars, barrier-free bathroom vanity, lowered light switches/thermostats, ceiling supports and lowered kitchen counters/cupboards with wall-ovens. **Not every barrier-free home will have every design element listed above.**

WHAT ARE THE STEPS TO FINDING YOUR NEW HOME?

Step 1 – Learn More About Your Options

To help you choose a community that is best suited for your household's needs, visit our website for floorplans, photos, and virtual tours (when available). Details about specific building features can be found at www.heartlandhousing.ca.

Step 2 – Completing the Application

- ☐ Complete the application (starting on page 3) and include important documents that will verify household income. To navigate what forms may be applicable to you, review the checklist on page 7.
- ☐ All applicants 22 years of age & older must submit their most recent Income Tax Notice of Assessment (NOA). If the primary applicant is under age 22, NOAs must still be submitted to verify household income. **Only send copies as originals will not be returned.**
- ☐ **IMPORTANT:** If you would like someone who will not be listed on this application as a household member to speak with HHF on your behalf (such as a friend or agency member), fill out the 'Consent to Release form'.
- ☐ **Each applicant is required to provide proof of identity:**
 1. For those 18 years of age or older, this can be a photocopy of your government issued ID (e.g. drivers' licence, residency card etc.). Your ID can be shown to staff if you are dropping off your application in person.
 2. For dependents, provide a copy of their provincial health care card, or birth certificate.

Step 3 – Submitting Your Application

- ☐ Mail, email or visit one of our two main locations that manage near-market buildings. Staff at our lodges accept applications and can answer any questions regarding the apartments in their portfolio.

| Muriel Ross Abdurahman Court | Silver Birch Court |
|---|--|
| Dr. Turner Lodge 9422 - 94 Avenue, Fort Saskatchewan, AB, T8L 0T7 PH: (780) 998-3321 murielcourt@heartlandhousing.ca | Silver Birch Place 914 Bison Way, Sherwood Park, AB, T8H 2C4 PH: (780) 400-3600 sbl@heartlandhousing.ca |

Step 4 – HHF Review of Your Application

Once we receive your application, a team member will review it. All applicants will be contacted upon receipt of their application within 5 business days. We will request any missing information and if you are eligible, set up a time to meet virtually, by phone or at one of our offices.

This review will give you further insight to your preferred apartment and help ensure it meets your needs. After this review, you will receive a letter confirming your status. If approved, you will be added to your selected first-come-first-serve waitlist(s).

A. HOW DID YOU HEAR ABOUT US?

- ☐ Website/Online Search
 ☐ Brochure
 ☐ Family & Community Services
 ☐ Other (please list) _____
- ☐ Referral (Current Tenant)
 ☐ Facebook or Social Media

B. APPLICANT INFORMATION

| SECTION 1: Contact Information | | |
|---|---|---|
| Legal Name(s) | PRIMARY APPLICANT | CO-APPLICANT (if applicable) |
| | First: | First: |
| | Last: | Last: |
| Pronoun | <input type="checkbox"/> She/Her <input type="checkbox"/> He/Him <input type="checkbox"/> They/Them | <input type="checkbox"/> She/Her <input type="checkbox"/> He/Him <input type="checkbox"/> They/Them |
| Date of Birth | Day / Month / Year | Day/ Month / Year |
| What is your preferred method of contact? <input type="checkbox"/> Phone <input type="checkbox"/> Email <input type="checkbox"/> Other: _____ | | |
| Phone Number(s) | | |
| Phone # Type | <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Mobile | <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Mobile |
| Primary Email(s) | | |
| SECTION 2: Current & Previous Rental Information | | |
| <p>In this section, please list the details of your rental history for the past two years, starting with where you live now. If you need more space, feel free to attach additional pages with the same information. If you do not have recent rental history, please write N/A. If you are currently renting, complete your consent to Landlord Reference Check on page 6.</p> | | |
| CURRENT ADDRESS: | | |
| <p>Dates of Occupancy (DD/MM/YYYY – DD/MM/YYYY):</p> | | |
| PREVIOUS ADDRESS: | | |
| <p>Dates of Occupancy (DD/MM/YYYY – DD/MM/YYYY):</p> | | |
| Previous Landlord Name: | | Previous Landord Phone: |
| Previous Landlord Email: | | |
| Do you require access to an assigned parking stall? <input type="checkbox"/> No <input type="checkbox"/> Yes | | |
| Do you have a pet? <input type="checkbox"/> No <input type="checkbox"/> Yes – Please fill out a pet application in addition to this form. | | |
| Do you have a service dog? <input type="checkbox"/> No <input type="checkbox"/> Yes – Please submit a copy of your Service Dog ID Card with your pet application. | | |
| <p>A service dog <u>is not considered a pet</u>, but it must have the appropriate documentation to be recognized as a service dog. For more information on what qualifies as a service dog, please visit https://www.alberta.ca/service-dog-information.aspx.</p> | | |

SECTION 3: Income Information

To verify that your household's total income remains under the income threshold for the unit size you are applying for, all primary applicants and household members **age 22 and older** must:

- Submit the **most recent Income Tax Notice of Assessment (NOA)** from Canada Revenue Agency showing the amount on Line 15000.

When we receive applications that indicate a high-risk tenancy based on a rent to income ratio of 50% or more, we will contact you to verify sources of income, expenses and available supports. We will establish if a tenancy can be sustained based on your household income and offer resources or referrals to other housing options if necessary. Applications indicating a high risk tenancy, in terms of a high rent-to-income ratio, will only be approved in limited scenarios on a case-by-case basis.

| | PRIMARY APPLICANT | HOUSEHOLD MEMBER (1) | HOUSEHOLD MEMBER (2) | HOUSEHOLD MEMBER (3) |
|---|-------------------|----------------------|----------------------|----------------------|
| List each total household member's income from Line 15000 of their NOA. | \$ _____ | \$ _____ | \$ _____ | \$ _____ |

SECTION 4: Household Information

In this section:

- Provide information as it appears on government issued identification for all dependents who will be living with you.
- If you are expecting the size of your family to change within the year, include documentation to support this change such as confirmation of adoption, kinship care, or any other situation that would add to your family size.
- If you need more space, feel free to attach additional pages.

| First Name(s) | Last Name | Date of Birth (DD/MM/YYYY) | Gender | Relationship to Primary Applicant |
|---------------|-----------|-------------------------------|--------|-----------------------------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

C. SELECT YOUR PREFERRED LOCATION(S)

Near-Market Apartments: Fixed rental rates are set annually 10% to 20% below comparable market rents. These apartments are designed to improve housing affordability for households with annual incomes below thresholds defined on page 1.

1. Do you require a barrier-free or adaptable unit? (definition listed on page 1) ☐ Yes ☐ No

2. Please select the locations you would like to apply for and your preferred bedroom size below.

☐ Silver Birch Court (Sherwood Park)

☐ Muriel Ross Abdurahman Court (Fort Saskatchewan)

**Muriel Ross Abdurahman Court only: barrier-free & adaptable units are available in 1, 2, and 3 bedroom sizes and most are on the main floor)*

☐ 1-bedroom (barrier-free options in 1-bedroom units only)

☐ Studio ☐ 1-bedroom

☐ 2-bedroom

☐ 2-bedroom

☐ 3-bedroom

☐ 3-bedroom

D. APPLICANT'S DECLARATION & CONSENT

All applicants 18 years and older **must sign** the application. The application cannot be processed without these signatures.

1. I/we authorize Heartland Housing Foundation (HHF) to make any inquiries necessary to any government office organization, agency, or individual for the purpose of verifying the information provided in this application.
2. I/we authorize HHF to contact and receive information from current and/or previous landlords to complete reference checks for the purpose of assessing suitability as a prospective tenant.
3. This personal information is being collected in accordance with sections 12(1)(b) and 13(1)(c) of the **Protection of Privacy Act (POPA)** for the purposes of administering Heartland Housing Foundation (HHF) programs, services, and operational activities. It is protected under POPA and may only be used or disclosed as authorized by law. Questions about the collection or use of your personal information can be directed to Heartland Housing Foundation's Privacy Coordinator at 780-400-3500 or by email at info@heartlandhousing.ca.
4. I/we authorize HHF to contact me for statistical purposes. All information will remain anonymous, and I/we can decline participation at any time.
5. I/we understand that:
 - This application is not an agreement on the part of HHF to provide me/us with housing.
 - Failing to respond to requests by HHF for additional information of documentation may result in the application being cancelled.
 - Providing false information to HHF may result in the application being cancelled or no longer being eligible for services.
 - If I/we are being considered for an available unit, HHF may need additional information to ensure my/our information is up to date and that our household still qualifies.
 - It is my/our responsibility to keep HHF updated with any changes to my/our household circumstances including but not limited to changes in contact information, housing composition, income or rental information.

(Signature of Primary Applicant)

(Signature of Co-Applicant)

Date (DD/MM/YYYY)

E. EMAIL CONSENT

1. I/we agree to correspond with Heartland Housing Foundation (HHF) through email, and hereby:
 - Authorize HHF to communicate with me/us by email for any correspondence, requests for information, or any other documents as necessary,
 - Understand that this authorization remains in effect unless canceled in writing,
 - Understand that I may cancel this authorization in writing at any time which may affect the timeliness of any updates to my application, and
 - Understand that email is not a secure form of communication and interception by a third party is possible and that the confidentiality of any email message cannot be ensured.

(Signature of Primary Applicant)

(Signature of Co-Applicant)

Date (DD/MM/YYYY)

Near Market Housing

CONSENT TO LANDLORD REFERENCE CHECK

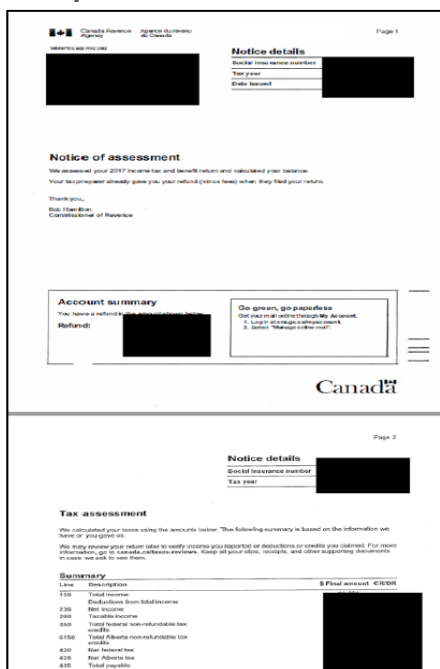
| SECTION ONE – APPLICANT | | |
|--|-----------------------------------|-------------------------------|
| First Name(s) | Last Name | Preferred Name (if different) |
| SECTION TWO – AUTHORIZATION LETTER | | |
| <p>This is to identify that I, _____, in accordance with sections 12 (1)(b) and 13 (1)(c) of the Protection of Privacy Act (POPA), hereby authorize my landlord to speak with the staff from Heartland Housing Foundation conducting this reference check for the purpose of;</p> <ul style="list-style-type: none"> Determining my (and my household's) eligibility for housing; and Administering the program in which I (and my household) am/are participating in. <p>Heartland Housing Foundation may ask the landlord you list the following questions:</p> <ul style="list-style-type: none"> <i>Can you confirm that the applicant rented from you? Please list the start and end dates of their tenancy.</i> <i>Does the applicant pay their monthly rent on time?</i> <i>Does the applicant reasonably take care of the rental property?</i> <i>If a past tenancy, was the unit clean and in good order when the applicant left?</i> <i>Was the applicant disruptive to other tenants or neighbors?</i> <i>Does anyone else live with the applicant?</i> <i>Would you rent to this tenant again? If no, why?</i> | | |
| Landlord Name: | Phone: | Email: |
| Tenancy Start Date (DD/MM/YYYY): | Tenancy End Date (if applicable): | |
| SECTION THREE – AUTHORIZATION SIGNATURE | | |
| I understand that this authorization will remain valid from this date forward unless revoked by me in writing. | | |
| Applicant Name | Applicant Signature | Date (DD/MM/YYYY) |

This information is being collected in accordance with sections 12(1)(b) and 13(1)(c) of the **Protection of Privacy Act (POPA)** for the purposes of administering Heartland Housing Foundation (HHF) programs, services, and operational activities. It is protected under POPA and may only be used or disclosed as authorized by law. Questions about the collection or use of your personal information can be directed to Heartland Housing Foundation's Privacy Coordinator at 780-400-3500 or by email at info@heartlandhousing.ca.

Near Market Apartment APPLICATION CHECKLIST

| | |
|--|-------------------------------------|
| | <input checked="" type="checkbox"/> |
| REQUIRED DOCUMENTATION | |
| 1. A copy of your Income Tax Notice of Assessment (NOA) showing line 15000 (all adults age 22 & older) | |
| 2. If you cannot access your NOA, submit proof of income via paytubs or the Employer Verification Form | |
| 3. Government-Issued Identification (1 per person) | |
| <p>Each household member is required to provide proof of identity:</p> <ul style="list-style-type: none"> For those 18 years of age or older, provide a photocopy of your ID (e.g. drivers' licence, identification card or residency card etc.). Your ID can be shown to staff if you are dropping off your application in person. For dependents, provide a copy of their provincial health care card, or birth certificate. Copies of your household's personal identification <u>will not be kept on file</u>. Once verified, copies will be securely destroyed. | |
| SUPPORTING DOCUMENTS (IF APPLICABLE) | |
| 1. Consent to Release Personal Information Form | |
| 2. Pet Application Form | |
| Staff Use Only | |
| ID visually verified by: | Signature: |

Sample Notice of Assessment



Canada Revenue Agency Agency document
Notice details
Notice of assessment
Account summary
Tax assessment

Sample Government Issued ID



Alberta IDENTIFICATION CARD
No 0005-04440
Exp 05 JUN 2023
SAMPLE, Sally
12345 Somewhere Street
Anywhere AB T5N 2F5
DOB 05 JUN 1988
Sex F Eyes Blu Hair Bro
Ht 157 cm Wt 54 kg
Iss 17 MAY 2018
0005-04440

Alberta Personal Health Card
Please protect your card.
Personal Health Number
00000-0000
John Martin Doe
Gender M Birthdate 1900/09/00
Year Mo Day
Alberta Government
You are eligible for health insurance coverage provided you are a resident of Alberta.