

Change of Address

Important: To avoid delays, you must attach a copy of your lease agreement, letter of intent or deposit receipts.

A. Last Name: _____ First Name: _____
 Member ID#: _____ Date of Birth: _____
 Caseworker Name and Number: _____

B. New Address Information

Move Date: _____
 Address: _____ Apt. #: _____
 City: _____ Postal Code: _____
 Phone: _____ - _____ - _____

1. Type of Accommodation (Proof of this expense must be attached):

- | | |
|--------------------------------|--|
| <input type="checkbox"/> Room | <input type="checkbox"/> Apartment |
| <input type="checkbox"/> House | <input type="checkbox"/> Room & Board (Meals included) |

Amount: \$_____ per month

2. Additional Monthly Costs (Proof of these expenses must be submitted to your caseworker within 30 days)

- | | | | |
|---|---------|----------------|----------------|
| <input type="checkbox"/> Hydro | \$_____ | Equal Billing? | ___ Yes ___ No |
| <input type="checkbox"/> Gas | \$_____ | Equal Billing? | ___ Yes ___ No |
| <input type="checkbox"/> Tenant Insurance | \$_____ | | |
| <input type="checkbox"/> Other | \$_____ | Details: | _____ |

Are you sharing these accommodations with anyone else ___ Yes ___ No

If yes, please specify their name / relationship to you:

Name / Relationship _____ / _____

Name / Relationship _____ / _____

3. Property Owner / Landlord Information

Please note: the Employment & Social Services Department reserves the right to contact your landlord to confirm the information you have supplied.

See over →

Notice with Respect to the Collection of Personal Information

(Freedom of Information and Protection of Privacy Act) (Municipal Freedom of Information and Protection of Privacy Act)

This information is collected under the legal authority of the *Ontario Disability Support Program Act*, 1997, sections 5, 10, 45 & 46 or the *Ontario Works Act*, 1997, sections 7, 8, 15, 57 & 58 for the purpose of administering Government of Ontario social assistance programs. For more information contact: Supervisor – Support Services at 519-255-5200

Avis concernant la collecte de renseignements personnels

(Loi sur l'accès à l'information et la protection de la vie privée/Loi sur l'accès à l'information municipale et la protection de la vie privée) Les articles 5, 10, 45 et 46 de la *Loi de 1997 sur le Programme ontarien de soutien aux personnes handicapées*, ou les articles 7, 8, 15, 57 et 58 de la *Loi de 1997 sur le programme Ontario au travail* autorisent la présente collecte de renseignements aux fins de l'application des programmes de l'aide sociale du gouvernement de l'Ontario: Pour de plus amples renseignements, veuillez communiquer avec le superviseur des services de soutien à 519-255-5200 dans votre bureau d'Ontario au Travail.

Landlord Name: _____

Landlord Address: _____

Landlord Phone: _____

Have you agreed to a pay direct to your landlord? _____

Tenant Signature: _____ Date: _____

Co-Resident Information

APPLICANTS AND RECIPIENTS WHO ARE LIVING WITH ANOTHER ADULT

This information will help you understand the Ontario Works and the Ontario Disability Support Program (ODSP) rules about living with another adult. These rules can affect your eligibility for social assistance and the amount of assistance you receive.

Depending on the nature of your relationship with the adult you are living with, you may be able to receive social assistance as a single person, single parent or as a couple. If you are living with another adult in a marriage-like relationship, you and the person you are living with will be assessed for social assistance as a couple.

How does living with another adult affect eligibility for social assistance?

If you are living with another adult you will be considered to be spouses or same-sex partners if:

- you are married to each other
- you have applied together for social assistance and declared yourselves as spouses
- the adult you are living with is required to support you or any of your children under a court order or legal agreement
- you and the adult you are living with have parented a child together
- you have lived together for at least three months and are assessed as living in a marriage-like relationship based on the financial, social and family-like aspects of the relationship

If you are considered to be spouses or same-sex partners, you will be treated as a couple for social assistance purposes. This means that the income and assets of both partners will be taken into account when determining if you are eligible for social assistance.

If you are living with another adult and are not considered to be spouses or same-sex partners, *only your* income and assets are taken into account when determining your eligibility for social assistance.

How does Ontario Works or the ODSP assess if I am living in a marriage-like relationship?

The assessment is based on your responses to a Questionnaire. The Questionnaire asks some basic questions about the financial, social and family-like aspects of your relationship with the adult with whom you are living.

What happens when I have completed the Questionnaire?

The purpose of the Questionnaire is to assess if you and the adult with whom you are living have a marriage-like relationship. If the relationship is assessed to be marriage-like, you will be considered as a couple, in determining eligibility for social assistance.

Note that your situation is always looked at individually and you can provide any additional information that helps explain your answers. If you disagree with the assessment, you can request a review.

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