

Canada

 Ontario



2024 ONTARIO RENOVATES PROGRAM LANDLORD/TENANT APPLICATION FORM

Applications will be accepted on a first come, first served basis until funding is depleted.

Funding is limited, apply early!

ANY WORK UNDERTAKEN BEFORE RECEIVING APPROVAL FROM THE CITY OF LONDON FOR THE ONTARIO RENOVATES PROGRAM WILL NOT BE ELIGIBLE FOR CONSIDERATION OR APPROVAL FOR FUNDING.

Please submit your fully completed application forms to:

City of London, Municipal Housing Development
Ontario Renovates Program
Citi Plaza, 2nd Floor
355 Wellington Street, Suite 248
London, ON N6A 3N7

For more information or for assistance in completing your application, please reach out to our Housing Coordinator at 519-661-CITY (2489) Ext. 5523 or via email at housing@london.ca

This program is made possible through funding provided by the Federal and Provincial governments. It aims to extend financial assistance to low to moderate-income households who own a home in the City of London or County of Middlesex. The program is designed to assist in repairing homes to meet acceptable standards and enhance accessibility through modifications and/or adaptations. The primary demographic target includes individuals aged 60 or older and/or persons with disabilities.

FACT SHEET

Potential Financial Assistance:

A one-time grant up to \$5,000 is available for home accessibility modification(s). The grant is non-repayable as long as the homeowner(s) commits to occupying the dwelling for at least six (6) months, starting from the first day of the month following the final payment for home accessibility modification(s).

Eligibility Criteria:

- A tenant who is a senior aged 60 or older and/or persons with disabilities.
 - Households that fulfill the following conditions:
 - Annual gross income for all household members 18 years or older is at or below \$95,000.
 - Total household assets for all household members 18 years or older are at or below \$30,000 (*including TFSAs, GICs, Bonds, Mutual Funds, Savings Accounts, etc.*).
 - A landlord with a tenant who meets the Ontario Renovates Program criteria that requires unit accessibility modification(s).
 - The rental unit must be located in the City of London or Middlesex County.
- Owners of properties, who have received Residential Rehabilitation Assistance Program (RRAP) loans or any other CMHC funding, may be eligible.

Approved Accessibility Modifications:

Examples of eligible accessibility modifications for rental units include:

- Ramps
- Fire Alarms
- Chair and Bath Lifts
- Raised Toilets
- Handrails and Grab Bars
- Accessible Shower Stalls
- Levered Handles on Doors and Faucets
- Personal Emergency Response System
- Height Adjustment to Counter Tops

Please be aware that some of the accessibility modification listed above may not be considered without supporting documentation, at the discretion of the City of London staff (i.e., Medical Form).

Program Requirements:

To be considered for the Ontario Renovates Program, please complete and sign the application form, ensuring all necessary supporting documentation is included:

- The applicant (i.e., tenant) to submit a copy of one piece of government-issued photo identification (i.e., driver's licence, passport, citizenship, or Ontario photo card.)
- Pictures depicting the proposed modification(s) accompanied by three (3) work estimates.
- A copy of the property owner's most recent Property Tax Assessment.
- If you are not the property owner but an authorized agent, please submit a document clearly identifying your authority.
- A copy of the tenant's signed lease, tenancy agreement, or rent receipt showing the current rent.
- A copy of the 2023 Canada Revenue Agency (CRA) Notice of Assessment showing Line 15000 for all tenant(s)/household members 18 years and older. (Please refer to Section 6, Household Income).
- A list of assets (i.e., TFSAs, GICs, and Bonds, Mutual Funds, Savings Accounts etc.) for all tenant(s)/household members 18 years and older. Exclude RRSP, RDSP, RESP and RRIF statements (Please refer to Section 7, Household Assets).

Rental Unit Requirements:

The tenant's unit must be modest, and the rent cannot exceed the Average Market Rent (AMR) in the City of London and Middlesex County, outlined as follows:

- Bachelor: \$863/month
- One bedroom: \$1,127
- Two bedrooms: \$1,400
- Three bedrooms: \$1,617

PLEASE KEEP FOR YOUR REFERENCE

OVERVIEW OF THE ONTARIO RENOVATES PROGRAM PROCESS – LANDLORD/TENANT	
Step	Description
1.	The City of London will review your Ontario Renovates Application within thirty (30) business days of receiving it, ensuring completeness, and conducting an initial eligibility screening based on household income, assets, and other applicable criteria.
2.	For home modification(s), a City staff member may contact you to schedule an inspection if the estimates and costs need further review.
3.	Upon approval, you will receive a Conditional Approval Letter confirming the approved work and the assistance value. For home modifications, homeowners will complete and sign two (2) Promissory notes , returning one (1) original signed copy to the City of London. Copies of all documents will be provided to homeowner(s).
4.	Upon return of the signed Promissory Note, a Final Approval Letter will be issued, specifying the approved contractor(s), assistance value, and advising work can begin. <i>Note: Home modification(s) are to be completed within thirty (30) days following the date of the Final Approval Letter.</i>
5.	Once the work is finished, the tenant will fill out the Request for Payment Form , submitting it along with pictures of the completed work and all original invoices/receipts from the contractor(s) to the City of London to initiate the review and reimbursement process. Invoices/receipts must be addressed to the tenant(s), and contain the contractors name, address, business number, and itemized project cost. A City of London staff member may conduct a final site visit to confirm completion before concluding the reimbursement process.
6.	Payments will be issued to the tenant(s) within 15 business days upon receiving the completed Request for Payment Form, pictures of the work, and all original invoices/repairs. <i>Note: Any amount exceeding the established funding maximum is the responsibility of the tenant(s).</i>

PROJECTS NOT ELIGIBLE FOR ONTARIO RENOVATES PROGRAM FUNDING	
	<ul style="list-style-type: none"> • Any work initiated or completed before receiving approval for the program. • Construction lacking the necessary local municipal building permit approval. • Cosmetic renovations and repairs (i.e., driveway paving, painting, and flooring). • Landscaping, maintenance, or installation of solar panels. • Central air conditioning. • Accessibility modifications to any commercial or non-residential component of properties. • Supportive care such as nursing care and special equipment required for therapeutic purposes, whether permanently fixed or not. • Projects receiving capital support from the Ministry of Health and Long-Term Care or the Ministry of Community and Social Services. • Community or Social Housing as defined under the <i>Housing Services Act 2011</i>. • Applicants who had previously received Ontario Renovates funding in the past. • Households that have received previous funding from the Affordable Housing Program or Off-Reserve Aboriginal Housing (Trust) Program.

2024 ONTARIO RENOVATES PROGRAM LANDLORD/TENANT APPLICATION FORM

- Please print clearly.
- Complete all sections in full where applicable.
- Accessibility modifications initiated or completed on the property prior to approval are not eligible for the Ontario Renovates Program funding.

The personal information collected on this form is collected under the authority of the *Housing Services Act, 2011, S.O. 2011, c. 6, Sched. 1*, and will be used to determine suitability and funding eligibility under the City of London's Ontario Renovates Program. Questions about this collection should be addressed to the Manager of Housing Services at 355 Wellington St. Suite 248 2nd Floor, London ON N6A 3N7, Tel: 519-661-2489 Ext. 2488, Email: housing@london.ca.

1. TENANT/APPLICANT TYPE

- Senior Aged 60+
- Person(s) with Disabilities

2. PROPERTY OWNERS/LANDLORD

- I am the:
- Property Owner(s)/Landlord
- Owner's Authorized Agent

Property Owner (1) Last Name:	First Name:	Phone #:
-------------------------------	-------------	----------

Property Owner (2) Last Name:	First Name:	Phone #:
-------------------------------	-------------	----------

Authorized Agent - Full Name (If applicable):	Phone #:
---	----------

Organization Name and Address (*i.e., property management, etc.*)

- Yes, I have attached a copy of a document clearly identifying I am an authorized agent.**

3. RENTAL UNIT INFORMATION

Apt/Unit #:	Address:
-------------	----------

City:	Province:	Postal Code:
-------	-----------	--------------

Has the property requiring work previously received a renovation grant or loan assistance? If yes, please provide the program name, date, case number, and nature of the repairs:

Yes
 No

Program Name: _____

Date: _____

Case Number: _____

Nature of Repairs: _____

Type of Home:

Detached/Single family home Semi-detached Townhouse Duplex Apartment

Other (Please specify): - _____

Age of the home? _____ years

Is the dwelling on a reserve? Yes No

Are the property taxes up to date? Yes No

Yes, I/We have attached a copy of the Property Tax Assessment showing payment is up to date.

4. TENANT INFORMATION (APPLICANT)

Tenants Last Name: _____		First Name: _____	Date of Birth: (Year-Month-Day) ____ / ____ / ____
Home Phone #: _____	Cell #: _____	Email Address: _____	

How many residents are residing in the home? _____

What is the current monthly rent for the unit? \$ _____

Number of Bedrooms in the unit: One Two Three Four+

Yes, I have attached a copy of one piece of government-issued photo identification (i.e., driver's license, passport, citizenship, or Ontario photo card).

Yes, I have attached a signed lease, tenancy agreement, or rent receipt showing the current rent amount.

5. SCOPE OF ACCESSIBILITY MODIFICATION(S)

Accessibility Modification(s): Estimated Cost and Preferred Contractor \$ _____

Any accessibility modification(s) requested must be reasonably related to a household member's physical disability. Additional medical information may be needed to support your request.

Please note - therapeutic care, supportive care, and portable aid equipment are not eligible.

Please check all that apply and submit pictures showing the proposed modification(s):

Ramps Raised Toilets Levered Handles on Doors and Faucets

Fire Alarms Handrails and Grab Bars Personal Emergency Repronse System

Chair and Bath Lifts Accessible Shower Stalls Height Adjustments to Counter Tops

Other (please specify): _____

Please briefly describe why the modification(s) are needed: *(If more room is needed, please attach an additional piece of paper)*

***Please submit three (3) vendor estimates with HST numbers to complete this application. Vendor estimates with business numbers only, may be considered on a case-by-case basis. ***

Yes, I have attached pictures showing the proposed modification(s).

6. TENANT(S) HOUSEHOLD INCOME

Enter the annual income for 2023 from your Canada Revenue Agency (CRA) Notice of Assessment, specifically on Line 15000, for all household members 18 years and older.

Include a copy of the 2023 Canada Revenue Agency (CRA) Notice of Assessment for all individuals listed below with his application.

Household Member	Annual Income <i>(Line 15000 of the CRA Notice of Assessment)</i>	Copy Attached
Tenant	\$	<input type="checkbox"/>
Household Member (18 years and older)	\$	<input type="checkbox"/>
Household Member (18 years and older)	\$	<input type="checkbox"/>
Household Member (18 years and older)	\$	<input type="checkbox"/>
Total Income from all Household Members (Maximum is \$95,000/year)	\$ _____	

7. TENANT(S) HOUSEHOLD ASSETS

List all liquid financial assets, including TFSAs, GICs, Bonds, Mutual Funds, Savings Accounts and/or other investments, for all household members 18 years and older.

Exclude RRSP's, RDSP's, RRIF's, RESP's, vehicles, and furniture from that list.

Type of Asset	Household Member	Asset Value
TFSAs		\$
GICs		\$
BONDS		\$
MUTUAL FUNDS		\$
SAVING ACCOUNT		\$
OTHER <i>(please specify)</i>		\$
Total Assets for all Household Members (Maximum is \$30,000)		\$ _____

8. THIRD PARTY SUPPORT (If applicable)

Did anyone assist in completing this form? Yes No

If yes, please select the appropriate box that describes the person who primarily provided assistance:

Medical Professional

Social Worker

Family/Friend/Neighbour

Other (please specify) _____

Name of the person who provided assistance:

Phone #:

Email:

I/We the applicant hereby authorize the City of London and/or its authorized representatives to contact the person who provided assistance in completing this form should clarification Yes No be necessary.

Tenant Signature

9. TERMS AND CONDITIONS

I/We acknowledge and understand the following Terms and Conditions shall apply to this application and, if assistance is approved, to any subsequent grant.

1. The City of London and/or its authorized representatives or agents may carry out the necessary inquiries to confirm the information provided in this application form.
2. Any work undertaken before receiving written confirmation of final approval from the City of London is not eligible for assistance.
3. The grant amount is based on the City of London's approved mandatory modification(s) costs.
4. The entire approved grant may only be utilized to fund the City of London's approved modification(s) in the identified rental dwelling mentioned in the Final Approval Letter.
5. The grant will be subject to the Terms and Conditions outlined in the Final Approval Letter and any related documentation (i.e., Promissory Note).
6. The Landlord must sign a Promissory Note, committing that the accessibility modification(s) work will not lead to a rent increase for the unit or an application to the Landlord and Tenant Board.
7. The Tenant will commit to occupying the rental unit for a minimum of six (6) months, beginning on the first day of the month after the final payment is issued.
8. In the event that any Terms and Conditions of the grant are not met, or if a false declaration is knowingly made, the City of London reserves the right to cancel the approval and/or recover any funds paid (plus interest).
9. Work must commence and be completed within 30 days from the date of the Final Approval Letter from the City of London.
10. Total tenant household assets (excluding RRSP's, RDSP's, RRIF's, and RESP's, vehicles, and furniture) cannot exceed \$30,000.

10. DECLARATION

1. I/We hereby confirm to the best of my/our knowledge, the information provided in this application is complete and accurate in every respect.
2. I/We hereby confirm I am/we are the property owner(s)/landlord, or the owner's authorized agent for the property being adapted.
3. I/We hereby authorize site visits of this property, as required, on the understanding that any site visits conducted by the City of London and/or its authorized staff person are for internal administrative purposes only and provide no guarantee or assurance of compliance with any applicable building codes or standards.
4. I/We hereby acknowledge that if my/our funding application is accepted, it will not apply to work commenced or completed on the rental unit prior to approval of funding from the City of London.
5. I/We hereby acknowledge that if the funding application is accepted I/we cannot claim the modification(s) for any Provincial tax rebate program.
6. I/We acknowledge that in the event a false declaration is knowingly made, the City of London shall have the right to cancel the approval and recover and funds paid (plus interest).
7. I have read, understood, and agree to the Terms and Conditions listed above.

Name of Landlord (Please print)	Signature	Date (yyyy/mm/dd)
Name of Tenant (Please print)	Signature	Date (yyyy/mm/dd)
Household Member (Please print)	Signature	Date (yyyy/mm/dd)

11. CHECKLIST FOR LANDLORD/TENANT

Please use this checklist to ensure all necessary documents are attached for a complete application.

Yes	*N/A	Item
<input type="checkbox"/>	<input type="checkbox"/>	Completed Application Form with all required signatures.
<input type="checkbox"/>	<input type="checkbox"/>	Pictures showing the proposed modification(s).
<input type="checkbox"/>	<input type="checkbox"/>	Three (3) work estimates with HST numbers for proposed modification(s). Vendor estimates with business numbers only, may be considered on a case-by-case basis.
<input type="checkbox"/>	<input type="checkbox"/>	A document clearly identifying an authorized agent on behalf of the homeowner(s).
<input type="checkbox"/>	<input type="checkbox"/>	Property Tax Assessment showing payment are up to date and the property valuation.
<input type="checkbox"/>	<input type="checkbox"/>	Copy of one piece of government-issued photo identification for applicant (tenant) (i.e., driver's licence, passport, citizenship, or Ontario photo card).
<input type="checkbox"/>	<input type="checkbox"/>	A signed lease, tenancy agreement, or rent receipt showing the current monthly rental amount.
<input type="checkbox"/>	<input type="checkbox"/>	Copies of 2023 Canada Revenue Agency (CRA) Notice of Assessment showing Line 15000 as verification of income for all tenant(s)/household members 18 years and older.
<input type="checkbox"/>	<input type="checkbox"/>	List of all household assets.

*Not Applicable

12. HOW DID YOU HEAR ABOUT THE ONTARIO RENOVATES PROGRAM?

To assist us in improving our community outreach, please indicate how you became aware of the Ontario Renovates Program by selecting the relevant option below:

Check all that apply	Source
<input type="checkbox"/>	Digital Billboard
<input type="checkbox"/>	Facebook/Twitter/Other Social Media
<input type="checkbox"/>	Radio/Newspaper
<input type="checkbox"/>	Family/Friends
<input type="checkbox"/>	Other: _____

