



Special Priority Application

In order to apply for Special Priority Status on the centralized waiting list, you must complete both parts of the Special Priority Application. These are:

1. Declaration of Abuse
2. Verification Record

This application must be completed in addition to the Application for Rent-Geared-to-Income (RGI) Housing Assistance.

What is Special Priority Status?

Households that are eligible for RGI assistance are on the centralized waiting list in the order that they apply. This means that the earliest applicants will be offered housing first.

However, you may be moved to a higher place on the centralized waiting list if you are currently living with someone who is abusing you, or have recently stopped living with someone who was abusing you or you are a victim of human trafficking. This is called Special Priority Status.

Special Priority Status is intended to help you separate permanently from the person who is abusing you. It applies to applicants whose personal safety is at risk, and does not apply to applicants who simply want to separate from someone because the relationship is not working.

Who is Eligible for Special Priority Status?

In order to qualify for Special Priority Status, you must first be eligible for RGI assistance. If you are eligible for RGI assistance, you may be given Special Priority Status on the waiting list if:

- You are currently living with someone who is abusing you or another person in your household.
- You used to live with someone who was abusing you or another person in your household, and stopped living with them **3 months ago or less**. In some circumstances, you may still be considered for Special Priority Status if you have been separated for longer than 3 months.
- You are a sponsored immigrant, and your sponsor is abusing you or another person in your household.
- You are a survivor of human trafficking and have exited trafficking within a period of 3 months or less.
- The abused member intends to live permanently apart from the abusing individual.

1. Declaration of Abuse

I DECLARE that I have been abused by:

Name of person

Relationship to person

I DECLARE that I intend to permanently live apart from this person and that (check all that apply): *

Date since I last lived with this person *

- I have not lived with this person since [date]
- I have never lived with this person
- I am currently living with this person
- This person is my Canada Immigration Sponsor
- I am a victim of human trafficking

Proof of joint residency with the abusing individual is a central element of special priority status. However, please note that proof of living with the abuser is not required for victims of human trafficking.

Required Documentation

Please attach verification or proof that you have lived with this person (*eg. copy of lease, rent receipts, utility bills, OW / ODSP stubs showing spousal relationship, joint bank accounts, CAS letter, school letter*) with both names on the verification. Cell phone, cable/satellite or internet documents are not accepted.

This requirement ensures the integrity of the program and that it is being offered to those intended. Please note this is not required for victims of human trafficking.

2. Verification Record

You must provide a Verification Record as proof of your Declaration of Abuse. The Verification Record is to be completed by a person who knows you and can confirm your Declaration of Abuse. A letter supporting the Declaration of Abuse must also be included.

Name of Special Priority Applicant

Name of Person completing Verification Record

Name of Your Organization

I DECLARE that I know the applicant in my professional role as a ...

- | | |
|---|--|
| <input type="checkbox"/> Doctor | <input type="checkbox"/> Lawyer |
| <input type="checkbox"/> Teacher | <input type="checkbox"/> Nurse |
| <input type="checkbox"/> Police officer | <input type="checkbox"/> Member of clergy |
| <input type="checkbox"/> Guidance counsellor | <input type="checkbox"/> Housing provider |
| <input type="checkbox"/> Registered social worker | <input type="checkbox"/> Registered social services worker |
| <input type="checkbox"/> Victim services worker | <input type="checkbox"/> Shelter worker |
| <input type="checkbox"/> Community health care worker | <input type="checkbox"/> Settlement services worker |
| <input type="checkbox"/> Community legal worker | <input type="checkbox"/> Community service worker |
| <input type="checkbox"/> Registered ECE worker | <input type="checkbox"/> Member of Colleges of Midwives |
| <input type="checkbox"/> Indigenous elder, traditional person, knowledge keeper or indigenous midwife | <input type="checkbox"/> Psychotherapist, registered psychotherapist or registered mental health therapist |

OR, I DECLARE that I am not working in one of the above roles, but I have direct knowledge that the applicant has been subject to abuse.

- Yes

I DECLARE that:

- The abuser has made one or more attempts to kill the applicant or another member of the household.
- The abuser has used a weapon against the member or another member of the household.
- The abuser has physically injured the applicant.
- The abuser has forced the applicant to engage in sexual activity against his or her will.
- The abuser has forced the applicant to perform degrading or humiliating acts.
- The abuser has failed to provide or has withheld the necessities of life.
- The abuser has threatened to kill the applicant or another member of the household.
- The abuser has threatened to use a weapon against the applicant or another member of the household.
- The abuser has threatened to physically harm the applicant or another member of the household.
- The abuser has destroyed or injured the applicant's property or threatened to destroy or injure the applicant's property.
- The abuser has intentionally killed or injured pets or threatened to intentionally kill or injure pets.
- The abuser has threatened to harm or remove the applicant's children from the household.
- The abuser has threatened to prevent the applicant from having access to their children.
- The abuser has threatened to withdraw their immigration sponsorship.
- The abuser has threatened to have the applicant deported.
- The abuser has enforced social isolation upon the applicant.
- The abuser has terrorized the applicant.
- The abuser has stalked or harassed the applicant or another member of the household.
- The abuser has undue or unwarranted control over the applicant's daily personal or financial activities.
- There has been police intervention as a result of the abuse.
- The abuser has otherwise threatened the applicant by doing (please state). **
- The abuser has led the applicant to fear his or her own safety by doing (please state). **

**** Please state**

I have attached as Verification:

- A letter supporting the above-noted statements which includes a description of the circumstances indicating that the applicant is being or has been abused

I have attached as Verification (required only if you do not work in a professional capacity with the applicant):

- A declaration of the truth of this record as administered by a commissioner for taking affidavits which supports the above declaration including a description of the circumstances indicating that the applicant is being or has been abused

I DECLARE that the information I have provided in this form and any supporting documentation is an accurate account of the applicant's situation.

Signature of person completing Verification Record

Date of Signature

Contact Information

The applicant making the request for Special Priority must inform Northumberland County Housing Services of the way in which they would like to receive information relating to their request.

Please contact me directly.

 Yes No

Safe Phone Number

Safe Mailing Address

If you would like us to contact someone else, please provide the following:

Name of Contact

Safe Phone Number

Safe Mailing Address

Other Details

Request and Consent

I REQUEST Special Priority on the waitlist for Rent-Geared-to-Income (RGI) assistance.

I CONSENT to the disclosure to Northumberland County of the Verification Record and any other information or documents that may be requested to verify this Declaration in order to determine my eligibility for Special Priority Status.

I CONSENT to the destruction of the Verification Record and all supporting documentation if I become ineligible for RGI assistance or become housed.

Applicant's Name (please print)

Applicant's Signature

Date of Signature

Completion Checklist

- Part 1 and 2 of Special Priority Application are completed in full
- Verification of living with abuser attached (i.e. copy of lease, rent receipts, utility bills, OW / ODSP stubs showing spousal relationship, joint bank accounts, CAS letter, school letter) with both names on the verification. **Please note this is not required for victims of human trafficking.
- A letter supporting the Verification Record from person completing Part 2 of Special Priority Application
- Application for Rent-Geared-to-Income (RGI) Housing completed in full and attached

Notice with Respect to the Collection of Personal Information
Municipal Freedom of Information and Protection of Privacy Act.

This information is collected under the legal authority of the *Housing Services Act, 2011* for the purpose of determining special priority on the waitlist for RGI assistance.

For Office Use

Special Priority Request received on this date:

Special Priority Request reviewed on this date:

Special Priority Request Decision

Approved

Denied

Date of Special Priority Request Decision

Signature

Date of Signature

Thank You

Please print and submit a signed copy of your application to Northumberland County Community and Social Services. Applications can be submitted by:

- email to: css@northumberlandcounty.ca
- mail or deliver it in-person to 555 Courthouse Road, Cobourg, ON K9A 5J6