

**Tel: 416-222-9945   Fax: 416-222-2895   Email: [cdnlegionhomes@gmail.com](mailto:cdnlegionhomes@gmail.com)**

- Page 1 of 3

# CANADIAN LEGION TORONTO HOMES – LEASE APPLICATION

## Affordable Housing for Veterans and their Spouse/Partner NOT Assisted Living

4-4715 Bathurst Street, Toronto, ON M2R 1X1

Tel: 416-222-9945 Fax: 416-222-2895 Email: [cdnlegionhomes@gmail.com](mailto:cdnlegionhomes@gmail.com)

**13. SERVICE DATA:** (If both have served, give both Regimental Number and Branch of Service)

Regimental Number \_\_\_\_\_ Branch of Service \_\_\_\_\_

Corp or Unit \_\_\_\_\_ Where Served \_\_\_\_\_

If female Veteran, state name under which you served \_\_\_\_\_

**14. Membership in Veterans' Organization (Branch) \_\_\_\_\_ #: \_\_\_\_\_**

**15. Person or persons who will guarantee rent in case of emergency or illness and be responsible for removing all personal possessions should the apartment become vacated.**

Name: \_\_\_\_\_ Signature \_\_\_\_\_ Phone No: \_\_\_\_\_

**16. In case of emergency who to notify: \_\_\_\_\_**

Address \_\_\_\_\_

Relationship \_\_\_\_\_ Phone No. \_\_\_\_\_

**17. Your present Doctor's Name \_\_\_\_\_**

Phone No: \_\_\_\_\_

**18. Will you and/or your spouse/partner (if applicable) be able to look after yourselves and maintain your apartment should you become a tenant. (YES) ☐ (NO) ☐**

**19. Do you have a Pet? Dog ☐ Cat ☐ Some Restrictions May Apply**

**20. Do you presently own a car? (YES) ☐ (NO) ☐**

License Plate No: \_\_\_\_\_ Make/Model: \_\_\_\_\_

Insurance: \_\_\_\_\_ Company: \_\_\_\_\_ No: \_\_\_\_\_

Parking is allowed for one tenant owned car per apartment and parking is unassigned.

**There is NO VISITOR PARKING.**

# CANADIAN LEGION TORONTO HOMES – LEASE APPLICATION

## Affordable Housing for Veterans and their Spouse/Partner NOT Assisted Living

4-4715 Bathurst Street, Toronto, ON M2R 1X1

Tel: 416-222-9945 Fax: 416-222-2895 Email: [cdnlegionhomes@gmail.com](mailto:cdnlegionhomes@gmail.com)

### 21. Total Monthly Income

	<u>(Applicant)</u>	<u>(Spouse/Partner)</u>
Veteran's Allowance	\$ _____	\$ _____
Disability Pension	\$ _____	\$ _____
Old Age Security	\$ _____	\$ _____
Canada Pension Plan	\$ _____	\$ _____
Guaranteed Income Supplement	\$ _____	\$ _____
Other Monthly Income	\$ _____	\$ _____
Wages	\$ _____	\$ _____
Other Assets	\$ _____	\$ _____
<b>Totals:</b>	\$ _____	\$ _____

### 22. ATTACHMENTS REQUIRED:

- a) Copy of your discharge papers
- b) Your most recent Income Tax Notice of Assessment(s).

Note: You are required to supply a current copy in July of your Notice of Assessment(s) for the preceding year must to be presented to the office to show that you have not exceeded our benchmark of \$39,500.00 total combined household income for residence in Canadian Legion Toronto Homes as we are a low rental housing complex for Veterans.

**DECLARATION:** I \_\_\_\_\_ declare that I am the person named in this application and that all statements are true to the best of my knowledge and belief, if proven to be false I will forfeit my application to Canadian Legion Toronto Homes.

**Signature of Applicant:** \_\_\_\_\_ **Date** \_\_\_\_\_

**Signature of Spouse/Partner:** \_\_\_\_\_ **Date:** \_\_\_\_\_