

Application for Provincial Special Priority Policy (SPP)

For Survivors of Domestic Violence/Human Trafficking

Complete and return this form by mail or email to:

Halton Access to Community Housing (HATCH)
Housing Services Division
Social & Community Services Department
1151 Bronte Road
Oakville, ON L6M 3L1

Email: accesshalton@halton.ca

Need help with this form?

Call 311. If you are outside of Halton, please call 905-825-6000 or 1-866-442-5866.



What is the Provincial Special Priority Policy?

The Special Priority Policy (SPP) category for survivors of domestic violence/human trafficking allows applicants to move ahead of all other applicants on the Halton Access to Community Housing (HATCH) centralized waiting list. They are ranked chronologically among other SPP status applicants.

The intent of SPP is to help an applicant that is eligible for Rent-Geared-to-Income (RGI) housing separate permanently from living in an abusive situation. It is given to an applicant when a person or family's safety is at risk.

Eligibility Requirements

You may be eligible for Provincial SPP status on the HATCH waitlist if you meet at least one of the following requirements:

- ✓ You are currently living with an individual who is abusing you or another person in your household.
- ✓ You have left an individual who was abusing you or another person in your household within the last three months.
- ✓ You have experienced human trafficking.
- ✓ You are a sponsored immigrant and your sponsor is abusing you or another person in your household.

You must also provide one of the following documents:

- ✓ Section 1 – Applicant for Survivors of Domestic Violence (includes Proof of Cohabitation requirements) – pages 3 - 4
- ✓ Section 2 – Applicant for Survivors of Human Trafficking – page 5

All applicants must provide both of the following documents:

- ✓ Section 3 – Professional Verification of Abuse (required)
- ✓ Letter from Professional Verifier Supporting Verification of Abuse (required)

HATCH is unable to approve incomplete applications.

Section 1 - Applicant for Survivors of Domestic Violence

Definition:

For the purpose of SPP status, abuse, other than trafficking, is characterized by an incident of physical or sexual violence or, words/actions/gestures, which threaten the safety of one's person, children, family or property.

Abuse is done against a member of a household by any one of the following persons:

- A person who is related to the member or any other member of the household.
- A person who is, or has been, in an intimate partner relationship with the member or any other member of the household.
- A person on whom the member or any other member of the household is emotionally, physically or financially dependent.
- A person who is emotionally, physically or financially dependent on the member or any other member of the household.
- A person sponsoring the member or any other household member as an immigrant.

Declaration:

I, **DECLARE** that I (or someone in my household)
(Print Name of Primary Applicant)

have been abused by .
(Name of abusive person)

I **DECLARE** that the abusive person is my .
(Your Relationship to the abusive person)

Current / Previous Address

Current Address

From [mm/dd/yyyy] To [mm/dd/yyyy]

Previous Address

From [mm/dd/yyyy] To [mm/dd/yyyy]

I **DECLARE** that I (or someone in my household) are a victim of domestic abuse. I intend to live separately from the abuser on a permanent basis and:

- I am currently living with the abusive person
- I have not lived with the abusive person since [mm/dd/yyyy]
- I have never lived with the abusive person
- The abusive person is my sponsor for Canadian immigration

I have attached proof that I lived with the abusive person: Yes No

***Please see attached document guide of list of acceptable Proof of Cohabitation**

Section 1 - Applicant for Survivors of Domestic Violence (continued)

I solemnly declare the following:

- I am requesting special priority on the Centralized Waitlist in the Regional Municipality of Halton.
- I consent to the disclosure of the declaration and verification records provided for the purpose of determining eligibility for Special Provincial Priority on the Halton Access to Community Housing waitlist.
- I understand that declaration and verification records will be disposed of confidentially after 12 months.

Signature

Print Name

Date

Document Guide for Proof of Cohabitation

Please ensure that proof of cohabitation is provided as part of this application.

HATCH requires documentation that you are living or have lived with the abusive person within 3 months of submitting this application. You can demonstrate that you are or were living with your abuser by providing an official dated original document from the list of accepted documents below. Both of your names and the common address where you and the abuser lived together when the abuse occurred need to be provided.

Documents Accepted:

- Statement of Condominium fees from property management company
- Fire insurance policy and premium receipts
- Home heating receipts
- House or apartment insurance
- Hydro or utility receipts
- Land registry records
- Lease or rental agreement
- Letter from landlord confirming tenancy
- Mortgage statement
- Notice of rent increase or decrease
- Ontario Driver License
- Ontario Works or Ontario Disability Support Program statements / documentation
- Employment Insurance statements / documentation
- Property deeds
- Statement of municipal property taxes

- Rent receipt with landlord's name, address and phone with applicant's and abuser's address

Documents Not Accepted:

- Collection Bills/Past Due Notices
- Affidavits
- Envelopes that include your address
- Phone/Cable/Internet bill statements
- Generated 'Marketing' Mail envelopes
- Letters from private dwelling landlords
- Physician/Dentist letter (unless the client & abusing individual shared the same doctor or dentist)
- Magazine Subscriptions/Renewals
- Bank statements
- Ontario School Office Records
- Health and Dental Insurance – (Claim Statements)

Section 2 - Applicant for Survivors of Human Trafficking

Definition:

For the purpose of Special Priority for Victims of Human Trafficking, trafficking is defined as one or more incidents of recruitment, transportation, transfer, harbouring or receipt of an individual by improper means, including force, abduction fraud, coercion, deception and repeated provision of a controlled substance, for an illegal purpose, including sexual exploitation or forced labour.

Declaration:

I, **DECLARE** that I (or someone in my household)
(Print Name of Primary Applicant)

have been trafficked by
(Name of abusive person)

Current / Previous Address

Current Address

From [mm/dd/yyyy] To [mm/dd/yyyy]

Previous Address

From [mm/dd/yyyy] To [mm/dd/yyyy]

I **DECLARE** that I (or someone in my household) are a survivors of human trafficking. I intend to live separately from the abuser on a permanent basis and:

- Myself/another household member is being trafficked by an individual
- Myself/another household member was being trafficked by an individual that has stopped within the last three months

I solemnly declare the following:

- I am requesting special priority on the Centralized Waitlist in the Regional Municipality of Halton.
- I consent to the disclosure of the declaration and verification records provided for the purpose of determining eligibility for Special Provincial Priority on the Halton Access to Community Housing waitlist.
- I understand that declaration and verification records will be disposed of confidentially after 12 months.

Signature Print Name

Date

Section 3 - Professional Verification of Abuse

Professional Verifier Name:

Organization:

Position:

Phone Number:

Address:

I **DECLARE** that I have conducted an assessment of the applicant's situation in my capacity as a professional (please select from options below):

- | | | |
|---|---|--|
| <input type="checkbox"/> Doctor | <input type="checkbox"/> Member of the Clergy | <input type="checkbox"/> Social Housing Provider |
| <input type="checkbox"/> Law Enforcement Officer | <input type="checkbox"/> Teacher | <input type="checkbox"/> Shelter Worker |
| <input type="checkbox"/> Social Worker | <input type="checkbox"/> Social Service Worker | <input type="checkbox"/> Community Legal Worker |
| <input type="checkbox"/> Victim Services Worker | <input type="checkbox"/> Guidance Counsellor | <input type="checkbox"/> Community Services Worker |
| <input type="checkbox"/> Lawyer | <input type="checkbox"/> Nurse | <input type="checkbox"/> Midwife |
| <input type="checkbox"/> Settlement Services Worker | <input type="checkbox"/> Community Health Care Worker | |
| <input type="checkbox"/> Indigenous Elder | | |

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 (please confirm the following if selecting this option).

- I have provided a letter supporting these statements **and** an affidavit verifying the truth of this record as administered by a Commissioner of Oaths.

Letter from Professional Verifier (required)

This application must be submitted with a letter confirming the details of the abuse that has occurred within the household. As the Professional Verifier you must provide examples/an explanation for all of the instance(s) of abuse you document on the supporting letter.

The letter must be on letterhead from your organization and include your signature and a date.

If you are not a registered to college of one of the above listed professions, please ensure that a second authorized signatory from your organization also signs the verifying letter.

