

Market Rent Application Form



This application is only for Market Rent. If you are interested in subsidized housing you must apply with Grey County Housing. You may contact them at 519-376-5744 or go to County of Grey Housing website.

When Completing This Application:

- Please read the instructions carefully
- Please fill-out all sections of the application form
- Please read and sign the Declaration form
- Have all household members over the age of 16 years sign the form

Your completed application form can be mailed or delivered to:

Owen Sound Municipal Non-Profit Housing Corporation
#1, 700 21st Street East
Owen Sound, Ontario
N4K 6W1
Phone: 519-376-0573
Fax: 519-376-1710
E-mail: information@nphousing.ca

It is important to keep your contact information up to date. If there are changes to your contact information, it is important to let our office know right away.

Market Rent Application Form



Please print clearly and fill out all sections

Section 1 – Applicant Contact Information

Calls to offer housing are normally made during the day. Please provide us with a daytime number where you can be reached.

Last Names:	First Names:	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	Marital Status:
Street Address:		Apartment #:	
City:	Province:	Postal Code:	
Home Phone: ()		Email Address: _____	
		Social Insurance Number: _____	
Work Phone: ()	Extension:	Can you take personal calls: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you need an interpreter? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you ever lived in Subsidized Housing in the Province of Ontario? Yes <input type="checkbox"/> No <input type="checkbox"/> If so please name the housing organization: _____ Do you have arrears? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Have you ever been evicted? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes why: _____			
What size unit do you require? 1 Bedroom <input type="checkbox"/> 2 Bedroom <input type="checkbox"/> 3 Bedroom <input type="checkbox"/>		Can you climb stairs? Yes <input type="checkbox"/> No <input type="checkbox"/>	Do you require an Accessible unit? Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you require parking? <input type="checkbox"/> Yes <input type="checkbox"/> No		How many vehicles do you require parking for?	
Do you have pets? <input type="checkbox"/> Yes <input type="checkbox"/> No		What kind?	

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Section 2 – Household Information

Please provide information about all adults and children who will live in the unit (this includes applicant contact from previous page). **This section must be completed.**

Name	Relationship to Applicant	Date of Birth D/M/Y	Sex M/F	Source of Income	Monthly Income
	SELF				

Section 3 – Current Landlord Information

Name:		
Street Address:		Apartment #:
City:	Province:	Postal Code:
Telephone Number:		Date Moved In:
Monthly Rent or Mortgage Paid: \$		

Section 3A – Previous Tenancy Information

Previous Address:

Landlord Name:

Telephone Number:

Date Moved In:

Section 3B – if less than 2 years at above:

Previous Address:

Landlord Name:

Telephone Number:

Date Moved In:

Section 4 – Location Preferences



Please refer to the attached Market Rent Property Listing to indicate which buildings/municipalities you prefer to live in.

Section 5 – Declaration

I declare:

1. I declare that everything I have written in this document is true and that no information that is required to be given has been withheld or omitted.
2. I understand that all of my personal information I give to Owen Sound Municipal Non-Profit Housing Corporation will belong to them.
3. I declare that I am in Canada legally.

Personal information contained in this form or in any attachments to it is collected by OSMNPHC, pursuant to the *Freedom of Information and Protection of Privacy Act* or the *Municipal Freedom of Information and Protection of Privacy Act* and will be used only as set out in this form. You may contact our office for questions: 519-376-0573

Signatures of applicants 16 years of age or over:

Applicant (Please print name)

Signature _____

Date _____

Applicant (Please print name)

Signature _____

Date _____

Applicant (Please print name)

Signature _____

Date _____

Market Rent Property Listing

Applicant(s) Name(s): _____

of Bedrooms: Minimum _____ Maximum _____

Explanation of Symbols: ✓ - Bedroom size exists at this location

Tenant Type: S – Seniors F – Family/Singles A – All household types
Building Type: A – Apartment T – Townhouse R – Row House

Instructions: Please mark an X in the *selection box beside your choice and circle the unit size requested.

*SELECTION	Tenant Type	Site	Address	Building Type	**# of Units	Bachelor	1 bedroom	2 bedroom	3 bedroom	4 bedroom
	A	Bayfield Landing	2150 9 th Avenue East	T	50			✓	✓	
	A	Ordnance Park	700 21 st Street East	A/T	90		✓	✓	✓	
	A	Garafraxa NP Homes	329 Garafraxa St N	A	25		✓	✓	✓	
	A	Odawa Heights	2239 8 th Avenue East	A	96		✓	✓		
	S	Owen Sound BR 6 Legion NPH	1655 3 rd Avenue West	A	25		✓	✓		

** This is the total # of units on each site – only a small percentage are allotted for market rent clients

Market Rent Amounts as of June 1, 2024

Bayfield Landing

2 Bedroom - \$1261.00 +utilities
 3 Bedroom - \$1419.00 + utilities

Ordnance Park

1 Bedroom - \$919.00 + utilities
 2 Bedroom - \$1103.00 + Utilities (one floor with basement)
 2 Bedroom - \$1366.00 + Utilities (two floors with basement)
 3 Bedroom - \$1576.00 + Utilities

Odawa Heights

1 Bedroom - \$972.00 + Hydro
 2 Bedroom - \$1640.00 + Hydro

Garafraxa NP Homes

1 Bedroom - \$725.00 – plus hydro
 2 Bedroom - \$950.00 – plus hydro
 3 Bedroom - \$1150 – plus hydro

Owen Sound BR 6 Legion NPH

1 Bedroom - \$867 all included
 2 Bedroom - \$1171 all included