**Annual Household Income & RGI Review**

Rent-Geared-to-Income (RGI) rent is calculated using the Net Income for each member of the household, as reported on their Notices of Assessment (NOA) for the most recent taxation year. To continue to be eligible to receive RGI assistance, each member of your household who is 16 years of age and older, must file an income tax return every year. Copies of the Notices of Assessment for each of those household members must be submitted with the completed Annual Household Income & RGI Review form.

**In order that we can complete your annual Income and RGI Review, you must complete and/or return the following to [who and where] by [date]:**

* Annual Household Income & RGI Review form (see below)
* Copies of the Notice of Assessment for each member of the household who is 16 years of age and older for [insert relevant taxation year]
* Consent and Declaration form (see attached)

If any member of your household is in receipt of Social Assistance, the following must also be submitted:

* a recent Statement of Assistance that includes amount paid to the benefit unit and the names of all family members included in this benefit (or a copy of the proof of social assistance from the recipients' MyBenefits account)
* if receiving CPP-D, a T4A(P) for [insert relevant taxation year]
* if receiving OAS Spouse's Allowance, a T4A(OAS) for [insert relevant taxation year]

If at least one member of your household received employment income during the relevant tax year, you will qualify for an employment deduction. To receive the employment deduction, you must also provide **one** of the following verification documents for the relevant tax year for each household member who received employment income:

* Proof of Income statement
* T4
* Letter from employer
* Pay stub

If any member of your household is a full-time student at a recognized primary, secondary or post-secondary institution, any income they have will not be included in the calculation of the RGI rent. Full-time students over the age of 16 must provide proof of their student status and their Notice of Assessment.

If any member(s) of your household has a Registered Disability Savings Plan (RDSP), the following must also be submitted:

* annual RDSP statement for the same tax year as their NOA from the institution holding the investment.

As recipients of RGI assistance, you are not required to report most in-year increases in your household income. **However, you must report to [the RGI Administrator] within 30 days if:**

* There is any change in your household composition (this is who lives in your household).
* Any member of your household has ceased to be a full-time student.
* Any member of your social assistance benefit unit had a permanent increase in income that caused the benefit unit to exceed their non-benefit income limit.
* Any member of your household has started or stopped receiving social assistance, such as OW or ODSP.
* Any member of your household has had their income taxes reassessed or additionally assessed and received a revised Notice of Assessment.

**Note:** Any household member who has not signed the lease, but whose income is considered in the RGI rent calculation, does **not** have full tenancy rights.

**If, between now and your next Annual Income & RGI Review, your household experiences a reduction in income of at least 20%, you may contact [RGI Administrator] to request an In-year Review.**

**Annual Household Income & RGI Review Form**

Have one person from your household complete this form for all members of your household.

## Part 1: Household Information

|  |  |
| --- | --- |
| **Address (number and street name):** |  |
| **Apartment or unit number:** |  |
| **Postal code:** |  |
| **Number of people in your household:** |  |
| **Number of bedrooms in your unit:** |  |
| **Daytime phone number:** |  |
| **Alternative phone number:** |  |
| **Email address:** |  |

**Part 2: Household Member Information**

**Complete this information for EACH member of your household**. Include everyone who lives in your unit. Start with yourself.

|  |  |
| --- | --- |
| **Household Member #1 (the person completing this form)** | |
| **Last Name:** |  |
| **First Name:** |  |
| **Date of Birth:** (DD/MMM/YYY) |  |
| **Gender:** (male, female, non-binary, prefer not to answer) |  |
| **Status in Canada:** (Canadian Citizen/  Permanent Resident/  Convention Refugee/ Refugee Claimant) |  |
| **Full-time student** (yes or no)**:** |  |
| **Does this person have employment income?** (yes or no)? |  |
| **Is this person receiving Social Assistance** (yes or no)**:** |  |
| **Is a copy of this person's Notice of Assessment included** (yes or no)**:** |  |
| **If the Notice of Assessment is not included, why not?** |  |
| **Is any other required documentation included** (yes or no)**:** |  |
| **Household Member #2** | |
| **Last Name:** |  |
| **First Name:** |  |
| **Date of Birth** (DD/MMM/YYY)**:** |  |
| **Gender** (male, female, non-binary, prefer not to answer)**:** |  |
| **Relationship to you:** |  |
| **Status in Canada** (Canadian Citizen /  Permanent Resident /  Convention Refugee / Refugee Claimant)**:** |  |
| **Full-time student** (yes or no)**:** |  |
| **Does this person have employment income (**(yes or no)**:** |  |
| **Is this person receiving Social Assistance** (yes or no)**:** |  |
| **Is a copy of this person's Notice of Assessment included** (yes or no)**:** |  |
| **If the Notice of Assessment is not included, why not?** |  |
| **Is other required documentation included** (yes or no)**:** |  |
| **Household Member #3** | |
| **Last Name:** |  |
| **First Name:** |  |
| **Date of Birth** (DD/MMM/YYY)**:** |  |
| **Gender** (male, female, non-binary, prefer not to answer)**:** |  |
| **Relationship to you:** |  |
| **Status in Canada** (Canadian Citizen /  Permanent Resident /  Convention Refugee / Refugee Claimant)**:** |  |
| **Full-time student** (yes or no)**:** |  |
| **Does this person have employment income (**(yes or no)**:** |  |
| **Is this person receiving Social Assistance** (yes or no)**:** |  |
| **Is a copy of this person's Notice of Assessment included** (yes or no)**:** |  |
| **If the Notice of Assessment is not included, why not?** |  |
| **Is other required documentation included** (yes or no)**:** |  |
| **Household Member #4** | |
| **Last Name:** |  |
| **First Name:** |  |
| **Date of Birth** (DD/MMM/YYY)**:** |  |
| **Gender** (male, female, non-binary, prefer not to answer)**:** |  |
| **Relationship to you:** |  |
| **Status in Canada** (Canadian Citizen /  Permanent Resident /  Convention Refugee / Refugee Claimant)**:** |  |
| **Full-time student** (yes or no)**:** |  |
| **Does this person have employment income (**(yes or no)**:** |  |
| **Is this person receiving Social Assistance** (yes or no)**:** |  |
| **Is a copy of this person's Notice of Assessment included** (yes or no)**:** |  |
| **If the Notice of Assessment is not included, why not?** |  |
| **Is other required documentation included** (yes or no)**:** |  |
| **Household Member #5** | |
| **Last Name:** |  |
| **First Name:** |  |
| **Date of Birth** (DD/MMM/YYY)**:** |  |
| **Gender** (male, female, non-binary, prefer not to answer)**:** |  |
| **Relationship to you:** |  |
| **Status in Canada** (Canadian Citizen /  Permanent Resident /  Convention Refugee / Refugee Claimant)**:** |  |
| **Full-time student** (yes or no)**:** |  |
| **Does this person have employment income (**(yes or no)**:** |  |
| **Is this person receiving Social Assistance** (yes or no)**:** |  |
| **Is a copy of this person's Notice of Assessment included** (yes or no)**:** |  |
| **If the Notice of Assessment is not included, why not?** |  |
| **Is other required documentation included** (yes or no)**:** |  |
| **Household Member #6** | |
| **Last Name:** |  |
| **First Name:** |  |
| **Date of Birth** (DD/MMM/YYY)**:** |  |
| **Gender** (male, female, non-binary, prefer not to answer)**:** |  |
| **Relationship to you:** |  |
| **Status in Canada** (Canadian Citizen /  Permanent Resident /  Convention Refugee / Refugee Claimant)**:** |  |
| **Full-time student** (yes or no)**:** |  |
| **Does this person have employment income (**(yes or no)**:** |  |
| **Is this person receiving Social Assistance** (yes or no)**:** |  |
| **Is a copy of this person's Notice of Assessment included** (yes or no)**:** |  |
| **If the Notice of Assessment is not included, why not?** |  |
| **Is other required documentation included** (yes or no)**:** |  |
| **Household Member #7** | |
| **Last Name:** |  |
| **First Name:** |  |
| **Date of Birth** (DD/MMM/YYY)**:** |  |
| **Gender** (male, female, non-binary, prefer not to answer)**:** |  |
| **Relationship to you:** |  |
| **Status in Canada** (Canadian Citizen /  Permanent Resident /  Convention Refugee / Refugee Claimant)**:** |  |
| **Full-time student** (yes or no)**:** |  |
| **Does this person have employment income (**(yes or no)**:** |  |
| **Is this person receiving Social Assistance** (yes or no)**:** |  |
| **Is a copy of this person's Notice of Assessment included** (yes or no)**:** |  |
| **If the Notice of Assessment is not included, why not?** |  |
| **Is other required documentation included** (yes or no)**:** |  |
| **Household Member #8** | |
| **Last Name:** |  |
| **First Name:** |  |
| **Date of Birth** (DD/MMM/YYY)**:** |  |
| **Gender** (male, female, non-binary, prefer not to answer)**:** |  |
| **Relationship to you:** |  |
| **Status in Canada** (Canadian Citizen /  Permanent Resident /  Convention Refugee / Refugee Claimant)**:** |  |
| **Full-time student** (yes or no)**:** |  |
| **Does this person have employment income (**(yes or no)**:** |  |
| **Is this person receiving Social Assistance** (yes or no)**:** |  |
| **Is a copy of this person's Notice of Assessment included** (yes or no)**:** |  |
| **If the Notice of Assessment is not included, why not?** |  |
| **Is other required documentation included** (yes or no)**:** |  |

**This completed Annual Household Income & RGI Review form and the completed Consent & Declaration Form must be returned with all necessary verification documents to [the RGI Administrator] at [where] by [date].**

**If this form and the required verification documents are not submitted by the deadline, you could lose your eligibility for RGI assistance and you will have to pay market rent.**

If you have any questions or need help filling out this form, please call [the RGI Administrator] at [phone number].