



## Haldimand Norfolk Housing Corporation Application for Transfer

Name	Current Address	
Telephone	Email Address	
(home #)	(cell #)	

Please list all current household members:

Name	Relationship to Applicant	Birthdate (mm/dd/year)

Reason for Request to Transfer:

<input type="checkbox"/> Overhoused household	<input type="checkbox"/> SPP	<input type="checkbox"/> Health	<input type="checkbox"/> Emergency
<input type="checkbox"/> Underhoused household	<input type="checkbox"/> Personal Reason	<input type="checkbox"/> Other:	

Details of Reason checked above:

Declaration:

- I confirm that everything I have written in this application is correct and complete. If something on this application is incorrect or not true, the Haldimand-Norfolk Housing Corporation (HNHC) may cancel my transfer request.
- I understand that only the people I have listed in this application may live with me. Before I can receive a transfer, I understand that I must have lived in my current home for a minimum of 12 months, do not owe any money to the Haldimand-Norfolk Housing Corporation and must have a good rental history for the past 6 months.
- I understand that it is my responsibility to notify the HNHC of any changes to the transfer locations I have selected.
- I understand that there is a fee to transfer to another unit.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**IMPORTANT: On the reverse, please indicate the location(s) where you would like to transfer.**

FOR INTERNAL USE ONLY	
Current arrears: <input type="checkbox"/> Yes <input type="checkbox"/> No	Transfer: <input type="checkbox"/> Approved <input type="checkbox"/> Not Approved
Rental history satisfactory? <input type="checkbox"/> Yes <input type="checkbox"/> No	Unit inspection completed & satisfactory <input type="checkbox"/> Yes <input type="checkbox"/> No
PM signature:	CEO Signature:
Date:	Date:



**Haldimand Norfolk Housing Corporation  
Application for Transfer  
Community Selection**

**Please check off all Housing Communities that you are interested in:**

Do you need a ground floor apartment if there is no elevator?  Yes  No

If you checked Yes, please provide a reason for this accommodation:
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<b>Seniors (59 +) 1 bedroom</b>	91 Oak Street, Simcoe <input type="checkbox"/>	20 Scott Ave., Simcoe <input type="checkbox"/>
	503 Main St. E., Dunnville <input type="checkbox"/>	11 Arthur St., Simcoe (bachelor also available) <input type="checkbox"/>
	Building 40, 38 Erie Avenue Port Rowan <input type="checkbox"/>	283 William St., Delhi <input type="checkbox"/>

<b>Seniors &amp; Adults (16 +) 1 bedroom</b>	243 Western Ave., Delhi <input type="checkbox"/>	54 William St., Delhi <input type="checkbox"/>
	219 Regent Ave., Port Dover <input type="checkbox"/>	39 Nichol St., Waterford <input type="checkbox"/>
	Building 42, 38 Erie Avenue Port Rowan <input type="checkbox"/>	265 Metcalfe St. S, Simcoe <input type="checkbox"/>
	109 King St., E., Hagersville <input type="checkbox"/>	68 Selkirk St., Caledonia <input type="checkbox"/>
	400 Queen St. E., Dunnville <input type="checkbox"/>	440 Queen St. E., Dunnville <input type="checkbox"/>

<b>Family Housing</b>	Banstead/Gibraltar St.'s, Delhi (3 and 4 bedroom semi-detached and detached homes) <input type="checkbox"/>	Oakwood Ave./Ashton Dr., Simcoe (2, 3, 4, and 5 bedroom semi-detached homes) <input type="checkbox"/>
	38 Erie Avenue, Port Rowan (2, 3, and 4 bedroom semi-detached homes) <input type="checkbox"/>	265 Metcalfe St. S, Simcoe (2 and 3 bedroom apartments) <input type="checkbox"/>
	Queen/Main St.'s, Dunnville (2, 3, and 4 bedroom homes) <input type="checkbox"/>	Elizabeth Cres., Dunnville (3 bedroom homes) <input type="checkbox"/>
	550 George St., Dunnville (2 and 3 bedroom townhomes) <input type="checkbox"/>	

<b>2<sup>nd</sup> Stage Housing</b> (For Women and their children only)	269 Metcalfe St., S, Simcoe (1, 2, and 3 bedroom apartments) <input type="checkbox"/>
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**You are responsible for updating your selections. Please contact our office for a new form should you wish to make changes to your internal transfer application and/or selections indicated above.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Other housing options may be available from other Housing Providers in Haldimand County and Norfolk County. In order to move to a housing community with another Housing Provider, you must complete an application to the Centralized Waiting List through the Social Housing Department of Haldimand and Norfolk's Health and Social Services: 905-318-6623 (Haldimand County) or 519-426-6170 (Norfolk County) or [www.hnhousing.org](http://www.hnhousing.org).