

Lethbridge ICA –Stabilization Housing Fund

Agency Application Package Applying on Behalf of Client

Funding Description

The Integrated Coordinated Access (ICA) Stabilization Housing Fund (SHF) provides funding to stabilize or prevent unanticipated or adverse housing needs experienced by people in the City of Lethbridge for a maximum of three (3) months.

Who Can Apply

- Must be a resident of the City of Lethbridge or relocating to the City of Lethbridge.
- Must meet one of the following criteria's:
 - Experiencing homelessness and leaving an emergency shelter or the street.
 - Housed and moving to another housing situation because of domestic violence, fire/flood, accommodate a change in family size, or other extenuating circumstances.
 - Housed and moving due to a high rent situation.
 - Have delays in receiving confirmed income from provincial or federal sources resulting in a delay in the ability to pay rent.
 - People receiving financial assistance through provincial or federal funding, and are currently housed and have an interruption in funding or income.
- Must not have accessed the maximum of three months of SHF funding available in the current calendar year.

Agency or Agency Caseworker are required to apply on your behalf:

- Only agencies with individuals that have been trained as Tier 2 System Navigators through the Lethbridge ICA system can support the completion of the application and act as a referral agency for SHF applications. A list of trained navigators can be found at www.lethbridgeica.ca/tier2
- If an individual/family is not connected to a Tier 2 Navigator within the ICA Network, they should reach out to Community Links (located at the Lethbridge Public Library Main Branch, 810-5th Avenue South) during office hours of 9:00 a.m. to 5:00 p.m. Monday through Friday to discuss options and book a meeting with staff.

What Documentation & Information is Required

- A completed SHF Application.
- Proof of Housing Location
 - Lease/Property Management/Owners letter or promised address verifying monthly rent.
 - Confirmation letter from hotel or short term stay facility verifying room rate and length of stay (needs to be on official company letterhead).

- Self-declaration in establishing a residence.
- Plan for funding and continuation of housing following the stabilization period.
- Any other documents supporting the need to access SHF.

Additionally, supporting documentation may be required in specific circumstances:

- Fire/flood – letter from property management, police/fire department report or insurance letter/report (where applicable).

Eligible Expenses

Stabilization Housing Funds are only able to cover direct payments made to rent.

In cases where an individual has income but it is not enough to cover the whole rent payment, they are encouraged to ask for less than the full monthly amount and contribute what they can to make payments.

Referral agencies are expected to verify income sources to the best of their ability prior to application and acknowledge that they have done so.

Ineligible Expenses

Stabilization Housing Funds are unable to cover the following:

- Damage Deposits / Security Deposits
- Rental Arrears
- Utilities or Costs of Living
- Any incidental costs associated with rentals (pet deposits, parking stalls, food and drink, upgraded rooms, etc.)

If you are uncertain if an expense is covered, please reach out prior to the submission of the application.

After Applying

If a Lethbridge ICA Tier 2 System Navigator supports the completion of the application and is acting as a referral source for the SHF application, CMHA, ASR will respond directly to the referral source.

The agency will be informed if the applicant is eligible, if funding is approved and for how much, within four (4) business days of receiving the complete application and all required supporting documentation.

FOIPP Statement: Information is being collected under the authority of Section 33(c) of the *Freedom of Information and Protection of Privacy Act (the FOIPP Act)*. The personal information collected during this request will be used to administer the financial assistance. It will be treated in accordance with the privacy provision of Part 2 of the FOIPP Act. If requested by the funders, information may be provided to the City of Lethbridge or the Government of Alberta to administer their support programs

Please give proper processing time for applications, applications made two days prior to the rental payment date still take the same amount of time (5 business days after approval) to process as other applications.

How Funds Will be Dispersed

- Funds must be payable to the landlord/property owner/management body, or service agency whenever possible.
- You will receive a copy of the Stabilization Housing Fund (SHF) Decision Form.
- Funding disbursements will take up to five business days to process after the Stabilization Housing Fund Decision Form is issued. Payment is not issued at the same time as the SHF Decision Form.
- No retroactive payments will be issued for costs prior to application approval.
- Approvals are subject to the availability of Stabilization Funds.

This application form needs to be completed in full by the Referral Source and submitted to ICA Team Lead at communitylinks@cmhalethbridge.ca.

Incomplete applications, or applications requesting funds for arrears or ineligible expenses will not be accepted.

PROPOSED UNIT INFORMATION
Address of Unit: <i>If a hotel/motel, please indicate which one</i>
Anticipated Move In Date:
Anticipated Move Out Date:

Complete chart based on the number of days or weeks requested
(Choose the rate that is applicable to your application)

	Cost	Requested dates	Total Amount or Rental <i>(Cost times the # of requested dates)</i>
<i>Ex. Weekly rate:</i>	<i>\$ 300.00</i>	<i># of weeks: 4</i>	<i>\$ 1200.00</i>
Daily Rate	\$	# of days:	
Weekly Rate	\$	# of weeks:	
Monthly Rate	\$	# of months:	

SHF AMOUNT REQUESTED: _____

If the amount requested is less or different than the total rental amount, please explain why:

PAYMENT INFORMATION
Landlord/Property Owner/Management Body Name:
Address, including Postal Code:

SUPPORTING DOCUMENTATION CHECKLIST
<input type="checkbox"/> – Market Housing – Rent Report or Landlord Letter confirming rental amount <input type="checkbox"/> – Hotel/Motel – Letter on Company Letterhead confirming rental amount <input type="checkbox"/> – Housing Program – Letter on Letterhead confirming rental amount and program admittance

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TO BE COMPLETED BY THE REFERRAL SOURCE	
<p>I understand that I am supporting the above applicant in applying for financial support for housing through Emergency Stabilization Funds.</p> <p>I acknowledge the FOIPP statement made above.</p> <p>I understand that as the Referral Source I am responsible for:</p> <ul style="list-style-type: none"> • Submitting a complete and verified application • Ensuring that the applicant has secured accommodations • Providing any updates to the information stated in this application • Distributing funds to the applicant upon application approval • Returning any unused funds to CMHA, Alberta South Region 	
Referral Source Name:	Phone Number:
Referral Source Signature:	
Date Signed:	

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