

FORM A

Notice to Transfer

Tabby Town Urban Housing Co-operative Corporation

To: Include names of all persons who are part of the household.

Address: _____

This is your notice that the Co-op requires you to move to a different unit in the Co-op. Your name has been put on the Internal Waiting List.

If you refuse **three** appropriate units that are offered to you, you may be evicted. The Co-op may take other steps because of the situation described in this Notice. These steps may be taken before or after you have been offered any units.

Review

You are entitled to a review of the decision to issue this Notice. To receive a review you must make a written request to the Co-op.

This request must be received by the Co-op on or before _____.

Articles 3 and 6 of the HSA By-law, as well as other parts of the Co-op's by-laws, state rights and obligations that apply to you in this situation.

Reason

The following is the reason why this Notice has been given to you (*check one or more and fill in details below*):

- Your household occupies a modified unit for which you are not eligible. See section 3.9 of the HSA By-law.
- Your household occupies a special needs unit which is not a modified unit and you are not eligible for a special needs unit. See section 3.10 of the HSA By-law.

Details:

The facts on which the Co-op relied in making its decision to issue this Notice are (*fill in details*):

Signature for the Co-op:

Write and sign name of signing authority for co-op
Tabby Town Urban Housing Co-operative Corporation

Date

FORM B

Notice of Geared-to-Income or Special Needs Decision with Right to Review

Tabby Town Urban Housing Co-operative Corporation

To: Include names of all persons who are part of the household.

Address: _____

This is your notice that the Co-op has made a decision about your household. The decision was made on _____.

Review

You are entitled to a review of this decision. To receive a review you must follow the Government Requirements in Attachment 2 - Request for Review of a Geared-to-Income or Special Needs Decision. A Copy of Attachment 2 is attached.

The procedures for the review are in Attachment 3 - Procedure for a Review of a Geared-to-Income or Special Needs Decision. A copy of Attachment 3 is attached.

Decision

The decision was:

(check one or more and fill in information below)

- that your household is not eligible for geared-to-income assistance.
- that your household is not eligible for special needs housing.
- about the type and size of unit for which your household is eligible, if your household pays or will pay a geared-to-income housing charge or is a special needs household. The specific decision was *(fill in specific decision)*:

- This is the notice referred to in section 3.9 (Overhoused – Geared-to-Income) of this By-law.

about the category into which your household has been placed on the internal waiting list or special needs waiting list (*fill in specific decision*):

about the amount of a geared-to-income housing charge payable by your household. The specific decision was (*fill in specific decision*):

Reasons

The reasons for the Co-op's decision are (*fill in details*):

Signature for the Co-op:

Write and sign name of signing authority for co-op
Tabby Town Urban Housing Co-operative Corporation

Date

FORM C

Notice of Final Geared-to-Income or Special Needs Decision

Tabby Town Urban Housing Co-operative Corporation

To: Include names of all persons who are part of the household.

Address: _____

This is your notice that the Co-op has made a decision about your household. The decision was made on _____. The decision is final. You may not request a review.

Decision

The decision was:
(check one or more and fill in information below)

- that your household is eligible for geared-to-income assistance.
- that your household is eligible for special needs housing.
- that your household **[has or has not]*** been included on a special needs waiting list and what category the household is listed in. The specific decision:

Inclusions

If the decision was a decision that your household is eligible for geared-to-income assistance, the following Notices accompany this Notice, if applicable (check one if applicable)

- a Notice about the type and size of unit for which your household is eligible (Form B).
- a Notice about a decision that your household is not eligible for special needs housing, if you applied for special needs housing at the same time as you applied for geared-to-income assistance (Form B).

Signature for the Co-op:

Write and sign name of signing authority for co-op
Tabby Town Urban Housing Co-operative Corporation

Date

FORM D

Notice of Board Meeting to Conduct Review of Geared-to-Income or Special Needs Decision

Tabby Town Urban Housing Co-operative Corporation

To: Include names of all persons who are part of the household.

Address: _____

The Co-op gave you a Notice dated _____, about a decision or decisions described in the Notice. You requested a review.

Meeting to Conduct the Review

The board of directors is going to conduct the review at a board meeting. This meeting will be on _____, in the [location]* at the Co-op, [street address]*, [municipality]*, Ontario. The board meeting will start at _____, but you do not have to arrive before _____. Because of the time frames set by Government Requirements, the board cannot change this time.

Fill in the date of the meeting, the room or location, the street address and the municipality, the start time and the time that the member must arrive.

You may appear and speak at the meeting. You may present written material. You may have a lawyer or other representative speak for you.

You may withdraw your request for a review by giving written notice to the Co-op.

Information

The information used to make the decision is [fill in details and/or attach copies of information]

Signature for the Co-op:

Write and sign name of signing authority for co-op
Tabby Town Urban Housing Co-operative Corporation

Date

FORM E

Notice of Decision after Review of Geared-to-Income or Special Needs Decision

Tabby Town Urban Housing Co-operative Corporation

To: Include names of all persons who are part of the household.

Address: _____

The Co-op gave you a Notice dated _____ about a decision or decisions described in the Notice. You requested a review.

This is your notice that the Co-op has conducted a review of the decision. The following is the result of the review:

- There is no change in the decision. The original decision has been confirmed.
- The original decision has been changed. The new decision is (fill in specific decision):

The decision stated above is final.

Signature for the Co-op:

Write and sign name of signing authority for co-op
Tabby Town Urban Housing Co-operative Corporation

Date

FORM F

Confidentiality Agreement

Tabby Town Urban Housing Co-operative Corporation

I have agreed to assist the Co-op in performing a review of one or more decisions under the Co-op's *Housing Services Act* By-law.

Confidential information is any personal, financial, medical or other information about any individuals.

I agree that I will keep secret any confidential information that I learn in connection with a review unless required by law to reveal it or unless it is revealed to the Co-op board or staff in relation to the review process.

Write and sign name.

Date

FORM G

Notice of Refusal of Membership Application

Tabby Town Urban Housing Co-operative Corporation

To: Include names of all persons who are part of the household.

Address: _____

This is your notice that the Co-op refuses to offer you membership and a unit of housing in the Co-op.

You are entitled to a review of this refusal. To receive a review you must follow the rules in Attachment 4 - Request for Review of Refusal of Membership Application. A copy of Attachment 4 is attached to this notice.

This request must be received by the Co-op on or before (see note at end about what date to insert) _____.

The procedures for the review are stated in Attachment 5 - Procedure for Review of Refusal of Membership Application. A copy of Attachment 5 is attached to this notice.

Reasons

The reasons for the Co-op's refusal to offer the unit to you are:
Check one or more and fill in details below.

- selection of your household would be contrary to the Co-op's mandate
- the Co-op has reasonable grounds to believe, based on your household's rental history, that your household may fail to fulfill the obligation to pay housing charges for the unit in the amount and at the times they are due
- members of your household did not agree to accept their responsibilities as members of the Co-op, or the Co-op has reasonable grounds to believe that members of your household will not accept or will be unable to accept those responsibilities

- the unit is one in which individuals will reside in a shared living situation and the Co-op has reasonable grounds to believe that it is unreasonable for your household to reside in the shared accommodation
- the unit is special needs housing and the level of service required by your household is significantly greater or significantly less than the level of service provided by the Co-op in the unit
- the unit is special needs housing and your household is not eligible for special needs housing.

Details

The facts on which the Co-op relied in making its decision not to offer the unit to you are:

Signature for the Co-op:

Write and sign name of signing authority for co-op
Tabby Town Urban Housing Co-operative Corporation

Date

FORM H

Notice of Board Meeting to Conduct Review of Refusal of Membership Application

Tabby Town Urban Housing Co-operative Corporation

To: Include names of all persons who are part of the household.

Address: _____

The Co-op refused to offer you a unit of housing in the Co-op. You requested a review of this refusal.

Meeting to Conduct the Review

The board of directors is going to conduct the review at a board meeting. This meeting will be on _____, in the [location]* at the Co-op, [street address]*, [municipality]*, Ontario. The board meeting will start at _____, but you do not have to arrive before _____. Because of the time frames set by Government Requirements, the board cannot alter this time.

Fill in the date of the meeting, the room or location, the street address and the municipality, the start time and the time that the member must arrive.

You may appear and speak at the meeting. You may present written material. You may have a lawyer or other representative speak for you.

You may withdraw your request for review by giving written notice to the Co-op.

Information

The information used to make the decision is [fill in details and/or attach copies of information].

Signature for the Co-op:

Write and sign name of signing authority for co-op
Tabby Town Urban Housing Co-operative Corporation

Date

FORM I

Notice of Result of Review of Refusal of Membership Application

Tabby Town Urban Housing Co-operative Corporation

To: Include names of all persons who are part of the household.

Address: _____

The Co-op refused to offer you a unit of housing in the Co-op. You requested a review of this refusal.

This is your notice that the Co-op has conducted a review of the refusal.

Check one or more

- The original refusal has been confirmed. The Co-op still refuses to offer you membership and a unit of housing in the Co-op.
- The original refusal has been reversed. The Co-op has accepted your household for membership. You will become a member when a unit is allocated to you and you sign all necessary papers. You will be contacted when a unit is available.
- The original decision has been changed. The Co-op is prepared to accept your household for membership, if the conditions stated below are fulfilled. You will become a member when the conditions are fulfilled, a unit is allocated to you and you sign all necessary papers. You will be contacted when a unit is available. If the conditions are not fulfilled, your application is refused.

Note: Insert any conditions such as having a specific person sign a guarantee document satisfactory to the Co-op. Conditions should state when they must be fulfilled. You should be careful about timing. For instance, if a guarantor is suggested you would ordinarily not be able to complete a credit check on them within 48 hours of when a unit is available.

The decision stated above is final.

Signature for the Co-op:

Write and sign name of signing authority for co-op
Tabby Town Urban Housing Co-operative Corporation

Date

ATTACHMENT 1

Notices

This Attachment does not form part of the By-law itself. The board of directors may update it from time to time.

- (a) Government Requirements have special rules for notices of decisions relating to geared-to-income households and special needs households. These are different depending on:
 - the kind of decisions
 - whether the household has a right to a review or does not have a right to a review
 - whether the decision is that the household is eligible or not eligible.
- (b) When the Co-op gives notices about things dealt with in this By-law, it must follow the procedure in Government Requirements. If Government Requirements change, the Co-op will use any new Government Requirements.
- (c) The Co-op will give each member of the household notice of these decisions if they are made by the Co-op. The notice must be given according to Government Requirements. If the decision is about special priority status or a household that has special priority status, only the member who made the request for special priority status will be given notice of these decisions.
- (d) Notices can be signed for the Co-op by a staff person or any director. The person signing a notice is authorized to fill in all the blanks.
- (e) A person who signs a notice about a decision cannot be involved in the review of that decision.
- (f) A notice is received
 - the date the notice was actually handed to a member of the household
 - the next business day after it was left at the household's last known address
 - the fifth business day after mailing.
- (g) When this By-law refers to "business days" it means days from Monday to Friday, other than public holidays.
- (h) When giving notice that a special needs household that is no longer eligible for special needs housing and the co-op requires them to move and their name has been added to the Internal waiting List, the Co-op can use Form A, Notice to Transfer. A Notice to transfer is given after the household has already received notice that they are no longer eligible for special needs housing.

- (i) When giving notice of decisions about eligibility for geared-to-income assistance or special needs housing, the Co-op can use:
- **Form B**, Notice of Geared-to-Income or Special Needs Decision with Right to Review if the decision is that the household is not eligible
 - **Form C**, Notice of Final Geared-to-Income or Special Needs Decision if the decision is that the household is eligible.
- (j) When giving notice of other decisions mentioned in section 6.4 (Kinds of Decisions under Government Requirements), the Co-op can use **Form B**.
- (k) When giving notice of decisions about whether or not a household has been included on a special needs waiting list, and what category the household is listed in, the Co-op can use **Form C**.
- (l) If a decision is made that a household is eligible for both geared-to-income assistance and special needs housing, both **Form B** and **Form C** have to be used.

Form C is given to state that the household is eligible for geared-to-income assistance. If applicable, it will also state that:

- a decision has been made that the household is eligible for special needs housing.
- a decision has been made that the household has or has not been included on a special needs waiting list and what category the household is listed in.

Form B is given about the type and size of unit for which the household is eligible. If applicable, it will also state that a decision has been made that the household is not eligible for special needs housing.

- (m) If a written request has been received from a member of a household for a review of a geared-to-income or special needs decision, the Co-op can use **Form D**, Notice of Board Meeting to Conduct Review of Geared-to-Income and Special Needs Decision.
- (n) When the review of a geared-to-income or special needs decision has been conducted, the Co-op can use **Form E**, Notice of Decision after Review.
- (o) If the confidentiality provisions of the Co-op's by-laws do not apply or any professional or other adequate confidentiality obligations, the Co-op can ask someone to sign **Form F**, Confidentiality Agreement.
- (p) If a decision has been made to refuse a membership application, the Co-op can use the attached **Form G**, Notice of Refusal of Membership Application for Geared-to-Income or Special Needs Household.
- (q) If a written request has been received from a member of a household for a review of a refusal of membership application, the Co-op can use **Form H**, Notice of Board Meeting to Conduct Review of Refusal of Membership Application.
- (r) When the review of a refusal of a membership application has been conducted, the Co-op can use **Form I**, Notice of Result of Review of Refusal of Membership Application.

ATTACHMENT 2

Request for a Review of a Geared-to-Income or Special Needs Decision

This Attachment does not form part of the By-law itself. The board of directors may update it from time to time.

- (a) To request a review of a geared-to-income or special needs decision, a member of the household must give a written request to the Co-op.
- (b) The request must be received within the time frame in Government Requirements.
- (c) The Co-op can extend the time for giving a request for a review if the Co-op is satisfied that the member of the household acted in good faith and was unable to comply with clause (b) because of absence, accident, illness or some other reason beyond their control.
- (d) An individual may withdraw their request for a review by giving written notice to the Co-op. The withdrawal is not effective if it is received after the review is completed.

ATTACHMENT 3

Procedure for a Review of a Geared-to-Income or Special Needs Decision

This Attachment does not form part of the By-law itself. The board of directors may update it from time to time.

- (a) If the Co-op is responsible for doing the review of a decision, the Board will conduct the review.
- (b) The review must be completed within the time frame in Government Requirements after the request for the review is received.
- (c) Because of the time frames in Government Requirements, the board cannot extend the time for doing the review of a decision mentioned in section 6.4 (Kinds of Decisions under Government Requirements).
- (d) Each member of the household that requested the review will be given five days written notice of the board meeting at which the review will be conducted. The board can use the attached Form D, Notice of Board Meeting to Conduct Review.
- (e) Members of the household involved can attend and speak at the board meeting, or have a representative speak. The representative can be a lawyer or another person.
- (f) Directors, staff members and others who discussed the decision with the decision-maker or who took part in making the decision cannot take part in the review of a decision mentioned in section 6.4 (Kinds of Decisions under Government Requirements).
- (g) Anyone who is not knowledgeable about the relevant Government Requirements and Local Rules cannot take part in the review of a decision mentioned in section 6.4 (Kinds of Decisions under Government Requirements). See clause (a) of section 6.5 (Making Decisions).
- (h) The board can get help from someone with special knowledge, such as a representative of a support services agency (if applicable), their local federation or the manager of another Co-op.
- (i) That party can review the file before the meeting, but must give their advice to the board at the meeting so that the household involved can hear it and make any comments on it. The board will ask that party to sign a confidentiality agreement, if the confidentiality provisions of the Co-op's by-laws do not apply to them, unless they are bound by professional or other adequate confidentiality obligations.

- (j) In the case of medical or similar evidence, the board can rely on a letter from a doctor or other professional, but it must give a copy of the letter to the household with the notice of the meeting or within two business days of receiving it, if it is received after the notice of the meeting was sent.
- (k) The board can make any decision that could have been made originally. This decision could be more favourable to the household, or less favourable.
- (l) The board must give written notice of its decision to the individuals who requested the review within the time frame in Government Requirements after the board meeting. The board can use the attached Form G, Notice of Decision after Review.
- (m) The board can delegate responsibility for all reviews, or specific kinds of reviews, or a specific review to a committee made up of directors. The committee will perform the duties of the board under this section and all rights and responsibilities of the board will be exercised by the committee. The decision of the committee will be considered the decision on the review and cannot be appealed to the board.

ATTACHMENT 4

Request for a Review of a Refusal of a Membership Application

This Attachment does not form part of the By-law itself. The board of directors may update it from time to time.

- (a) To request a review of a refusal of a membership application, a member of the household must give a written request to the Co-op.
- (b) The request must be received within the time frame in Government Requirements.

Note: Your Service Manager will set a local rule about the time frame.

- (c) The Co-op can extend the time for giving a request for a review if the Co-op is satisfied that the member of the household acted in good faith and was unable to comply with clause (b) because of absence, accident, illness or some other reason beyond their control.
- (d) An individual may withdraw their request for a review by giving written notice to the Co-op. The withdrawal is not effective if it is received after the review is completed.

ATTACHMENT 5

Procedure for a Review of a Refusal for Membership Application

This Attachment does not form part of the By-law itself. The board of directors may update it from time to time.

- (a) The Board will conduct the review.
- (b) The review must be completed within the time frame in Government Requirements after the request for the review is received.
- (c) Each member of the household that requested the review will be given five days written notice of the board meeting at which the review will be conducted. The board can use the attached Form H, Notice of Board Meeting to Conduct Review of Refusal of Membership Application.
- (d) Members of the household involved can attend and speak at the board meeting, or have a representative speak. The representative can be a lawyer or another person.
- (e) Directors, staff members and others who discussed the decision with the decision-maker or who took part in making the decision cannot take part in the review.
- (f) The board can get help from someone with special knowledge, such as a representative of a support services agency (if applicable), their local federation or the manager of another Co-op.
- (g) That party can review the file before the meeting, but must give their advice to the board at the meeting so that the household involved can hear it and make any comments on it. The board will ask that party to sign a confidentiality agreement, if the confidentiality provisions of the Co-op's by-laws do not apply to them, unless they are bound by professional or other adequate confidentiality obligations.
- (h) In the case of medical or similar evidence, the board can rely on a letter from a doctor or other professional, but it must give a copy of the letter to the household with the notice of the meeting or within two business days of receiving it, if it is received after the notice of the meeting was sent.
- (i) The board can make any decision that could have been made originally. This decision could be more favourable to the household, or less favourable.
- (j) The board must give written notice of its decision to the individuals who requested the review within the time frame in Government Requirements after the board meeting. The board can use the attached Form I, Notice of Result of Review of Refusal of Membership Application.