DURHAM HOUSING BENEFIT

LANDLORD APPLICATION FORM

To Be completed by Owner or Managing Agent

Owner		
Name		Telephone No.
Address	Municipality	Postal Code
Email		
Cheques Payable to:		
Managing Agent		
Name		Telephone No.
Address	Municipality	Postal Code
Email		
Building Location		
Address	Municipality	Postal Code
Building Information		
Contact for Building Inspection		Telephone No.

Please Specify Complex Type				
Single/Detached ☐	Semi-detached ☐	Condominium ☐	Duplex ☐	Triplex ☐
Non-self contained ☐	Apartment (elevator) ☐	Apartment (walk up) ☐	Row Housing ☐	Row Housing/Stacked ☐

Government Program Build Under	Number of Stories	Year Built	Total Number of Units in Building

Units Available	Floor Area (Sq. ft.)	Number of Units Offered		Monthly Rent
		Regular	Handicapped	
Bachelor/Studio				
1-Bedroom				
2-Bedroom				
3-Bedroom				
4-Bedroom				
Please specify if the following are included as part of rent.		**Included**	**Not Included**	**Additional Charges**
	Heating (Method):			
	Hot Water			
	Water			
	Hydro			
	Refrigerator			
	Stove			
	Washer/Dryer			$
Are heat/utilities bundled? If so, who is the supplier?				
Television Service	Cable			$
	Satellite			$
Internet	Dial-up			
	High speed			
Parking	Indoor			$
	Outdoor			$
Recreation	Swimming Pool			$
Other (Specify)				$
I hereby certify that the above information is correct and the rents are in accordance with the *Residential Tenancies Act, 2006* and that the building is in compliance with the applicable Building Code and Fire Code requirements.		Authorized Signature		Date
Name and Title				