

Rent Assistance Benefit (RAB) Consent for Landlord Reference Check

SECTION 1: Personal Information		
Last Name	First Name	Preferred Name

SECTION 2: Authorization		
<p>In accordance with Section 40 (1)(d) of the Freedom of Information and Protection of Privacy Act, I authorize my Landlord to answer questions from Homeland Housing to determine eligibility for Rent Assistance Benefits and program renewal and participation.</p> <p>Homeland Housing may ask your Landlord to confirm the following:</p> <ol style="list-style-type: none"> 1. Tenancy, including the start and end date of the current lease/tenancy agreement; 2. Type of accommodation – apartment, townhome, house, approved basement suite; 3. Address; 4. Number of people occupying the rental premises, including any details; 5. Relationship to the applicant; 6. Confirmation of monthly rent amount and utility payment arrangement if applicable; and 7. Monthly rent payment history. 		
Landlord Name:	Telephone No.	Email:
Management Company Name (If Applicable):	Tenancy Start Date: dd/mm/yyyy	Tenancy End Date: dd/mm/yyyy

SECTION 3: Signature		
<p>I authorize Homeland Housing to contact the Management Company and/or Landlord as authorized above. I understand I can withdraw this consent at any time with written notice.</p>		
Applicant Name (Print):	Applicant Signature:	Date (day/month/year):

This information is being collected under the authority of the Alberta Housing Act and Section 33(c) of the Freedom of Information and Protection of Privacy Act (FOIP) and will be used to determine the eligibility of applicants, ongoing need, and program funding allocation of Rental Assistance Benefits. Collected personal information is protected from unauthorized access, collection, use, and disclosure in accordance with Alberta privacy legislation and can be reviewed or corrected upon request. If you have questions, please contact the FOIP Coordinator at Homeland Housing by telephone at (780) 939-5116 or by email at info@homelandhousing.ca.