



ST. ALBERT UTILITY RELIEF GRANT

The City of St. Albert is collaborating with the St. Albert Community Village in offering another **ONE TIME** Utility Relief Grant to households. This Grant is a one-time grant of \$75 or \$200 dependent of your housing type. This grant can be credited directly to your utility account or deposited into your bank and will **NOT** affect those on income supports. This grant is offered on a **ONE TIME** basis from January 1, 2018 to December 31, 2018. **Eligibility requirements are listed below.**

Eligibility:

- Your household's **total annual income** must be at or under the CNIT (Core Needs Income Threshold)
- You are 18 and over
- You have lived in St. Albert a minimum of 6 months with a fixed address and you must be the home owner or lease holder
- You meet the residency requirements as outlined below

FAMILY STATUS	CNIT THRESHOLD-2017
Individual with no dependents	\$31,000
Couple with no dependents	\$37,500
Couple/Individual with 1 dependent	\$44,000
Couple/Individual with 2 dependents	\$49,500
Couple/Individual with 3 dependents	\$54,500

****Residency Requirements**

All members of the household must be a Canadian Citizen, Permanent Resident or Landed Immigrant. Households with family members in Canada under a private sponsorship agreement are not eligible while the sponsorship agreement is in force.

How to Apply:

STEP 1: Confirm your eligibility

STEP 2: Complete an application form

STEP 3: Attach supporting documents and submit application

STEP 4: You will be notified by telephone or email once your application has been reviewed

Application forms can be found on our web site at www.stalbertcv.com. Email, fax or drop off completed application forms and supporting documents to:

St. Albert Food Bank and Community Village
30 – 50 Bellerose Drive, St. Albert AB T8N 3L5

ATTENTION: UTILITY COORDINATOR

sacvbk@telus.net

Fax: 780-459-0589

Phone: 780-459-0599 ext. 5



Before submitting your application, please review to ensure all required paperwork is included. Processing time may be delayed if incomplete. Applications with missing information will be held for 30 days to allow time to gather missing material and after 30 days will be deemed to re-submitting a new application with all new supporting documents.

Documents from all of the 5 categories below **MUST** be included with your application:

1. **Proof of status in Canada – one or several of the following may apply:**
 - Copy of Canadian birth certificate
 - Passport
 - Citizenship papers or Immigration documents, Record of Landing (IMM1000) and Permanent Resident Card (both sides)
2. **Proof of Address** – Home owner (Drivers License), Lease or Tenancy Agreement
3. **St. Albert Utility bill** – If applicable
4. **Proof of Income** (all household members)
(Students over 18 in school must have letter from school)
5. **Notice of CRA Tax Assessment** or all bank statements to all accounts or Pay Stubs

Please note:

- **All official documents must be current within 3 months and do not submit originals.**
- **Identification is required for each member listed on application**

Grievance Procedure

St. Albert Utility Relief Grant Program acknowledges and supports a client’s right to grieve the services provided and pursue effective resolution. Your grievance will be addressed professionally in a formal manner.

Important Notice

St. Albert Utility Relief Grant Program will comply with the provisions of the Freedom of Information and Protection of Privacy Act. It is the St. Albert Utility Grant Program’s intent to protect the privacy of its clients at all times in the collection, storage and destruction of information. Data collected will be used anonymously for future statistical analysis and reporting.

FOR OFFICE USE ONLY			
Date of approval			
Date sent to City of St. Albert			
Grant issuance method	<input type="checkbox"/> EFT	<input type="checkbox"/> Cheque	<input type="checkbox"/> Utility Account Credit
Grant amount	<input type="checkbox"/> \$75	<input type="checkbox"/> \$200	

This application is designed to collect specific information from Applicants applying for the St. Albert Utility Relief Grant Program in accordance with Section 33(c) of the Freedom of Information and Protection of Privacy Act.

ST. ALBERT UTILITY RELIEF GRANT APPLICATION

APPLICANT INFORMATION

Title: Mr. Mrs. Ms. Miss (please circle one)

Last Name:

First Name:

Phone 1:

Phone 2:

Email:

Address:

St. Albert, Alberta

Postal code: T8N

Date of birth: DD/MM/YY

Are you a Canadian Citizen: ___YES ___NO

If no, Permanent Resident?: ___YES ___NO

Are you a full time student? ___YES ___NO

OTHER PEOPLE RESIDING IN HOME

Last Name:

First Name:

Date of birth DD/MM/YY

Relationship to you: ___Spouse ___Son
___Daughter ___Other

Canadian Citizen: ___YES ___NO

Permanent Resident?: ___YES ___NO

If over 18 and not a full time student, do they have a source of income: ___Yes ___No (if yes, include required paperwork)

ADDITIONAL PEOPLE (attach extra sheet if required)

Last Name:

First Name:

Date of birth: DD/MM/YY

Relationship to you: ___Spouse ___Son
___Daughter ___Other

Canadian Citizen: ___YES ___NO

Permanent Resident?: ___YES ___NO

If over 18 and not a full time student, do they have a source of income: ___Yes ___No (if yes, include required paperwork)

ADDITIONAL PEOPLE

Last Name:

First Name:

Date of birth: DD/MM/YY

Relationship to you: ___Spouse ___Son
___Daughter ___Other

Canadian Citizen: ___YES ___NO

Permanent Resident?: ___YES ___NO

If over 18 and not a full time student, do they have a source of income: ___Yes ___No (if yes, include required paperwork)

HOUSING INFORMATION

Housing Type: (Please check one) ___ Single Family House/Duplex ___ Apt ___Townhouse
___ Basement Suite



Ownership Status: Own Rent

I have been a resident of St. Albert since: (Month, Year) _____

VERIFICATION REQUIRED

Home Owner:

Copy of Utility bill (**Water & Waste**) (min. 6 months old)

Proof of Rent:

Current copy of Lease

***Basement suites must be registered with the City of St. Albert. If you are in a basement suite, we may ask for a copy of the occupancy permit.**

INCOME INFORMATION

**** INCOME FROM ALL SOURCES FOR EACH WORKING HOUSEHOLD MEMBERS MUST BE DECLARED.**

PLEASE CHECK ALL HOUSEHOLD ANNUAL SOURCES OF INCOME BELOW:

Please check all that apply:

Household Income:	Employment	CPP	OAS	AB Seniors	AB Works	Other	ANNUAL INCOME
Applicant							
Person 1							
Person 2							
Person 3							
Person 4							

OTHER INFORMATION

Have you or anyone on the application ever received St. Albert Utility Relief Grant before?
 Yes No

If your application is approved, **and you DO NOT have a Utility Account**, how would you like to receive your grant? EFT (Electronic Funds Transfer) Mailed Cheque
- Note: If requesting EFT, please complete attached Direct Deposit Enrollment Form with Bank information.

Please note: There is a 6 week processing time

DECLARATION

The information you give will be kept confidential. The collection of information is authorized under section 33(c) of the Freedom of Information and Protection of Privacy Act and the privacy protection provisions in that act will protect it. Data collected will be used anonymously for future statistical analysis and reporting.

I declare this is my application. I declare that all the information in it is true and complete to the best of my knowledge.

_____	_____	_____
Print Name	Signature of applicant	Date