

Income and Asset Information Section • (IAS):

This section must be completed by each member

HOUSEHOLD MEMBER # _____

1 Personal Information

Last Name:	First Name:	Social Insurance Number
Home Phone Number:	Business Phone number:	Business Fax number:

2 Your Personal Current Income of All Sources:

Section	Source of Income	Type of Income	Date From	Date To	Gross Monthly Income \$
Section A	Employment Employment Verification Form Signed by your Employer <input type="checkbox"/>	Company Name/Employer			
Section B	Social Assistance Copies for Verification <input type="checkbox"/>	<input type="checkbox"/> Ontario Disability Support Payments <input type="checkbox"/> Ontario Works <input type="checkbox"/> Other			
Section C	Self-Employment Copies for Verification <input type="checkbox"/>	Type of Business			
Section D	Pensions and Allowances Copies for Verification <input type="checkbox"/>	<input type="checkbox"/> Old Age Security			
		<input type="checkbox"/> Guaranteed Annual Income Supplement			
		<input type="checkbox"/> Canada Pension Plan/ Quebec Pension			
		<input type="checkbox"/> Other Pension(s)			
Total ;					

3 Your Personal Assets.

Have you signed a "Standard Agreement to Sell your Property"? Yes NO

Section	Assets	Type of Assets	Value
Section E Copies for	Income Producing Assets Verification <input type="checkbox"/>	All Savings Accounts Balance	
		Other Accounts Balance	
Section F Copies for	Non-Income Producing Assets Verification <input type="checkbox"/>	<input type="checkbox"/> Life Insurance	
		<input type="checkbox"/> Real Estate	
		<input type="checkbox"/> Other	
Total ;			

For More Income and Asset Information Pages
 Open the "Extra_Page_New_Household_Member.pdf" found
 in the www.kfhc.ca Tenants Download Files Section