

Please review the Fair Entry Information Guide and/or the Fair Entry Seniors Services Home Maintenance Program Information Guide before completing your application.

Do you live in Calgary? ☐ Yes ☐ No

(You must live in Calgary to receive these benefits. If you do not live within Calgary City limits, do not complete this application. Call 211 to find out what services are available to you in your location).

Section 1: Program(s) I am interested in (*Indicates a mandatory field)

1.1 Let us know which program(s) you are interested in by checking the box of the program(s) below*

- ☐ Recreation Fee Assistance
- ☐ Calgary Transit Low Income Monthly Transit Pass (Adult or Youth)
- ☐ Calgary Transit Low Income Annual Transit Pass (Senior)
- ☐ Seniors Services Home Maintenance for those 65 and older
(*Personal Health Number is required for the eldest senior only*)
- ☐ No Cost Spay or Neuter Program for your cat
- ☐ Property Tax Assistance Program for homeowners
- ☐ Calgary Parking Low-Income Market Permit

SAMS ID Number
(for office use only)

Section 2: Personal Information (*Indicates a mandatory field)

2.1 APPLICANT INFORMATION	First Name*	Middle Initial	Last Name*	
	Preferred Name			Date of Birth* (YYYY-MM-DD)
2.2 SPOUSE INFORMATION	First Name**	Middle Initial	Last Name**	
	Preferred Name			Date of Birth** (YYYY-MM-DD)
2.3 CONTACT INFORMATION RESIDENTIAL ADDRESS	Address* (Unit #, Street #, Street Name, City)			Postal Code*
MAILING ADDRESS (If different from above)	Address* (Unit #, Street #, Street Name, City)			Postal Code*
Email address (please print clearly)		Phone Number*		Alternate Phone Number

**Required information if applying to Seniors Services Home Maintenance program.

Section 3: Alternate Contact

3.1 You can provide an alternate contact and we can communicate with them if you would prefer.

First Name	Last Name	Email Address	Phone Number	Relationship to Applicant

Section 4: Seniors Services Home Maintenance Program Only

4.1 Personal Health Number of eldest applicant: _____ - _____

IF SENIORS SERVICES HOME MAINTENANCE PROGRAM IS THE ONLY SUBSIDY PROGRAM YOU ARE APPLYING TO, PROCEED TO SECTION 11 TO SIGN YOUR APPLICATION, OTHERWISE PLEASE CONTINUE WITH SECTION 5.

Section 5: Other Household (Family members) Information (not already in Sections 2.2). Refer to Section 5: Other Household (Family members) Information and Section 8: Income Verification in the Fair Entry Information guide to determine whether you are required to list family members below.

	First Name	Middle Initial	Last Name	Preferred Name	Date of Birth* (YYYY-MM-DD)
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					

Section 6: Property Tax Assistance Program Customers Only

6.1 If you are applying to the Property Tax Assistant Program, are you a homeowner?

☐ Yes ☐ No

6.2 Do you own more than one property?

☐ Yes ☐ No

Section 7: Calgary Transit Customers Only

7.1 Calgary Transit Access ID (if applicable) _____

7.2 Approved Pick-ups

Any client in the household and approved pick-ups outside the household (limit 2) must present their **own** photo ID at time of purchase.

First Name	Last Name	Agency Name (if applicable)	Phone Number

Section 8: No Cost Spay/Neuter Program Only

8.1 If you are applying to the No Cost Spay/Neuter program for your pet, do you have a valid pet license?

☐ Yes ☐ No

Section 9: Calgary Parking Low-Income Market Permit Program Only

9.1 If you are applying to the Calgary Parking Low-Income Market Permit program, please identify one person in your household who is the registered vehicle owner applying to this program.

	First Name	Last Name	Preferred Name
1.			

Section 10: Income verification

10.1 Refer to the Fair Entry Information guide “Section 5: Other Household (Family members) Information” and “Section 8: Income Verification” to determine who in your family is required to provide income documents alongside this application.

Section 11: Consent and Statement

I _____ declare that:
Applicant Name (please print)

1. I am the main applicant and it is my responsibility to inform all members of my household about the program and conditions of use.
2. I give The City of Calgary my permission to check the information within this application. My mandatory date of birth will be used as a client identifier alongside my SAMS ID.
3. I provide The City of Calgary permission to share information within this application among the different City of Calgary subsidy programs and my designated alternate contact for the purpose of secondary screening and/or service delivery, with the exception of the PHN provided by Seniors Services Home Maintenance (SSHM) clients which I consent to only be provided to the SSHM subsidy program.
4. The City of Calgary may contact me and/or my alternate contact in matters pertaining to this application.
5. The information I have provided in this application is true.
6. If I or anyone in my household has a change in circumstances (e.g. change of address) I will notify Fair Entry immediately. I can do so by calling 311 or visiting a Fair Entry location at the Municipal Building or Village Square.
7. Misuse of program privileges or misinformation provided on this application may result in a loss of privileges or penalty.
8. If I am applying for the SSHM program, I give SSHM permission to share my Personal Health Number with Alberta Seniors & Housing for the purpose of determining eligibility for the Special Needs Assistance (SNA) for Seniors benefit. I understand and agree that if I am eligible for housekeeping and/or yard maintenance benefits under the SNA program, ongoing service information along with my date of birth and PHN will be shared to enable payments that will be made directly from Alberta Seniors & Housing to the SSHM program on my behalf, for the delivery of the defined home maintenance services, and that the benefit(s) is assigned to me personally by the SNA program in the same manner as if the benefit(s) was paid directly to me. I agree to SSHM sharing my contact information and my SAMS ID (unique identifier from Fair Entry) with approved sub-contractors that provide direct delivery of the defined home maintenance services for the purposes of identifying me, contacting me and for administrative purposes related to service-delivery.

Date (YYYY-MM-DD)

Signature of Applicant (or Legal Guardian/Trustee)

The information collected on this form is in accordance with the Freedom of Information and Protection of Privacy Act, Section 33(c) and the Health Information Act as the provincial legislation requiring Seniors Services Home Maintenance specific data. The information will be used to determine eligibility for City of Calgary subsidy programs/services, update current personal information within the programs for which you have applied, provide follow up information for City staff, if required to access programs/services, to collect statistical information and to support reporting of aggregate data of program subsidy participation. The personal information shared with the external provider is your first name, last name, and date of birth. Information may be shared across subsidy programs for the purposes of program/service access with the exception of the Personal Health Number collected for the Seniors Services Home Maintenance program which will not be shared across subsidy programs. If you created a myID personal account, your first name and last name will be transferred to your Fair Entry online application. If you have questions on the Fair Entry Application process or Program, call the Program Coordinator at 403-268-2436; reach us at the Municipal Building, 3rd Floor, 800 MacLeod Trail S.E., Monday – Friday, 8 a.m. to 6 p.m., or email fairentry@calgary.ca.

REQUIRED DOCUMENTS CHECK LIST FOR THE FAIR ENTRY APPLICATION

- ☐ Fair Entry Application – Completed and signed.
- ☐ Proof(s) of Income – Only required if you are applying to Transit, Recreation, No Cost Spay/Neuter, Property Tax Assistance, Waste and Recycling and Calgary Parking Low-Income Market Permit programs.

Reference to the Statistics Canada Low Income Cut-Off (LICO) Table below only if you are submitting a Notice of Assessment:

Statistics Canada Low Income Cut-Off (LICO) Table

Size of family	Total Income (Line 15000)
1 person	\$29,380
2 persons	\$36,576
3 persons	\$44,966
4 persons	\$54,594
5 persons	\$61,920
6 persons	\$69,835
7 or more	\$77,751

- ☐ Proof of age (specifically for applicants to the Seniors Services Home Maintenance and Low income senior's transit pass program). Examples of proofs of age (only one is required):
- a copy of your Birth Certificate
 - a copy of your Driver's license
 - a copy of your Alberta Government Identification Card
 - a copy of your Alberta Health Care Card
 - a copy of your Passport
 - a copy of your Baptismal Certificate
- ☐ Proof of Calgary Address – Examples of proofs of current Calgary residential address (only one is required):
- a copy of your Alberta Driver's License or Alberta Government Identification Card
 - a copy of utility, telephone or cable bill dated within the last 30 days
 - a copy of a bank statement on letterhead with your name and address dated within the last 30 days
 - a copy of any government document with your name and current address dated within the last 30 days
 - a copy of signed lease agreements

Note: We do not accept P.O. Boxes, Rural Routes, Range and Township Roads Addresses as valid proof of address.