

Resident Affordability Program Application 2025



Applications are by appointment only. Please complete this form and bring it with you.

1 Columbia Avenue West, Devon T9G 1A1. Book an Appointment: 780-987-8308

Main applicant information

First Name			Last Name			Email			
Current PHYSICAL address (must match the verification documents)						Postal code		Phone:	
Date of birth			Marital Status						
MM DD YYYY			<input type="checkbox"/> Single <input type="checkbox"/> Living as a Couple <input type="checkbox"/> Widowed <input type="checkbox"/> Married						

Additional Family Members (Must ONLY include your partner, and your children under 18 years old)

First Name	Last Name	Relationship to Applicant	Date of Birth		
			Month	Day	Year

Proof of Eligibility

Income thresholds vary. Visit devon.ca/RAP for more information. Recipients of the Resident Affordability Program must be residents of Devon, be a Canadian citizen, permanent resident or have a closed work permit, have an annual income below the thresholds indicated, and be resident for a minimum of four months with a permanent address or nine months on a short-term lease (e.g. month to month).

Address. Please provide **one** of the following requested documents to verify your current **physical** Devon address

- ☐ Current bill from a utility company ☐ Current financial statement ☐ Drivers' license ☐ Lease agreement*

*if month to month, you will be required to provide proof of residency in Devon for minimum of nine months.

How long have you lived in Devon? _____ YEARS _____ MONTHS

I am a: ☐ Canadian Citizen ☐ Permanent Resident or ☐ have a closed work permit

Income. Please provide one of the following documents for proof of income:

- ☐ Latest Notice of Assessment showing line 150 total income issued by Canada Revenue Agency
☐ AISH Health Benefits card or other provincial government issued document identifying you as a current AISH recipient
☐ Government issued documentation showing income support, i.e. Alberta Works, Alberta Seniors Benefit

ID Card. You can choose to refuse the ID card but will restrict your access to transit and business discounts (where available / applicable). ID cards will be issued at a later date and can be collected or mailed (regular mail only).

Do you wish to receive the ID card? Yes No ☐ Collect at office ☐ Mailed

I would like to be notified of new discounts, programs / services offered and other opportunities within Devon: YES NO

I certify that I am a current resident of Devon, and that the information I have provided is accurate. I am aware that if any information I have provided is fraudulent, my eligibility will be revoked.

Date: _____

Sign: _____

For Office Use Only

Income: _____

ID Card Issued YES NO ID Card # _____

Supporting Documents

Entered by: _____ Date: _____

Freedom of Information and Protection of Privacy – The personal information on this form is being collected under authority of section 33(c) of the Freedom of Information and Protection of Privacy (FOIP) Act. If you have any questions about the collection or use of your personal information, please contact the FCSS coordinator at 780-987-8325.