

Application no.

Your Property Manager/Landlord is applying to have their rental property participate in Efficiency Manitoba's Income Qualified Program. Property Managers/Landlords must show the property is rented to Tenants who meet our Income Qualified Program income thresholds, and so your proof of income documents are required.

If you agree to provide copies of your Income Tax Return and Notice of Assessment for the current tax year to Efficiency Manitoba, they will only be used to determine eligibility of the rental property.

Instructions: Fill in all blank fields below. List the names of all Tenants 18 years of age and older who live in the rental property and are providing proof of income documents. Each named Tenant must sign this form.

Do you self-identify as a Canadian Indigenous person (person of North American Aboriginal Ancestry including First Nations (status or non-status), Inuit, or Metis)? Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, are you First Nations (status) <input type="checkbox"/> First Nations (non-status) <input type="checkbox"/> Inuit <input type="checkbox"/> Metis <input type="checkbox"/> Prefer not to say <input type="checkbox"/>

I/We, _____, PRINT YOUR NAME(S)
hereby voluntarily agree, that my/our 20____ Income Tax Return and 20____ Notice of Assessment (collectively "Information"),
YEAR YEAR
provided by me/us to Efficiency Manitoba on _____, will be used by Efficiency Manitoba solely for the purpose of
CURRENT DATE (YEAR, MONTH, DAY)
verifying my/our gross income so that an assessment of 's _____ Eligibility
PRINT YOUR LANDLORD'S NAME
Application to Efficiency Manitoba's Income Qualified Program for _____
RENTAL PROPERTY ADDRESS
can be completed.

- I/We understand that my/our consent can be withdrawn by me/us, for any reason, at any time by notifying the program at 204-944-8088 or 1-888-944-8088.
- I/We understand that following withdrawal of my/our consent, Efficiency Manitoba will permanently dispose of my/our Information in a confidential manner.

BY SIGNING THIS CONSENT AS OF THE DATE WRITTEN BELOW, I/WE ACKNOWLEDGE HAVING READ, UNDERSTOOD AND AGREED TO THE ABOVE.

Dated _____ 20_____

Signature of Tenant (1)

Tenant's full legal name (please print)

Signature of Tenant (2)

Tenant's full legal name (please print)

Signature of Tenant (3)

Tenant's full legal name (please print)

Signature of Tenant (4)

Tenant's full legal name (please print)

Mail this Voluntary Consent form along with a copy of the Income Tax Return and Notice of Assessment for each tenant listed above to:

Efficiency Manitoba
Income Qualified Program
PO Box 247 STN MAIN
Winnipeg MB R3C 2G9

If you have any concerns or questions, contact Efficiency Manitoba at:

Toll-free 1-888-944-8088
incomequalified@efficiencyMB.ca