



calgaryhousingcompany.org

587-390-1200

Declaration of No Income

Name(s): _____

Address: _____

I/We _____, of Calgary in the Province of Alberta, declare the following to be true:

I/We currently have *NO* source of income. I/We currently *DO NOT* receive:

- Social Assistance/Income Support
- AISH
- Employment Insurance
- Pensions/Benefits
- Workers Compensation
- Student Loans/Grants
- Child Support/Spousal Support
- Investment Income

I/We will inform Calgary Housing when this changes.

Signed: _____

Dated: _____

West District Office
Braithwaite Boyle Centre
1701 Centre Street N
Calgary AB T2E 8A4

East District Office
Marlborough Mall Prof. Building
320, 433 Marlborough Way NE
Calgary AB T2A 5H5

South District Office
Glenmore & Centre Shopping Centre
#18, 6624 Centre St. SE
Calgary AB T2H 0C6