

Declaration of Child Support (DCS)

Tenant/Co-op Member Information				
Last Name	First Name			
Unit Number Address				
Absent Parent (person responsible to pay support)				
Last Name	First Name			
Street Address				
Town/City	Province	_ County		
Date of birth				
Please tell us about this person (check all that apply):				
☐ I have no contact with this person and do not know where they live				
☐ This person is employed.	Employer:			
☐ This person is on Ontario Works.				
☐ This person is on ODSP (disability benefits).				
This person is in jail/incarcerated	Release date (approximate):			
This person is dead/deceased.				
I, or my children, have been abused by this person.				
Children				
First and last names of each child of	the Absent Parent	Date of birth of child		
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Current Support Arrangements Please tell us about any agreement you have or had for support even if it is not being paid. Date of court order: I have a court order. Amount of court order: \$ Amount being paid per month: \$ I have a written agreement. Date of agreement: Amount of agreement: \$ Amount being paid per month: \$ Is your written agreement registered with the courts? | Yes | No Is written agreement registered with the Family Responsibility Office (FRO)? | Yes | No I have a Verbal agreement. Amount being paid per month: \$ I have never had an agreement for support. Please explain the reason: Are you willing to pursue support? Yes, I am willing to pursue child support. No, I do not wish to pursue child support because_____ **Declaration** I declare that all the information given on this form is true and correct to the best of my knowledge, and

that I have not knowingly left out information or provided false information.

I have attached:

Ш	a copy of my co	ourt order or writter	agreement

a Schedule A from the Family Responsibility Office (FRO) because my court order or written agreement is not being paid in full.

Applicant's Name _____

Signature _____ Date ____

This information is collected under the legal authority of the Housing Services Act, 2011 for the purpose of administering the social housing programs prescribed in this Act and its associated Regulations. Questions about this collection should be forwarded to the Director of Housing Services, Region of Durham at 605 Rossland Road East, Whitby ON, L1N 6A3 or 905-668-7711 or 1-800-372-1102.