

Insert Name and Address Here

Dear Salutation:

**Re: Notice – Over-Housed and Income Above Household Income Limit**

It has been determined that your household is now overhoused. This means that you are living in a unit that is larger than the unit for which you qualify under local occupancy standards.

According to the information provided with respect to your family size and/or household composition, your household is eligible for a [No. of bedrooms eligible for (i.e. 1, 2, or 3)]-bedroom unit. However, your income is above the household income limit for a [No. of bedrooms eligible for (i.e. 1, 2, or 3)]-bedroom.

After 12 consecutive months of being overhoused, and your income being above the household income limit, you will no longer be eligible for rent-gear-to-income assistance and you will have to pay Market rent for your unit. If your income decreases within 12 months of receiving this notice, you may be offered a transfer to an appropriate unit as soon as one becomes available.

If you disagree with this decision, please [your contact information] to discuss your concerns.

If you have contacted your non-profit/co-operative housing provider and you still disagree with this decision, you may ask for an independent review of the decision. People who were not involved in making the original decision will review the decision to ensure compliance with the *Housing Services Act* and regulations.

Any member of the household may request the review. The request must be made in writing within **30 days** of this notice, and clearly marked "Request for Review", or you may complete a Request for Review form, which is available at any Community and Social Services office or any non-profit/co-operative housing provider.