



## Ontario Photo Card – Address Requirement for the Homeless or Marginally Housed Applicants

The Ontario Photo Card is a government issued photo identification card for individuals who do not hold a valid Ontario driver's licence. In order to obtain a photo card, an Ontario residential address is required. This form must be completed by a recognized institution to assist applicants who are without a place of permanent and principal residence. The institution authorizes the applicant to use the institution's address to acquire an Ontario Photo Card.

For ServiceOntario centres that offer photo card service visit: [ServiceOntario.ca/findservices](http://ServiceOntario.ca/findservices).

It is a serious offence to make a false statement. Under provincial legislation, the penalty for making a false statement may include a fine and/or imprisonment.

### Section 1 - Ontario Photo Card Applicant Information.

Last Name	First Name	Middle Initial
Date of Birth (if known):		
Y	M	D

### Section 2 - Recognized Institution Information.

Our Recognized Institution listed below is assisting the applicant named in Section 1, in obtaining an Ontario Photo Card.

Name of Recognized Institution		
Street No. and Name or Lot, Conc. and Township		Apt. No.
City, Town or Village	Province	Postal Code

### Residential and Mailing Address.

Under the *Ontario Photo Card Act*, 2008, the definition of a resident of Ontario means an individual who lives primarily in Ontario, whether or not the individual has a permanent residence in Ontario.

Please check  the appropriate answer.

The applicant named in Section 1 above has no fixed address, therefore the institution's address will be used for a residential and mailing address.

**OR**

The applicant named in Section 1 above, currently resides at:

Street No. and Name or Lot, Conc. and Township		Apt. No.
City, Town or Village	Province	Postal Code

However, he/she is experiencing significant distress due to poor conditions at their residential address, therefore the institution's address will be used for a mailing address.

**I certify this information to be true to the best of our knowledge and that it has been verified to the best of my ability.**

Name of Institution Representative (print)	Title
Signature of Institution Representative	Date
	Y                      M                      D