



Workforce Acquisition

Application for Daily Travel/Room & Board Allowance (01/11)

Personal Data	Mr. Mrs. Miss Ms. (circle one)	Surname (last name)	Employer		Emp#	Payroll #
		Given name(s) in full	Social insurance no.		Trade	
Definition of regular residence	Regular residence is defined as an employee's principle place of residence, and specifically, it is the place where an employee maintains a self-contained, domestic establishment (i.e. a dwelling house, apartment or similar place of residence where a person generally eats and sleeps). An employee must demonstrate proof of financial commitment to their regular residence in accordance with this form. For the purpose of Daily Travel / Room and Board Allowance, a boarding house facility will not meet the requirements of a regular residence, as it is not a self-contained residence.					
Complete address of regular residence	Street & number, apt. no., rural route no.: NOTE: P.O. Box #s are not acceptable as a complete address					
	City or town:		Province:	Postal code:	Home phone no.:	
	If the above address is a rural route, please describe the exact location (i.e. nearest major intersection):			Work location or declared assembly point:		
	I hereby declare that I have more than one residence which I can reside at. Additional address as follows:					
	Street & number and apartment number:					
	City or town:		Postal code:	Telephone no.:		
Verification requirements for room & board / daily travel allowance	<p>Room and Board Allowance: I understand that in order to qualify for room and board allowance, I must maintain both of the following: 1) A <i>regular residence</i>, as defined above, and, 2) temporary accommodation, (short term / not permanent), at or near my project / work location. My work location or assembly point must be over 97 radius km from by <i>regular residence</i>. To verify my entitlement for Room and Board Allowance, I am required to provide current documentation acceptable to the approving authority relating to both regular residence and temporary accommodation. For the purpose of verification, I understand that I must provide TWO (2) verification documents. I must provide documentation of a current utility, as well as one of the following forms of documentation acceptable to the approving authority: a detailed lease, a detailed Landlord Statement showing Landlord's name and phone number, description and location of rental premises, date covered and evidence of financial commitment, tax notice/bill, mortgage statement or deed. I understand that ALL information I provide to the approving authority is subject to verification. I understand that I will be advised by the approving authority if I do not qualify for Room and Board Allowance.</p>					
	<p>Daily Travel Allowance: I also understand that if I do not qualify for Room and Board Allowance, I may be entitled to Daily Travel Allowance. Daily Travel allowance is calculated in radius kilometers from the employees <i>regular residence</i> to the work location or declared assembly point. To verify my entitlement for Daily Travel Allowance, I am required to provide current documentation acceptable to the approving authority relating to my <i>regular residence</i>. I understand I must provide one of the following with both my name and address shown: current driver's license showing expiry date OR current utility bill OR lease or detailed landlord's statement OR property tax notice/bill or mortgage statement. All information you provide to the approving authority is subject to verification.</p>					
	<p>I hereby apply for Room and Board Allowance or Daily Travel Allowance based on the following information:</p>					
	<p>Effective Date: _____</p>					
	<p>Do you travel daily from the above-noted address you are declaring as your regular residence to your work site or assembly point? <input type="radio"/> yes <input type="radio"/> no</p>					
	<p>If no, please indicate address below for where you travel from daily:</p>					
	Street & number and apartment number:					
	City or town:		Postal code:	Telephone no.:		
Employee responsibility	I agree to notify my employer and the Workforce Acquisition Office of any change to my regular residence and any other change of address or conditions that may effect my Daily Travel or Room and Board entitlement within 5 working days of such change, and to provide such additional information relevant to this application as may be required from time to time. Allowance will be adjusted accordingly on change of work location or assembly point.					
	Failure to notify the Workforce Acquisition Office of any change to your regular residence will result recovery of any overpayments and may be cause for disciplinary action up to and including termination.					



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Declaration	<p>I declare that I have read and understand the contents of this form. I further declare that all the foregoing information I have provided is true, accurate and complete and all information I have provided is subject to verification by Hydro One Networks Inc. I understand that if I provide Workforce Acquisition with any false, inaccurate or incomplete statement(s) relating to my regular residence and / or any other address, my entitlement for Daily Travel or Room and Board allowance will be affected and any overpayments will be recovered and these actions may be cause for disciplinary action up to and including termination of my employment. Providing false information is considered fraud by Hydro One Networks Inc. and may result in criminal prosecution under the Criminal Code of Canada or civil action by Hydro One Networks Inc.</p> <p>My signature acknowledges my understanding of all of the terms contained on this form.</p>		
	_____	_____	_____
	Date	Signature	Signature of Witness

Waiver	<p>I hereby give written authorization to permit the Employer to make a claim against and / or deduct from my wages payable, any amount(s) owed to the Employer in respect of Room and Board Allowance / Travel Allowance, in accordance with the <i>Employment Standards Act, 2000</i>, S.O. 2000, c. 41, and as set out in the CUSW / PWU Hiring Hall / LIUNA OPDC Collective Agreements</p>		
	_____	_____	_____
	Date	Signature	Signature of Witness

For Workforce Acquisition Use Only	Received by Workforce Acquisition Office	Date	
	Calculated radius distance	_____	
	(a) amount of room & board allowance	_____	Effective _____
	(b) amount of daily travel allowance	_____	Effective _____
	Travel Allowance approved <input type="radio"/>		
Room & Board allowance approved <input type="radio"/>			
	_____	_____	
	Signature	Date	