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The Seniors Care Grant provides financial support to low-income seniors to help them live well in their homes.

The Seniors Care Grant helps low-income seniors by providing a Grant of \$750 for each household, to assist with the cost of:

- Household services (like lawn care, snow removal, grocery delivery, transportation, small home repairs, phone service and more)
- Healthcare services (like physiotherapy, mental health support, and more)
- Home heating costs (like furnace oil, natural gas, propane, firewood, wood pellets, electricity and repairs and regular maintenance for home heating systems) – **for more help with heating costs, you can also apply to the Heating Assistance Rebate Program (HARP) between 16 October 2023 and 31 March 2024**

**Important:** An application can only be made once per program year (September 1, 2023, to March 31, 2024).

To be eligible for the Seniors Care Grant:

- You still reside in your home.
- Your name is on the property title, band administration letter (on reserve), residential lease agreement, or Certificate of Claim
- You are 65 years of age or will be 65 years of age by March 31, 2024
- You have an annual household net income of \$37,500 or less.

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#### HOW TO APPLY

Consider applying online if you can—  
you could save on mailing time and get your grant(s) faster.

**APPLY ONLINE at:** [www.novascotia.ca/seniorscaregrant](http://www.novascotia.ca/seniorscaregrant) 

If you are not applying online, submit your signed and completed application form by mail or fax by **March 31, 2024**

✉ **Send by mail to:** Seniors Care Grant, PO Box 160, STN Central, Halifax, NS B3J 2M4

📠 **Send by fax to:** 902-428-2449

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#### AFTER YOU APPLY

Wait to receive your grant(s).

- If you currently receive your personal income tax refund from the Canada Revenue Agency by direct deposit, your rebate will be deposited into the same bank account you have registered with CRA once it's approved.
- If you do not receive your income tax refund by direct deposit, your cheque will be mailed within 8 weeks.
- Keep a copy of your household and health services receipts, and if applicable, a copy of your heating bill/receipt until April 1, 2025.
- If you provide your email address, we may email you if we require any additional information. Keep an eye out for email notifications from [seniorsgrant@novascotia.ca](mailto:seniorsgrant@novascotia.ca).
- If denied, a written letter will be mailed to you.
- You may be required to provide a copy of supporting documentation as part of an audit.

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**For more information call: 902-424-5200 or 1-800-670-4357 toll free in Nova Scotia.**

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**APPLICANT INFORMATION AND SIGNATURE(S) REQUIRED ON REVERSE ➡**

**1 GIVE YOUR DETAILS**

Submit only one application per household. *Please print clearly.*

Civic Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Do you? ☐ OWN YOUR HOME ☐ RENT YOUR HOME ☐ PARTICIPATE IN LAND TITLES INITIATIVE  
☐ HAVE BAND LETTER (reside on reserve)

Mailing Address (if different than Civic): \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Social Insurance Number (SIN): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Date of Birth (DD/MM/YYYY): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Email: \_\_\_\_\_

Cell #: ( ) - Home #: ( ) -

**Provide details if you have a spouse/partner or other adult living in the home with you**

Other Adult First Name: \_\_\_\_\_ Other Adult Last Name: \_\_\_\_\_

Social Insurance Number (SIN): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Date of Birth (DD/MM/YYYY): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**2 SENIORS CARE GRANT: The rebate is in the amount of \$750 for expenses related to service costs incurred between April 1, 2023, and March 31, 2024. It's important to keep track of all eligible expenses. You may be asked to provide receipts for the full amount at a later date.**

**Important:** An application can only be made once per program year (September 1, 2023 to March 31, 2024).

**3 PROVIDE YOUR SIGNATURE(S) BELOW**

I/We declare that the information provided on this application form is true and correct to the best of my/our knowledge. I/We attest that I/We have read and understand the requirements of the program.

I/We understand that Service Nova Scotia will collect, use, and disclose my/our personal information only for the purpose of determining, verifying my/our eligibility and for the administration of Seniors Care Grant Program, and/or as authorized by the Freedom of Information and Protection of Privacy Act, and will collect statistical information for program review purposes.

I/We understand that Service Nova Scotia may contact me/us at a later time to request proof of address, proof of income and/or proof of services paid.

**Consent for Service Nova Scotia and Canada Revenue Agency to share my personal information.**

To establish eligibility for the program, I/we authorize Service Nova Scotia to share my/our given name(s), surname(s), SIN, and date of birth and to obtain and verify the following information from CRA: given name(s), surname(s), SIN(s), date of birth, marital status, and income as reported on eligible years taxes. If available, the primary applicants' banking information can be obtained from CRA to deposit to the grant electronically.

*I/We have read the section on the collection, use and disclosure of personal information and by signing below consent to sharing of my/our personal information between Service Nova Scotia and Canada Revenue Agency. **Note: without consent your application cannot be accepted.***

***If you filed your income tax return as married or common-law, you must supply BOTH signatures for processing.***

Signature of applicant: X  Date: \_\_\_\_\_

Signature of spouse/  
partner/other adult: X  Date: \_\_\_\_\_

☐ **(Optional)** The Department of Cyber Security and Digital Solutions can contact me by email about future research studies. ***If you wish to withdraw your optional consent later (to remove your email from the list), please call 902-424-5200 (HRM) or 1-800-670-4357 toll free in Nova Scotia.***