



If you want the Landlord and Tenant Board (LTB) to waive fees, you **MUST** complete this **Fee Waiver Request** and attach it to the **FRONT** of the application or request form(s) you want to file and/or the description of what you want the LTB to provide.

Part 1: General Information

First Name:	Last Name:
Mailing Address:	Daytime Phone Number:
Email Address:	

Part 2: Reason for Request

What is the primary source of your household income?

Select either Reason 1 or Reason 2. Then, provide the information requested under the reason you selected.

Note that your household means you, your spouse and dependent children. Your household income includes all of the income (before taxes and deductions) for all people living in your household.

- Reason 1 – Income Support:** Select this reason if the primary source of your household income is one or more of the income support programs listed below.

Check the box(es) next to your household's primary source of income.

- Ontario Works
 Ontario Disability Support Program (ODSP)
 Old Age Security Pension (OAS) together with Guaranteed Income Supplement
 War Veterans' Allowance
 Canada Pension Plan

- Reason 2 – Other:** Select this reason if your gross monthly household income is less than the amount set out in the table below.

Select the appropriate circle to indicate the number of people in your household, including yourself:

- 1 2 3 4 5 or more

The combined gross monthly income from all sources (before taxes and deductions) for my household is:

\$ •

To be eligible for a fee waiver, your gross monthly household income must be below the threshold set out below:

Threshold	
Number of people in household	Gross monthly household income
1	Less than \$1,650
2	Less than \$2,475
3	Less than \$2,840
4	Less than \$3,390
5 or more	Less than \$3,940

Part 3: Declaration

Instructions: Do not sign your *Fee Waiver Request* until you are sure that you understand what you are declaring here.

To the best of my knowledge, the information in this *Fee Waiver Request* is complete and accurate.

I understand that it is an offence under s. 234 of the *Residential Tenancies Act, 2006* to file false or misleading information in my *Fee Waiver Request*.

I understand that I may be required to provide financial documents to prove the information in the request if I am asked to do so by the LTB.

I understand that personal information contained on this form is collected under the authority of s. 181.1 of the *Residential Tenancies Act, 2006*. This information will be used to determine fee waiver eligibility. Any questions about this collection may be directed to a Customer Service Officer at **416-645-8080** or toll-free at **1-888-332-3234**.

Signature:	Date:
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The LTB will provide you with a copy of your approved or denied *Fee Waiver Request* form to notify you of whether or not it has been approved. If the request is denied, the LTB will not process the attached request until payment is received.

FOR OFFICE USE ONLY

Fee Waiver is: Approved Denied (criteria not met)

Date Received:

CSO Initials:

File number(s) relating to the request:
