



Important Information for Tenants

Use this form to apply to have the Board determine whether your rent should be reduced because:

- your landlord has reduced a service or facility that was previously provided to your unit or to the residential complex, or has stopped providing it (it was discontinued),
- the municipal taxes and charges for the residential complex you live in have decreased.

Instructions for Form T3 are available on the Board's website at sjto.ca/LTB.

1. Complete all three parts of this application.
 - **Part 1** asks for general information about:
 - the rental unit covered by this application,
 - you and the other tenants living in the unit, your landlord and other parties to the application,
 - any other unresolved applications that relate to the rental unit.
 - **Part 2** asks you to select the reasons for your application and provide the information required for those reasons.
 - **Part 3** requires your signature or that of your representative, and, if you are being represented, your representative's contact information.
2. Complete the *Request for Accommodation or French-Language Services* form at the end of this application if you will need additional services at the hearing.
3. File all pages of the application with the Board (not including this page). The Board will send you a *Notice of Hearing* showing the time and location of your hearing.
4. Pay the application fee to the Board at the same time as you file the application. The Board will not process your application unless you pay the fee. Your T3 application fee is **\$50** for the first unit and **\$5** for each additional unit to a maximum of **\$450**. If you file the application in person, you can pay the fee by cash, credit card, debit card, certified cheque or money order (certified cheques and money orders must be made payable to the Minister of Finance). If you mail the application, you can't pay by cash or debit card.
5. Contact the Board if you have any questions or need more information.

416-645-8080

1-888-332-3234 (toll free)

sjto.ca/LTB



Read the instructions carefully before completing this form. Print or type in capital letters.

PART 1: GENERAL INFORMATION

Address of the Rental Unit Covered by This Application

Street Number

Street Name

Street Type (e.g. Street, Avenue, Road)

Direction (e.g. East)

Unit/Apt./Suite

Municipality (City, Town, etc.)

Prov.

Postal Code

Tenant Names and Address

Tenant 1: First Name (If there are more than 2 tenants, complete a *Schedule of Parties* form and file it with this application.)

Tenant 1: Last Name

Tenant 2: First Name

Tenant 2: Last Name

Mailing Address (if it is different from the address of the rental unit)

Unit/Apt./Suite

Municipality (City, Town, etc.)

Prov.

Postal Code

Day Phone Number

Evening Phone Number

Fax Number

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E-mail Address

OFFICE USE ONLY

File Number



Landlord's Name and Address

First Name (If there is more than 1 landlord, complete a *Schedule of Parties* form and file it with this application.)

Last Name

Company Name (if applicable)

Street Address

Unit/Apt./Suite

Municipality (City, Town, etc.)

Prov.

Postal Code

Day Phone Number

Evening Phone Number

Fax Number

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E-mail Address

Related Applications

If you or your landlord filed other applications that relate to this rental unit and those applications have not been resolved, list their file numbers below.

File Number 1

File Number 2

PART 2: REASONS FOR FILING THIS APPLICATION

Shade the box completely next to each of your reasons for applying to the Board.

Reason 1: My landlord has reduced or discontinued a service or facility in the last 12 months.

Answer the questions below about your rent and about when the service or facility was reduced or discontinued.

Information about the Service or Facility

Describe the Service or Facility	The service or facility was:		The change happened on this date:
	Reduced	Discontinued	
	<input type="radio"/>	<input type="radio"/>	/ / dd/mm/yyyy
	<input type="radio"/>	<input type="radio"/>	/ / dd/mm/yyyy
	<input type="radio"/>	<input type="radio"/>	/ / dd/mm/yyyy



Rent History: When did you move into the rental unit covered by the application?

/	/
dd/mm/yyyy	

In the table below provide information about the rent you have paid in the past 12 months.

Rent Amount

Fill in each different rent amount you paid:

- in the 12 months before you filed this application, **OR**
- since you moved in (if you moved in less than 12 months ago).

Rent Period

- Under **From**, fill in the date you started to pay each rent amount, and
- Under **To**, fill in the last date of the rental period you were charged each rent amount.

Rent Amount \$ (per month / per week)	Rent Period	
	From: (dd/mm/yyyy)	To: (dd/mm/yyyy)
\$.	/ /	/ /
\$.	/ /	/ /
\$.	/ /	/ /
\$.	/ /	/ /

I am required to pay rent by the month week other (specify) _____

Reason 2: The municipal taxes and charges for the residential complex have decreased.

The **Base Year** is the calendar year in which the municipal tax decrease took effect.

The **Reference Year** is the calendar year before the Base Year.

Calendar Year	Base Year	Reference Year
	_____ / yyyy	_____ / yyyy
Total property taxes for the complex	\$.	\$.

You must attach evidence of the amount of property taxes charged by the municipality for both the Base and Reference Years.



PART 3: SIGNATURE

Tenant/Representative's Signature

/ /
 dd/mm/yyyy

Who has signed the application? Shade the circle completely next to your answer.

- Tenant 1
 Tenant 2
 Representative

Information About the Representative

First Name

Last Name

LSUC # Company Name (if applicable)

Mailing Address

Unit/Apt./Suite Municipality (City, Town, etc.) Prov. Postal Code

Day Phone Number Evening Phone Number Fax Number
 () - () - () -

E-mail Address



Collecting Personal Information

Under section 185 of the *Residential Tenancies Act, 2006*, the Landlord and Tenant Board has the right to collect the personal information requested on this form. We use the information to resolve your application. After you file the form, your information may also be available to the public. If you have questions about how the Board uses your personal information, contact one of our Customer Service Officers at **416-645-8080** or **1-888-332-3234 (toll free)**.

Important Information from the Landlord and Tenant Board

1. You can ask the Board to provide French-language services at your hearing. If you are the applicant, you can fill out the *Request for Accommodation or French-Language Services* form included at the end of this application. If you are the respondent, the *Request for Accommodation or French-Language Services* form is available at Board offices and at the Board's website at sjto.ca/LTB.
2. You can ask the Board to make special arrangements (called a Request for Accommodation) under the *Ontario Human Rights Code* to help you participate in the hearing. For example, you can ask the Board to make arrangements to provide a sign-language interpreter. You can make a request for accommodation under the *Code* by telephone, fax or mail. If you are the applicant, you can fill out the *Request for Accommodation or French-Language Services* form included at the end of this application. If you are the respondent, the *Request for Accommodation or French-Language Services* form is available at Board offices and at the Board's website at sjto.ca/LTB.
3. It is an offence under the *Residential Tenancies Act, 2006* to file false or misleading information with the Landlord and Tenant Board.
4. The Board can order either the landlord or the tenant to pay the other's costs related to the application.
5. The Board has *Rules of Practice* that set out rules related to the application process and *Interpretation Guidelines* that explain how the Board might decide specific issues that could come up in an application. You can read the *Rules and Guidelines* on the Board's website at sjto.ca/LTB or you can buy a copy from a Board office.

OFFICE USE ONLY:

Delivery Method: In Person Mail Courier Email Efile Fax MS FL



Shade the appropriate boxes to indicate whether you need accommodation under the Ontario *Human Rights Code*, or French-language services, or both. We will not include a copy of this form when we give the other parties a copy of the application form. However, we will include the information in your application file. The file may be viewed by other parties to the application.

Accommodation Under the Ontario *Human Rights Code*

The Board will provide accommodation for *Code* related needs to help you throughout the application and hearing process in accordance with the Social Justice Tribunals Ontario policy on accessibility and accommodation. For example, you may need a sign-language interpreter at your hearing. We may contact you about your request. You can obtain a copy of the policy at SJTO.ca.

Please explain: What accommodation do you need?

French-Language Services

The Landlord and Tenant Board will assign a bilingual adjudicator to be in charge of the hearing. We will also arrange for a French-English interpreter to attend the hearing.



Part 1: Payment Method

Select how you are paying the application fee:

- Cash Debit Card Money Order Certified Cheque

Money orders and certified cheques must be made payable to the "Minister of Finance"

- Credit Card:** Visa MasterCard

Important: If you are paying by credit card, you must complete the information on the next page.
The information you fill in on the next page is confidential. It will be used to process your application, but will not be placed on file.

Part 2: Information Required to Schedule the Hearing

The Board will normally schedule your hearing between 3 weeks and 6 weeks after the date you file your application. The Board will schedule your hearing on the first available hearing date within this 3 week period.

List the date(s) you are **not available** during this 3 week period. The Board will not schedule your hearing on the date(s) you indicate you are not available and will schedule your hearing on the next available hearing date. **The Board will not contact you to schedule a hearing.**

I am not available on the following date(s).



Card Information

Credit Card Number:	Expiry Date (mm/yy):
Cardholder's Name:	
Cardholder's Signature:	