



## Important Information for Tenants

Use this form to apply to have the Board determine whether your landlord:

- has not repaired or maintained the rental unit or the residential complex, or
- has not complied with health, safety, housing or maintenance standards.

Instructions for Form T6 are available on the Board's website at [www.LTB.gov.on.ca](http://www.LTB.gov.on.ca).

1. Complete all four 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,
  - your tenancy and any other unresolved applications that relate to the rental unit.
- **Part 2** asks you to select and explain the reasons for your application.
- **Part 3** asks you to select the remedies you want the Board to include in the order.
- **Part 4** 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 T6 application fee is **\$45.00** for the first unit and **\$5.00** for each additional unit to a maximum of **\$450.00**. 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)**

[www.LTB.gov.on.ca](http://www.LTB.gov.on.ca)



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

( ) -

( ) -

( ) -

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  
 (                      )                      -                      (                      )                      -                      (                      )                      -

E-mail Address

**Questions about Your Tenancy**

When did you move into the rental unit you are applying about? /   /  
dd/mm/yyyy

Do you still live in the rental unit? Shade the circle completely next to your answer.

Yes

No                      ► When did you move out?

/   /  
dd/mm/yyyy

**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**

I am applying to the Board because the landlord has not repaired or maintained the rental unit or the residential complex, or has not complied with health, safety, housing or maintenance standards.

**Explaining your Reason**

In the box below, describe the maintenance problems that led you to apply to the Board.

- What is the problem? If there is more than one problem, list each problem.
- Give the date each problem started.
- Has the problem been repaired? If so, give the date it was repaired and explain who repaired it.
- Explain who or what may have caused the problem.
- How did you inform the landlord about the problem?

**Describe in Detail:**

*Attach more sheets if necessary.*

When did you first tell the landlord about the maintenance problems?

/   /  
 dd/mm/yyyy



**PART 3: REMEDIES**

The remedies listed below are orders the Board can make to address your reasons for filing the application. Shade the box completely next to the remedies you want the Board to order. If the Board decides in your favour, it may decide to include a different remedy or remedies than the one(s) you selected.

**Remedy 1:** The landlord must pay me a rent abatement of \$ .

My current rent is \$ .

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

**Please explain:** How did you calculate the rent abatement?

*Attach more sheets if necessary.*

**Remedy 2:** The landlord must pay me for the costs to repair or replace my property that was damaged, destroyed or disposed of because the landlord did not repair or maintain the rental unit or the residential complex.

The total costs are \$ .

**Please explain:** How was your property damaged, destroyed or disposed of? List each item and the cost to repair or replace it.

*Attach more sheets if necessary.*



**Remedy 3:** I had or will have out-of-pocket expenses because the landlord did not repair or maintain the rental unit or the residential complex. The landlord must pay me for these expenses.

These expenses total \$ .

**Please explain:** How did you calculate the expenses?

*Attach more sheets if necessary.*

**Remedy 4:** I did repairs, replacements or other work because the landlord did not repair or maintain the rental unit or the residential complex. I want the Board to authorize the work I did and to order the landlord to pay me for my costs.

The total costs are \$ .

**Please explain:** What work did you do? How did you calculate the costs?

*Attach more sheets if necessary.*

**Remedy 5:** I want the Board to allow me to do the repairs, replacement or other work that is necessary and to order the landlord to pay me for my costs.

**Please explain:** What work do you plan to do? How much will it cost? How did you calculate how much it will cost? Be specific.

*Attach more sheets if necessary.*



- Remedy 6:** I want the Board to order the landlord to do the repairs, replacement or other work that is necessary.

**Please explain:** What work must the landlord do? Be specific.

*Attach more sheets if necessary.*

- Remedy 7:** I want the Board to order that the landlord cannot increase the rent for this rental unit until the landlord completes the work necessary to fix any serious maintenance problems that the landlord has been ordered to do or will be ordered to do.

- Remedy 8:** I want the Board to end my tenancy on

/   /  
dd/mm/yyyy

- Remedy 9:** I want the Board to order other remedies. I have described those remedies below.

**Please explain:** What else do you want the Board to order?

*Attach more sheets if necessary.*



**PART 4: 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 [www.LTB.gov.on.ca](http://www.LTB.gov.on.ca).
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 [www.LTB.gov.on.ca](http://www.LTB.gov.on.ca).
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 [www.LTB.gov.on.ca](http://www.LTB.gov.on.ca) 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 [www.SJTO.gov.on.ca](http://www.SJTO.gov.on.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     American Express

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

**Important:** The information you fill in under Part 1 is confidential. It will be used to process your application, but will not be placed on the application 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):*