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 tribunalsontario.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 French-Language Services or Request for Accommodation* 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 \$53 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. If you pay online, email your receipt and application to LTBpayments@ontario.ca.
- 5. Contact the Board if you have any questions or need more information.

416-645-8080 1-888-332-3234 (toll free)

tribunalsontario.ca/ltb

Tenant Application for a Rent Reduction FORM T3

(Disponible en français)

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

PART 1: 0	SENERAL INF	ORMATION							
Address o	f the Rental	Unit Covere	d by This	Application					
Street Number	er	Street Name							
Street Type (e.g. Street, Aven	ue, Road)	Direction	on (e.g. East)	Unit/Apt./Suite	•			
Municipality (City, Town, etc.)					F	Prov.	Postal (Code
	ames and Ad		tenants, com _l	plete a <i>Schedule</i> d	of Parties form a	and file it wi	th this app	lication.)
Tenant 1: Las	st Name								
Tenant 2: Fire	st Name								
Tenant 2: Las	st Name								
Mailing Addre	ess (if it is differer	nt from the addres	ss of the renta	ıl unit)					
Unit/Apt./Suit	e Mu	ınicipality (City, T	own, etc.)			Prov.	Postal	Code	
Day Phone N	umber	I	Evening Phon	ne Number		Fax Number	er		
() -		() -		()		-
E-mail Addres	SS								

OFFICE USE ONLY		
File Number		
v. 22/03/2021		

Tenant Application for a Rent Reduction FORM T3 (Disponible en français)

Landlord's Name and Address

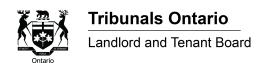
La	iluloi u S Naille	and Address					
Firs	st Name (If there is m	nore than 1 landlord,	complete a Scheo	dule of Parties form a	nd file it with this appl	ication.)	
Las	st Name						
Coi	mpany Name (if appli	cable)					
Stre	eet Address						
Uni	t/Apt./Suite	Municipality (City	, Town, etc.)		Prov.	Postal Code	
Da	y Phone Number		Evening Phone	e Number	Fax Numbe	er	
()	-	() -	()	-
E-n	nail Address						
Re	lated Application	ons					
	ou or your landle en resolved, list t			at relate to this re	ental unit and tho	se application	s have not
File	Number 1			File Number 2			
P/	ART 2: REASONS	S FOR FILING 1	THIS APPLICA	ATION			
Sha	ade the box com	pletely next to e	each of your re	asons for applyin	g to the Board.		
	Reason 1: My	landlord has re	educed or dis	scontinued a se	rvice or facility	in the last 12	2 months.
	Answer the que reduced or disco		out your rent a	and about when t	he service or fac	ility was	
	Information a	bout the Servi	ce or Facility				_
	Describe the Service or Fac	ility	The service Reduced	or facility was Discontinued	The change h	nappened on	
			0	0	/ dd/mr	/ n/yyyy	
			1		-		4

 \bigcirc

 \bigcirc

dd/mm/yyyy

dd/mm/yyyy



Tenant Application for a Rent Reduction FORM T3

(Disponible en français)

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

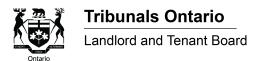
- Under **From**, fill in the date you started to pay each rent amount, and
- Under **To**, fill in the last date of the rental period you were charged each rent amount.

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

I am required to pay rent by the	o month	○ week	other (specify)	
Reason 2: The municipal taxes	and charge	s for the	residential comple	x have decreased.
The Base Year is the calendar year The Reference Year is the calend		•		effect.

Calendar Year	Base Year	уууу	Reference Year _	уууу
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.



Tenant Application for a Rent Reduction FORM T3

(Disponible en français)

PART 3: SIGNATURE

E-mail Address

Tenant/Represe	ntative's S	ignature						
						/	/	
						dd/m	ım/yyyy	
Who has signed th	e applicatio	n? Shade the	circle co	mpletely next	to you	ır answer.		
○ Tenant 1 ○	Tenant 2	○ Legal Re	presenta	tive				
Information Abo	ut the Leg	al Represen	tative					
First Name								
Last Name								
LSUC#	Company Na	ame (if applicable	e)					
Mailing Address								
Unit/Apt./Suite	Municipali	ty (City, Town, e	tc.)			Prov	. Postal Code	
Day Phone Number		Evenin	g Phone Nu	ımber		Fax Num	nber	
()	-	()	-		()	-

Tribunals Ontario

Landlord and Tenant Board

(Disponible en français)

Collecting Personal Information

The Landlord and Tenant Board has the right to collect the information requested on this form to resolve your application under section 185 of the *Residential Tenancies Act, 2006*. After you file the form, all information related to the proceeding may become publicly available in a tribunal decision, order or other document, in accordance with Tribunals Ontario's <u>Access to Records Policy</u> and the *Tribunal Adjudicative Records Act, 2019*. Parties wanting records or information to remain confidential must seek a confidentiality order from the adjudicator. If you have questions about confidentiality orders or access to records, please contact us by email at <u>LTB@ontario.ca</u> or our Contact Center 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 French-Language Services or Request for Accommodation* form included at the end of this application. If you are the respondent, the *Request for French-Language Services or Request for Accommodation* form is available at Board offices and at the Board's website at tribunalsontario.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 French-Language Services or Request for Accommodation form included at the end of this application. If you are the respondent, the Request for French-Language Services or Request for Accommodation form is available at Board offices and at the Board's website at tribunalsontario.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 tribunalsontario.ca/ltb or you can buy a copy from a Board office.

OFFICE USE ONL	-Y:						
Delivery Method:	O In Person	○ Mail	O Courier	○ Email	○ Efile	○ Fax	MS 🗌 FL

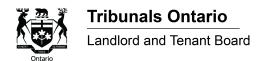


Request for French-Language Services or Request for Accommodation

(Disponible en français)

Use this form to ask the Landlord and Tenant Board (LTB) to provide French-language services or to let the LTB know you need accommodation under the Ontario *Human Rights Code*.

Par	t 1: Request for French-Language Services
	Check this box if you want the dispute resolution process (e.g. case conferences and hearings) to be conducted in French.
Par	t 2: Request for Accommodation under the Ontario Human Rights Code
	Check this box if you need accommodation under the Ontario <i>Human Rights Code</i> to participate in the dispute resolution process. The LTB will provide accommodation for <i>Code</i> related needs to help you throughout the application and hearing process in accordance with the Tribunals Ontario policy on accessibility and accommodation. You can get a copy of the policy at <u>tribunalsontario.ca</u> .
	Please explain: What accommodation do you need?



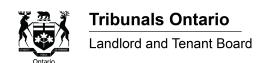
elect how you	are paying the a	pplication fee:
Online F	<u>Payment</u> Recei	pt #:
Note: R	Receipt must be e	mailed with application to LTBpayments@ontario.ca.
Cash	O Debit Card	
		Money orders and certified cheques must be made payable to the "Minister of Finance"
Credit Car	d: Visa (MasterCard
Importa	complet The infor confident	re paying by credit card, you must the information on the next page. The mation you fill in on the next page is the cial. It will be used to process your on, but will not be placed on file.

Part 2: Information Required to Schedule the Hearing

The LTB will normally schedule your hearing between 3 weeks and 6 weeks after the date you file your application. The LTB 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 LTB 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 LTB will not contact you to schedule a hearing**.

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



	rmation
~ -11.	

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