



Important Information for Tenants

Use this form to apply to have the Board determine whether your landlord, the landlord's agent or the superintendent:

- entered your rental unit illegally,
- changed the locks to your rental unit or building without giving you replacement keys,
- substantially interfered with your reasonable enjoyment of the rental unit or complex or with the reasonable enjoyment of a member of your household,
- harassed, coerced, obstructed, threatened or interfered with you,
- withheld or interfered with vital services, care services or meals.

You can also use this form to apply to have the Board determine whether your landlord:

- did not give you 72 hours to remove your property from the rental unit or from somewhere close to it after the Sheriff evicted you,
- did not give you a written tenancy agreement for your care home unit, or gave you an agreement that did not include information about the care services and meals and/or the charges you agreed to.

Instructions for the T2 form are available on the Board's website at tribunalsontario.ca/ltb.

There are other tenant application forms you can use to apply to the Board for other reasons. For example, if you want the Board to determine whether the landlord has failed to meet their obligation to maintain the rental unit and/or the residential complex, you can use the T6 *Tenant Application about Maintenance*.

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 remedy(ies) 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 French-Language Services or Request for Accommodation* form at the end of this application if you need additional services at the hearing.

3. File all pages of the application (not including this page) with the Board. 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 T2 application fee is **\$53** for the first unit (**or \$48 if you e-File**) 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 e-File the application, you must pay by credit card 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



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

Other parties to the Application

Are you also applying against your superintendent or landlord's agent because they caused the problem?
Shade the circle completely next to your answer.

☐ No

☐ Yes ► Complete and attach a *Schedule of Parties* form available from the Board.

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

Shade the box completely next to each of your reasons for applying to the Board. For reasons 1 - 5, the person who caused the problem could be your landlord, the landlord's agent or the superintendent. For reasons 6 and 7, you can only apply if the landlord caused the problem.

My landlord, landlord's agent or superintendent

- ☐ **Reason 1:** Entered my rental unit illegally.
- ☐ **Reason 2:** Changed the locks or the locking system to my rental unit or building without giving me replacement keys.
- ☐ **Reason 3:** Substantially interfered with my reasonable enjoyment of the rental unit or complex or with the reasonable enjoyment of a member of my household.
- ☐ **Reason 4:** Harassed, coerced, obstructed, threatened or interfered with me.
- ☐ **Reason 5:** Withheld or interfered with my:
- vital services, which are heat from September 1 to June 15, fuel, electricity, gas, hot or cold water,
 - care services and meals in my care home.

My landlord

- ☐ **Reason 6:** Did not give me 72 hours to remove my property from the rental unit or from someplace close to it, after the Sheriff evicted me.

You can apply for remedies 2, 3, 5, 8, 10 and remedy 11 in Part 3.

- ☐ **Reason 7:** Did not give me a written tenancy agreement for my care home unit, or gave me an agreement that did not include information about my care services and meals and/or the charges we agreed I would pay for them.

If you are applying for reason 7, the only remedy you can select in Part 3 is remedy 1.



Explaining your Reasons

List the number of each reason you chose on page 3. Then describe in the box below the events that led you to apply to the Board.

- What happened?
- What were the dates and times of the events?
- Who caused the problem?
- What were the names and titles (such as superintendent) of all the people involved?

Reason #	Describe in Detail

Attach more sheets if necessary.



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 ones 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, the landlord's agent or superintendent must stop the activities described below.

Please explain: What activities do you want the landlord, the landlord's agent or the superintendent to stop?

Attach more sheets if necessary.

☐ **Remedy 3:** The landlord must pay a fine to the Board.

☐ **Remedy 4:** I want the Board to end my tenancy on

/	/
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 .
dd/mm/yyyy



- ☐ **Remedy 5:** The landlord, landlord's agent or superintendent must pay me for the costs to repair or replace my property that was damaged, destroyed or disposed of because of their actions.

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.

If the actions of the landlord, landlord's agent or superintendent caused you to move out of your rental unit, you can ask the Board to include remedies 6 and/or 7 in the order.

- ☐ **Remedy 6:** My new rental unit has a higher rent. The landlord must pay me the difference in rent between my old rental unit and my new rental unit for one year from the date I moved out.

The difference in rent is \$. each

☐ month ☐ week ☐ other (specify) _____

The total amount the landlord owes me is \$.

- ☐ **Remedy 7:** The landlord must pay me for my moving and storage expenses.

These expenses total \$.

Please explain: How did you calculate the expenses?

Attach more sheets if necessary.



- ☐ **Remedy 8:** I had or will have out-of-pocket expenses resulting from the actions of the landlord, landlord's agent or superintendent. The landlord, landlord's agent or superintendent must pay me for these expenses.

These expenses total \$.

Please explain: How did you calculate the expenses?

Attach more sheets if necessary.

If you are applying to the Board because the landlord, landlord's agent or superintendent changed the locks or the locking system without giving you replacement keys (Reason 2), you can ask the Board to include Remedy 9 in the order.

- ☐ **Remedy 9:** The landlord must allow me to move back into the rental unit and must not rent the unit to anyone else.

Is the unit vacant? ☐ Yes ☐ No ☐ I don't know

If you are applying to the Board because the landlord did not let you get your property after the Sheriff evicted you (Reason 6), you can ask the Board to include Remedy 10 in the order.

- ☐ **Remedy 10:** The landlord must return all my property that he or she possesses, or that he or she can get back from other people.

- ☐ **Remedy 11:** 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 ☐ Legal Representative

Information About the Legal 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
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E-mail Address



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 [Access to Records Policy](#) 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 LTB@ontario.ca 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 ONLY:

Delivery Method: ☐ In Person ☐ Mail ☐ Courier ☐ Email ☐ Efile ☐ Fax

MS ☐ FL ☐



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*.

Part 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.

Part 2: Request for Accommodation under the Ontario *Human Rights Code*

- ☐ Check this box if you need accommodation under the Ontario *Human Rights Code* to participate in the dispute resolution process. The LTB will provide accommodation for *Code* 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 tribunalsontario.ca.

Please explain: What accommodation do you need?



Part 1: Payment Method

Select how you are paying the application fee:

☐ [Online Payment](#) Receipt #: _____

Note: Receipt must be emailed with application to LTBpayments@ontario.ca.

☐ 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 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).



Card Information

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