



## Tenant's Application

### Residential Tenancy Dispute Resolution Service (RTDRS)

Unit 112, 10025-102A Avenue NW  
Edmonton Alberta T5J 2Y8  
Fax: 780-644-2266

Main Floor, Rocky Mountain Plaza  
180 - 615 Macleod Trail SE  
Calgary Alberta T2G 4T8  
Fax: 403-297-2669

Toll-free 310-0000  
then dial 780-644-3000  
[www.rtdrs.alberta.ca](http://www.rtdrs.alberta.ca)

This personal information is being collected for the purpose of dispute resolution in accordance with the *Residential Tenancies Act*. If you have any questions please contact the RTDRS Administrator at toll free 310-0000, then 780-644-3000.

RTDRS Case No.

**This is an application to the Residential Tenancy Dispute Resolution Service (RTDRS) for the following remedies under the *Residential Tenancies Act*:**

- ☐ Termination of the tenancy
- ☐ Abatement (reduction) of rent
- ☐ Damages (losses) for breach of tenancy agreement
- ☐ Compensation for performing the landlord's obligation
- ☐ Recovery of the security deposit

#### Tenant(s) / Applicant(s)

Tenant's Address for Service

City or Town

Province

Postal Code

Phone Number

Fax Number

Email Address:

#### Landlord(s) / Respondent(s)

Landlord's Address for Service

City or Town

Province

Postal Code

Phone Number

Fax Number

Email Address:

#### Rental Premises Address

City or Town

Province

Postal Code

Have you made an application with the Provincial Court or Court of Queen's Bench on this matter?

☐ Yes

☐ No

Have you been served with a Provincial Court or Court of Queen's Bench application on this matter?

☐ Yes

☐ No

Have you been served with a RTDRS application package by the respondent(s)?

☐ Yes

☐ No

If yes, provide RTDRS case number

Tenant(s) / Applicant(s)

Landlord(s) Respondent(s)

Rental Premises Address

### Tenant's Evidence Summary

#### A. General

1. Rental premises type ☐ House ☐ Main Floor ☐ Basement ☐ Room ☐ Apartment ☐ Townhouse  
☐ Other

2. Current rent per month  Security deposit

3. Type of Tenancy ☐ Fixed term ☐ Month to month ☐ Other

Date yyyy-mm-dd

4. Tenancy Agreement attached? ☐ Yes No, tenancy started on  ITEM

5. Are you still residing in the rental premises? ☐ Yes ☐ No, vacated on

6. Are there previous Orders or Judgments regarding this tenancy? ☐ No ☐ Yes, copy attached

ITEM(S)

#### B. Termination of the Tenancy and/or Recovery of Possession

Date yyyy-mm-dd

I am applying to terminate the tenancy by , for the following reasons:

Was a notice to terminate served on the landlord? ☐ No ☐ Yes, copy attached

ITEM(S)

Attach all evidence supporting the termination request.

Tenant(s) / Applicant(s)

Landlord(s) Respondent(s)

Rental Premises Address

### C. Abatement of Rent

Provide reasons for the abatement (reduction) of rent request and explain the amount claimed:

Attach all evidence supporting the abatement and amount claimed.

ITEM(S)

Total Claim for Abatement of Rent

Tenant(s) / Applicant(s)

Landlord(s) Respondent(s)

Rental Premises Address

**D. Damages (Losses) Due to Breach of the Tenancy Agreement by the Landlord**

Attach all evidence supporting the breaches and amount claimed.

ITEM(S)

**Total Claim for Damages**

Tenant(s) / Applicant(s)

Landlord(s) Respondent(s)

Rental Premises Address

**E. Compensation for Performing the Landlord's Obligation**

Provide the reasons for the compensation and explain the amount claimed

Attach all evidence supporting the compensation and amount claimed.

ITEM(S)

Total Claim for Compensation

Tenant(s) / Applicant(s)

Landlord(s) Respondent(s)

Rental Premises Address

F. Recovery of Security Deposit

1. Has the security deposit, or any part of it, been returned to you?

☐ No

☐ Yes, date returned: 

Date yyyy-mm-dd

2. Was a move-in inspection done? ☐ No ☐ Yes, copy attached

ITEM(S)

3. Was a move-out inspection done? ☐ No ☐ Yes, copy attached

ITEM(S)

4. Did you receive a Statement of Account for your security deposit? ☐ No ☐ Yes, copy attached

ITEM(S)

Provide details of your claim for recovery of the security deposit

Attach all evidence supporting the amount claimed.

ITEM(S)

Total Claim for Return of Security Deposit

Tenant(s) / Applicant(s)

Landlord(s) Respondent(s)

Rental Premises Address

### G. Costs of Filing this Application

☐ I am claiming the \$75.00 RTDRS filing fee.

☐ I am claiming the following other costs of filing this application.

Attach all evidence supporting the amount claimed.

ITEM(S)

Total Claim for Costs

Total Amount Claimed for this Application (C + D + E + F + G) =

Witness names

By filing this application I confirm that my claim is less than \$50,000. I understand that I am abandoning any part of my claim that is over \$50,000. I understand that I cannot recover any part of the claim that has been abandoned either at the RTDRS or any court.

Applications can be made to the RTDRS within 2 years from the date the claim is discovered.

Position (e.g. Tenant, Agent, Representative, etc.)

Print Name

Tenant

Signature

Date yyyy-mm-dd

Dated