

Read the Instructions carefully before completing the Form. Print or Type in Block or Uppercase.

Part 1: General Information

Landlord's Name and Address

First Name Male Female Company Initial

Last Name If there is more than 1 landlord, complete a Schedule of Parties form and file it with this application

Street Address

Unit Number City Province Postal Code

Day Phone Number Evening Phone Number Fax Number

E-mail Address

Rental Unit, Building or Complex Covered by this Application

Street Number Street Name

Street Label Direction Unit Number

City Province Postal Code

What is the total number of rental units in the complex?

How many rental units are covered by the application?

Tenants' Names and Addresses

Complete a Schedule of Parties form with the names and addresses, including the unit numbers, of the tenants in the units covered by the application and file it with this application.

What is the effective date of the first intended rent increase for the units covered by this application? / /

dd mm yyyy

What is the total current rent charged for the rental units covered by this application? \$ Per

Related Applications

List the file numbers of any other applications to the Tribunal that relate to the same rental unit.

File Number 1: - File Number 2: -

The Ontario Rental Housing Tribunal collects the personal information requested on this form under section 172 of the *Tenant Protection Act, 1997*. This information will be used to determine applications under this Act. After an application is filed, all information may become available to the public. Any questions about this collection may be directed to a Customer Service Representative at 416-645-8080 or toll-free at 1-888-332-3234.

For Office use only : File Number: -



Part 2: Reasons for Your Application

I am applying for a rent increase above the guideline because:

- 1. The municipal taxes and charges for the complex increased by an "extraordinary" amount.
- 2. The utility costs for the complex increased by an "extraordinary" amount.
- 3. Operating costs for security services for the complex have been experienced for the first time or have increased.
- 4. Capital expenditure work was done.

Part 3: Signature

Landlord's/Agent's Signature

Landlord Agent

Date
[] [] / [] [] / [] [] [] []
dd mm yyyy

If you are an agent or an officer of a corporation, you must provide the following information:

First Name

Initial

Last Name

Title

Company Name

Mailing Address

Unit Number

City

Province

Postal Code

Phone Number

([] [] []) [] [] [] []

Fax Number

([] [] []) [] [] [] []

E-mail Address

Important Information

1. The landlord must file this application at least 90 days before the effective date of the first intended rent increase covered by the application.
2. Along with the application, the landlord must also file evidence of the costs claimed in the application and proof of payment of the costs. If the landlord does not file this evidence at the time the application is made, a Member may refuse to allow the landlord to file additional information at a later date, which may result in the landlord being unable to prove their claim. (See the instructions for details on what must be filed.)
3. Once the landlord files this application with the Tribunal, the Tribunal will give the landlord a Notice of Hearing. The landlord must give the tenant(s) of the units affected by this application a copy of the application and the Notice of Hearing at least 30 calendar days before the hearing.

Once the landlord has given the tenant(s) copies of the application and Notice of Hearing, the landlord must file a Certificate of Service with the Tribunal showing how and when the landlord gave the documents to the tenant(s).

4. It is an offence under the *Tenant Protection Act* to file false or misleading information with the Ontario Rental Housing Tribunal.
5. The Tribunal has Rules of Practice that set out rules related to the application process, and Interpretation Guidelines that explain how the Tribunal might decide specific issues that may arise in an application. You can purchase a copy of the Rules and Guidelines from your local Tribunal office or view them online at www.orht.gov.on.ca.
6. For further information you may contact the Ontario Rental Housing Tribunal at **416-645-8080** or toll-free at **1-888-332-3234**. Or, you may visit the Tribunal's web site at www.orht.gov.on.ca.



If you are applying for an increase above the guideline because of an increase in municipal taxes and charges, utility costs or operating costs for security services, you must fill out this schedule. You must attach evidence of costs and payment for all the costs you are applying for. If you received any grants or other forms of financial assistance, rebates and refunds that effectively reduced the costs for the periods you are claiming, you must attach evidence of the amount(s) you received. See the instructions for further information.

A. Municipal Taxes and Charges

In the space below, fill in the annual accounting periods and the costs claimed for each period. See the instructions for information about how to determine the accounting periods.

Accounting Periods	Reference Year: _____	Base Year: _____
Costs		

- These costs affect all of the rental units in the complex.
- These costs affect some, but not all of the rental units in the complex.
(If you checked off this box, provide details under part C of this Schedule.)

Did you receive any refunds, rebates, grants or other type of financial assistance for this cost category for the reference year or base year indicated above? Yes No

If yes, indicate the source of the assistance, the total amount and the period to which it applies.

Source	Period		Total Amount
	From (dd/mm/yyyy)	To (dd/mm/yyyy)	

Did you take these amounts into account in arriving at the costs for the reference year and base year indicated above? Yes No

B. Utilities and Security Services

In the space below, fill in the annual accounting periods and the costs claimed for each period. See the instructions for information about how to determine the accounting periods.

Accounting Periods	Reference Year	Base Year
	From: _____ To: _____	From: _____ To: _____
Utilities - Heat		
- Hydro		
- Water		
Security Services		

- Costs in all the categories listed above affect all the rental units in the complex.
- Costs in one or more of the categories listed above affect some, but not all of the rental units in the complex. (If you checked off this box, provide details under part C on the following page.)

Did you receive any refunds, rebates, grants or other type of financial assistance for heat, hydro or water for the reference year or base year indicated above? Yes No

If yes, indicate the source of the assistance, the utility it applies to, the period to which it applies, and the total amount received.

Source	Utility Heat/Hydro/Water	Period		Total Amount
		From (dd/mm/yyyy)	To (dd/mm/yyyy)	

Did you take these amounts into account in arriving at the costs for the reference year and base year indicated above? Yes No

C. If any of the operating cost categories (or subcategories of utilities) affect some, but not all of the rental units in the complex, provide the following details. See the instructions for further information.

Operating Cost Categories	Column 1 Total number of units in the complex affected by the cost category	Column 2 Affected units that are also covered by this application (list unit numbers)	Column 3 Total rent charged for units listed in column 2
Municipal Taxes & Charges			
Utilities - Heat			
- Hydro			
- Water			
Security Services			

D. Do any of the operating cost categories relate to non-residential portions of the complex or other residential complexes? Yes No

If yes, list the category and provide details below of how you propose costs should be allocated. See the instructions for further information.

A. Description and Costs

If you are applying for an increase above the guideline because you incurred capital expenditures, you must fill out this schedule completely. You must attach copies of the Capital Expenditures: Additional Details Form and evidence of costs and payment for all the expenditures you are applying for. See the instructions for further information. If you are applying for more than four capital expenditure items, complete additional copies of this schedule.

Item #	Description of Capital Expenditure	Date Completed (dd/mm/yy)	Labour/ Material and Contract Costs	Landlord's Own Labour	Total Costs
				Hours X Rate = Total	

- The costs listed above affect all of the rental units in the complex.
- Costs for one or more of the items listed above affect some, but not all of the rental units in the complex.

B. If any of the capital expenditure items affect some, but not all of the rental units in the complex, list the item number(s) and provide the following details.

Item Number	Column 1 Total number of units in the complex affected by the item	Column 2 Affected units that are also covered by this application (list unit numbers)	Column 3 Total rent charged for units listed in column 2

C. Did you receive any money from an insurer, government grants or forgivable loans or other assistance, or proceeds from trade-in, salvage or resale for any capital expenditure items(s)? Yes No

If yes, list the item number, the source of the funds and the amount you received below.

Item Number	Source	Total Amount

D. Do any of the capital expenditure items relate to non-residential portions of the complex or other residential complexes? Yes No

If yes, list the item and provide details of how you propose costs should be allocated below. See the instructions for further information.

