

If you want the Landlord and Tenant Board (LTB) to waive fees, you MUST complete this Fee Waiver Request and attach it to the FRONT of the application or request form(s) you want to file and/or the description of what you want the LTB to provide.

Part 1: General Information			
First Name:	Last Name:		
Mailing Address:		Daytime Phone Number:	
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Email Address:			
Part 2: Reason for Request			
What is the primary source of your household inco	ome?		
Select either Reason 1 or Reason 2. Then, provide the information requested under the reason you selected.			
Note that your household means you, your spouse and includes all of the income (before taxes and deduction	•		
Reason 1 – Income Support: Select this reason or more of the income support programs listed be	elow.	of your household income is one	
Check the box(es) next to your household's prima	ary source of income.		
Ontario Works			
Ontario Disability Support Program (ODSP)			
Old Age Security Pension (OAS) together with Guaranteed Income Supplement			
☐ War Veterans' Allowance			
Canada Pension Plan			
Reason 2 – Other: Select this reason if your grosset out in the table below.	ss monthly household	income is less than the amount	
Select the appropriate circle to indicate the number of people in your household, including yourself:			
☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 or r	more		
The combined gross monthly income from all sources (before taxes and deductions) for my household is:			
\$			

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To be eligible for a fee waiver, your gross monthly household income must be below the threshold set out below:

Threshold			
Number of people in household	Gross monthly household income		
1	Less than \$1,650		
2	Less than \$2,475		
3	Less than \$2,840		
4	Less than \$3,390		
5 or more	Less than \$3,940		

Part 3: Declaration

Instructions: Do not sign your Fee Waiver Request until you are sure that you understand what you are declaring here.

To the best of my knowledge, the information in this Fee Waiver Request is complete and accurate.

I understand that it is an offence under s. 234 of the *Residential Tenancies Act, 2006* to file false or misleading information in my *Fee Waiver Request*.

I understand that I may be required to provide financial documents to prove the information in the request if I am asked to do so by the LTB.

I understand that personal information contained on this form is collected under the authority of s. 181.1 of the *Residential Tenancies Act*, 2006. This information will be used to determine fee waiver eligibility. Any questions about this collection may be directed to a Customer Service Officer at **416-645-8080** or toll-free at **1-888-332-3234**.

Signature:	Date (dd/mm/yyyy):	

The LTB will provide you with a copy of your approved or denied *Fee Waiver Request* form to notify you of whether or not it has been approved. If the request is denied, the LTB will not process the attached request until payment is received.

FOR OFFICE USE ONLY				
Fee Waiver is:	☐ Denied (criteria not met)	Date Received:		
CSO Initials:	File number(s) relating to the request:			