



## Important Information

Use this form to request that the Landlord and Tenant Board (the Board) review an order if:

- you believe the order contains a serious error, or
- you were not reasonably able to participate in the proceeding.

Instructions for a *Request to Review an Order* are available on the Board's website at [tribunalsontario.ca/ltb](http://tribunalsontario.ca/ltb).

**NOTE: DO NOT USE** this form if you believe that the Board made a clerical error in writing an order (e.g. a spelling mistake, a mistake in calculation, etc.). In this case you can file a *Request to Amend an Order*. The *Request to Amend an Order* form is available on the Board's website at [tribunalsontario.ca/ltb](http://tribunalsontario.ca/ltb).

A party may file only **one** request to review an order. If the same party files another request to review the same order, it may be denied and the Board will not refund the fee.

1. Complete all three parts of this form.
  - **Part 1** asks for general information about:
    - the party requesting a review of an order (the Requester),
    - the address of the rental unit covered by this request,
    - the other parties to the request.
  - **Part 2** requires you to select and explain the reasons for your request.
  - **Part 3** requires your signature or that of your representative, and, if you are being represented, your representative's contact information.
2. File all pages of the form (not including this page) with the Board **no more than 30 days** after the date the order was issued.
3. Pay the fee of **\$58** to the Board at the same time as you file a *Request to Review an Order* form. The Board will not process your request unless you pay the fee. If you file the form 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 form you cannot pay by cash or debit card. If you pay online, email your receipt and application to [LTBpayments@ontario.ca](mailto:LTBpayments@ontario.ca).
4. Contact the Board if you have any questions or need more information.

**416-645-8080**  
**1-888-332-3234 (toll free)**  
[tribunalsontario.ca/ltb](http://tribunalsontario.ca/ltb)



**Part 1: General Information**

**Requester's Information**

Landlord    Co-op    Tenant    Co-op Member    Other Party

First Name

Last Name

Mailing Address

Unit/Apt./Suite

Municipality (City, Town, etc.)

Prov.

Postal Code

Day Phone Number

Evening Phone Number

Fax Number

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**Unit, Building or Complex Covered by the Request**

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

**Other Parties to the Request**

Landlord    Co-op    Tenant    Co-op Member    Other Party

First Name

Last Name

Mailing Address

Unit/Apt./Suite

Municipality (City, Town, etc.)

Prov.

Postal Code

Day Phone Number

Evening Phone Number

Fax Number

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If there is more than one other party, provide the names, addresses and telephone numbers of the additional other parties on the *Schedule of Parties* form which is available from the Board's website at [tribunalsontario.ca/lrb](http://tribunalsontario.ca/lrb).

**Part 2: Reasons for Your Request**

**I am requesting that the Board review the order**

**issued on**  **, because it contains a serious error.**  
dd/mm/yyyy

Shade the box(es) completely next to your reason for applying.

- I believe the order contains a serious error,**
- I was not reasonably able to participate in the proceeding**

In the space provided **below**, describe why you are requesting a review of the order.

If you are requesting a review because you believe the order contains a serious error, describe why you believe that the order contains a serious error. For example:

- Did the Board apply the *Residential Tenancies Act, 2006* in a situation where it did not apply?
- Did the order include a remedy that is not appropriate in the circumstances?
- Was a decision in the order affected by information that was misleading or incorrect?
- Did the order fail to comply with the rules of natural justice?

If you are requesting a review because you were not reasonably able to participate in the proceeding, describe why you were not reasonably able to participate. For example:

- Did you not receive the Notice of Hearing?
- Was the Notice of Hearing served incorrectly, for example to the wrong address or to the wrong person?
- Were you physically unable to attend?

Explain in detail why you believe the order contains a serious error or why you were not reasonably able to participate in the proceeding. As well, indicate how you think the order should be changed if your request for review is successful.

**If you do not convince the Board that there may be a serious error in the order, or that you were not reasonably able to participate in the proceeding, your Request to Review an Order may be dismissed without further consideration.**

Shade the appropriate circle to indicate whether you are asking the Board to stay (put on hold) the order or to lift (remove) a stay.

- I am requesting that the Board stay the order I want reviewed.**  
An order that is stayed **cannot** be enforced.

Explain why the Board should stay the order you want reviewed.

*Attach additional sheets if necessary*

- I am requesting that the Board lift the stay imposed by the Divisional Court on the order I want reviewed.**  
An order that is appealed to the Divisional Court is automatically stayed and the Board cannot consider your Request to Review an Order **unless** it first decides to lift the stay.

Explain why the Board should lift the stay resulting from the appeal to Divisional Court.

*Attach additional sheets if necessary*

**OFFICE USE ONLY:**

File Number

Delivery Method:  In Person  Mail  Courier  Email  Efile  Fax  FL

## Part 3: Signature

  
dd/mm/yyyy

Who has signed the request? Shade the circle completely next to your answer.

Requester       Representative       Other

### Information About the Representative

First Name

Last Name

LSUC #

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](mailto: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. If a hearing is scheduled for your request, you can ask the Board to provide French-language services. If you are the requester, you can fill out the *Request for French-Language Services or Request for Accommodation* form included at the end of this form. If you are one of the other parties, 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](http://tribunalsontario.ca/ltb).
2. If a hearing is scheduled for your request, 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* in person, by telephone, or mail. If you are the requester, you can fill out the *Request for French-Language Services or Request for Accommodation* form included at the end of this form. If you are one of the other parties, 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](http://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 has *Rules of Practice* that set out rules related to the review process and *Interpretation Guidelines* that explain how the Board might decide specific issues that could come up in the review process. You can read the *Rules and Guidelines* on the Board's website at [tribunalsontario.ca/ltb](http://tribunalsontario.ca/ltb) or you can buy a copy from a Board office.



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*.

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**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.

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**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](http://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](mailto: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:	