



File Number of application to be re-opened:

**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

(        )        -        (        )        -        (        )        -

**Rental Unit or Co-op Member Unit Covered by this 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 Application**

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

(        )        -        (        )        -        (        )        -

If there is more than one other party, complete a Schedule of Parties form with their names and addresses (including the unit numbers) and file it with the application.

**Related Applications**

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

File Number 1

File Number 2

v. 22/03/2021

## Part 2: Reasons for Re-Opening your Application

The application for the above address was resolved by (*choose one of the following*):

- a mediated agreement that was reached with the assistance of a Board Mediator,
- a consent order for a repayment plan, issued under section 206 of the *Residential Tenancies Act, 2006*.

I am requesting that the application be re-opened because (*choose one of the following*):

- 1. the other party did not meet a term of the mediated agreement or the consent order, or
- 2. the other party forced me to enter into the agreement or gave me false or misleading information on purpose that had a material effect on the mediated agreement or the consent order, or
- 3. the party making the request lacked the capacity to enter into the mediated agreement.

### Explanation of Reason

If you chose reason #1, state specifically which terms of the agreement were not met and how they were not met. If you chose reason #2 or reason #3, explain what happened or why you chose this reason.

*Attach additional sheets if necessary.*

### Part 3: Signature

**Signature**       Requester       Representative       Other

First Name

Last Name

Phone Number

(       )       -

|           |                   |
|-----------|-------------------|
| Signature | Date (dd/mm/yyyy) |
|-----------|-------------------|

#### Representative Information (if applicable)

|                                 |          |                              |            |
|---------------------------------|----------|------------------------------|------------|
| Name                            | LSUC #   | Company Name (if applicable) |            |
| Mailing Address                 |          | Phone Number                 |            |
| Municipality (City, Town, etc.) | Province | Postal Code                  | Fax Number |

#### Important Information:

1. A request to reopen an application that was resolved by a **mediated agreement** must be made within **one year** of the date the agreement was signed. The request can be filed by any party to the agreement. The person who makes the request must attach a copy of the mediated agreement.
2. A request to reopen an application that was resolved by a **consent order** under section 206 must be made no later than **30 days** after:
  - the tenant's failure to meet a term of the order, or
  - the date the order was made, on the basis that the other party coerced them or deliberately misled them.
3. When a party files this request with the LTB, the LTB will schedule a hearing and give the parties a Notice of Hearing.
4. It is an offence under the *Residential Tenancies Act, 2006* to file false or misleading information with the Landlord and Tenant Board.
5. For further information, you may contact the Landlord and Tenant Board at **416-645-8080** or toll-free at **1-888-332-3234**. Or you may visit the LTB's website at [tribunalsontario.ca/ltb](http://tribunalsontario.ca/ltb).

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).

|   |             |
|---|-------------|
| <b>OFFICE USE ONLY:</b>   | File Number |
| Delivery Method: <input type="radio"/> In Person <input type="radio"/> Mail <input type="radio"/> Courier <input type="radio"/> Email <input type="radio"/> Efile <input type="radio"/> Fax    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*.

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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?