

FORM 2 (A)

TENANT APPLICATION TO DETERMINE DISPUTE

TO: The Director of Residential Tenancy
P.O. Box 577
Charlottetown, PE C1A 7L1
Telephone: (902) 892-3501 or 1-800-501-6268
Email: askrental@peirentaloffice.ca

RE: The residential property located at: _____

A tenant, a landlord or a person representing either party may, during or within six (6) months after termination of a tenancy agreement make an application to the Director to determine a question arising under this *Act* or the *Regulations*; whether a provision of a tenancy agreement has been contravened; whether a provision of this *Act* or the *Regulations* has been contravened.

I am seeking the following remedy:

- (a) _____ To dispute a Notice of Termination (Form 4);
- (b) _____ To request a return of rent due to an unlawful rent increase;
- (c) _____ To request compensation from my landlord for failure to provide me with a right of first refusal;
- (d) _____ To request a determination that my landlord has arbitrarily or unreasonably withheld consent to the assignment or sublet of a rental unit; **[You have 10 days from the alleged conduct to make this application]**
- (e) _____ To request reimbursement for emergency repairs I personally paid for;
- (f) _____ To request the landlord provide the tenancy agreement and/or other information required by the *Act*;
- (g) _____ To request the recovery of overpayment of the security deposit;
- (h) _____ To request the return of the security deposit;
- (i) _____ To request a determination that my landlord contravened my right to quiet enjoyment, entered the rental unit unlawfully, prohibited and/or restricted access to the rental unit, changed the locks or failed to secure the rental unit, failed to repair or maintain the rental unit, or any other material term of the tenancy agreement;
- (j) _____ **I am a former Tenant** and request compensation from my former Landlord for a bad faith eviction;
- (k) _____ Other. _____

Particulars of your Dispute:

(Required): Please provide a description, summary or submission regarding your Application. Example: What is your position/argument and/or what are you seeking or wanting?

Applicant's Information:

Name(s): _____

I am a:

Landlord: ____ Property Manager: ____ Tenant/Sub-tenant: ____ Representative for Tenant/Sub-tenant: ____

Mailing Address: _____

Telephone: _____ E-Mail: _____

Respondent's Information:

Name(s): _____

They are a:

Landlord: ____ Property Manager: ____ Tenant/Sub-tenant: ____ Representative for Tenant/Sub-tenant: ____

Mailing Address: _____

Telephone: _____ E-Mail: _____

Confidentiality: The Landlord, Tenant, or Representative referred to in this Application shall supply any information requested by the Director for the purpose of determining the matter in dispute, and all information provided to the Director shall be available to both parties, who shall preserve confidentiality with respect to it pursuant to subsection 75.(3) of Act.

Service: A person who makes an Application to the Director shall give a copy of the Application to the other party in accordance with Section 100 within Five (5) days of making the Application.

Permitted Types of Service / Substituted Service:

1. Hand delivered / Personally delivered*;
2. Mailing by registered or ordinary mail;
3. E-mail;
4. If you are a Landlord, posting the document to the front door of the rental unit.

**If you are a Tenant, you may deliver the document to the Landlord's property manager or employee.*

Date: _____
(Day/Month/Year)

Signature: _____

(Print Name)