FORM 2 (B) LANDLORD APPLICATION TO DETERMINE DISPUTE

Application required to be served to the tenant within five (5) days of filing with the Rental Office**

- TO: Residential Tenancy Office P.O. Box 577 Charlottetown, PE C1A 7L1 Telephone: (902) 368-7878 or 1-800-501-6268 Email: <u>askrental@peirentaloffice.ca</u>
- RE: The residential property located at: _____

I am seeking the following:

- (a) ____ To request an order directing my tenant to pay outstanding rent;
- (b) ____ To request an earlier termination of the tenancy agreement;
- (c) ____ To request my tenant vacate the rental unit and ordering the Sheriff to put me into possession of the rental unit;
- (d) ____ To request an order to permit the disposal of my tenant's personal property;
- (e) ____ To make claim against the security deposit [You have 15 days from the end of the tenancy to file this application] ¹
- (f) ____ To seek compensation exceeding the security deposit in the amount of \$_____
- (g) ____ To request a determination that my tenant has sublet or assigned the rental unit without my written consent, or my tenant has charged the subtenant more rent that is permitted; [You have 10 days from the alleged conduct to make this application]
- (h) ____ Other. __

Particulars of your Dispute:

(**Required**): Please provide a description, summary or submission regarding your Application. Example: What solution are you looking for, including the amount (\$\$) of any compensation, if any, and why do you feel that is valid? (*Attach separate paper if more space is required*.)

¹ If you do not return the entirety of the security deposit to the tenant or file a claim to retain all or part of the deposit with the Rental Office within 15 days from the end of the tenancy, you lose your right to claim against the deposit and you must pay the tenant double the amount of the security deposit.

Applicant's Information:

Manie	s):	
l am a:	Landlord: Sub-landlord:	_ Property Manager:
	Address:	
Teleph	one:	E-Mail:(<i>Please print)</i>
	ondent's Information:	(Please print)
Name(s):	
They a	re a: Tenant: Sub-tenant:	Representative for Tenant/Sub-tenant:
Telephone:		E-Mail:(<i>Please print)</i>
		(Please print)
<u>-</u>	Application period : A tenant, a landlord six (6) months after termination of a tena determine a question arising under this <i>b</i>	d or a person representing either party may, <u>during or within ancy agreement make</u> an application to the Director to <i>Act</i> or the <i>Regulations</i> ; whether a provision of a tenancy her a provision of this <i>Act</i> or the <i>Regulations</i> has been
	any information requested by the Director	or Representative referred to in this Application shall supply or for the purpose of determining the matter in dispute, and hall be available to both parties, who shall preserve

e: A person wno 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 (select below how application served to respondent):

- □ Hand delivered / Personally delivered;
- \Box Mailing by registered or ordinary mail;

□ E-mail;

 $\hfill\square$ Posting the document to the front door of the rental unit.

Signature: _____

Date: ______(Day/Month/Year)

(Print Name)