

RESIDENTIAL TENANCY Dispute Resolution Service

Open the door to a new way of resolving disputes.

Application Package for Tenants

A. Instructions for completing a Notice of Application for Hearing - Residential Tenancy Dispute Resolution Service

1. Obtain a copy of the *Residential Tenancies Act*. Copies can be purchased through the **Alberta Queen's Printer Bookstore**:
Main Floor, Park Plaza, 10611 - 98 Avenue, Edmonton AB T5K 2P7
Phone: (780) 427 – 4952

Or may be viewed online at www.qp.gov.ab.ca
2. Complete the Notice of Application for Hearing and Affidavit in Support of an Application by Landlord/Tenant. File these documents, along with any additional documents noted in item #4, at the Residential Tenancy Dispute Resolution Service office located at **1703 TD Tower, 10088 – 102 Avenue, Edmonton, Alberta**.

You are required to pay the prescribed filing fee of **\$75.00**.
3. Scheduled hearing dates are on a “first come - first served” basis. The Residential Tenancy Dispute Resolution Service office will provide you with the date and time of your hearing which will be heard at this office.
4. Depending on the nature of the claim, additional documents may be required such as:
 - a. Lease/Residential Tenancy agreement
 - b. Statement of Account
 - c. Notice of termination of tenancy
 - d. Summary of Witness(es). (Use only if you are planning to bring a witness)
5. These documents will be marked and sworn as exhibits to the Affidavit in Support of an Application by Landlord/Tenant.
6. **Related information can be accessed on the following website:**
www.governmentsservices.gov.ab.ca -

B. Instructions for completing the Affidavits

Cross out and initial **ALL** sections that do not apply, as shown below

^{AB}
c) ~~leaving the copies on _____ at _____
Date Print complete address
the Landlord / Tenant's most usual place of residence, with
_____, a resident, thereof, who was
apparently 16 years of age or older.~~ AB

It is your responsibility to notify the Residential Tenancy Dispute Resolution Service office of any change in your address.

C. CHECKLIST

Prior to visiting the Residential Tenancy Dispute Resolution Service office to file your application, the following checklist may be of assistance to ensure you have all the information you need:

- The full name(s) of the landlord & tenant
- The full address(es) of the landlord & tenant, including the postal codes
- The address of the rental premises in dispute
- The daytime telephone number, especially important if the one of the parties reside in another location
- A concise summary of your claim, including details, that you will write on the application form

COPIES OF EACH OF THE FOLLOWING THAT APPLY:

- Document specifying the amount you are claiming, if this applies
- All receipts, invoices, and estimates to support your monetary claim
- Termination notice(s), if requesting an order of possession or an order setting aside the notice
- Tenancy agreement, if there is one
- Notice of Rent Increase, if requesting an order setting aside the notice
- Summary of Witness(es), if you intend to bring a witness to support your claim
- The filing fee necessary to file the claim, or proof of financial situation if requesting that the fee be waived.

Case No _____

Counter Claim / Cross Reference No. _____

PLEASE READ THE FOLLOWING

It is important that you or your Agent attend the Hearing. If you or your Agent do not appear, an Order may be made in your absence. If you or your Agent appear, bring your evidence.

This Notice of Application, the Affidavit in support, and all Exhibits attached to the Affidavit in support must be served on the other party not less than **three (3)** business days before the date your Application is scheduled to be heard. The **three (3)** days do not include the day the documents are served, the date the Application is to be heard, Saturdays, Sundays, or statutory holidays.

TENANT: _____ Daytime Telephone: (_____) _____
Print full name

Full address including City/Town, Province and Postal Code

LANDLORD: _____ Daytime Telephone: (_____) _____
Print full name

Full address including City/Town, Province and Postal Code

The attached Affidavit in support of this application will be read at the hearing.

The Tenant has requested a hearing by a Tenancy Dispute Officer in respect of the rental premises located at

_____, Edmonton, Alberta, for an Order for:
Full address of rental premises

TENANT'S REMEDIES under section 37

- Damages for breach of residential tenancy agreement/contravention of Residential Tenancies Act
- Abatement of rent for breach of residential tenancy agreement/contravention of Residential Tenancies Act
- Compensation for performing landlord's obligations
- Termination of tenancy

TENANT'S REMEDY under section 46.3

- Recovery of whole or part of Security Deposit

- By checking this box, I give my permission to use the above information for the purpose of evaluating this pilot project. I prefer to be contacted by: Telephone Regular Mail No preference
- I abandon that part of my Claim that exceeds the \$25,000 financial jurisdiction of this Residential Tenancy Dispute Resolution Service. I understand and agree that I cannot recover in this Residential Tenancy Dispute Resolution Service or any other court the part of my claim that is abandoned, unless the court agrees.
- I hereby certify that I have not been served, nor do I believe that an application has been filed in the Court process in this matter prior to the filing of this application and further, if I become aware that a pre-existing application has been filed in this matter, I shall advise the Residential Tenancy Dispute Resolution Service and agree to withdraw this application.

Dated on _____, 20____
at Edmonton, Alberta

Signature of Tenant / Agent

TO BE COMPLETED BY OFFICE STAFF

THE HEARING will be held at 1703 TD Tower, 10088 – 102 Avenue, Edmonton, Alberta.

DATE: _____, 2006

TIME: _____ .

Issued by the Residential Tenancy Dispute Resolution Service

on _____, 2006

Administrator

Counter Claim Case No. _____

Case No. _____

Affidavit in Support of Tenant's Application for Hearing under Section 37 or 46

[Complete each section for which a remedy is claimed. If not enough space is provided for details, attach a separate page. Cross out and initial all sections that do not apply.]

TENANT:

_____ Print full name

_____ Full address including City/Town, Province and Postal Code

LANDLORD:

_____ Print full name

_____ Full address including City/Town, Province and Postal Code

I, _____ **make oath and say / solemnly affirm I am:**

- the tenant the agent for the tenant the lawyer for the tenant

Attached as Exhibit "_____" is a copy of:

- the residential tenancy agreement **OR** there is no written tenancy agreement

Damages for breach(es) of the tenancy agreement/contravention(s) of the *Residential Tenancies Act*
Details of the breach(es) or contravention(s) are as follows:

The amount of the claim for damages is \$_____

Abatement of rent for breach(es) of the tenancy agreement/contravention(s) of the Residential Tenancies Act
Details of the breach(es) or contravention(s) are as follows:

The rent payable under the residential tenancy agreement is \$_____ per month.

The amount of abatement claimed is \$_____ per month for a total of \$_____ .

The benefits of the tenancy agreement of which the tenant has been deprived are as follows:

Compensation for the cost of performing the landlord's obligations

The rent payable under the residential tenancy agreement is \$ _____ per month.

The details of the breach(es) of the residential tenancy agreement/contravention(s) of the *Residential Tenancies Act* are as follows:

The details of the obligations performed on the landlord's behalf are as follows:

The amount of compensation claimed is \$ _____ per day.

Termination of the tenancy

Details of the breach(es) of the residential tenancy agreement or the contravention(s) of the *Residential Tenancies Act* are as follows:

The requested termination date is _____, 20____ .

Return of Security Deposit

The amount of security deposit claimed is \$ _____.

The details of the reasons for the claim are as follows:

Sworn / Affirmed before me

on _____

at Edmonton, Alberta

Signature

(Print Name)

A Commissioner for Oaths

(Printed or stamped name and expiry date)

Case No. _____

Cross Reference No. _____

AFFIDAVIT OF SERVICE

I, _____
Print full name

of _____
Print complete address including City/Town, Province, Postal Code

Make oath and say / solemnly affirm and declare that on behalf of the applicant, I served the respondent,
_____, with a true copy of the following filed documents:

- Notice of Application for Hearing
- Affidavit in Support of Landlord's Application
- Affidavit in Support of Tenant's application
- Order

which are hereunto annexed

By:

Delivering the copies on _____, 20 ____ personally to the respondent at

Print complete address including City/Town, Province, Postal Code

Mailing the copies to the respondent at _____
Print complete address including City/Town, Province, Postal Code
If serving the Tenant, write the address of the rented premises or if serving the Landlord, write the Landlord's address at which rent is payable or the address of the Notice of Landlord given under section 18 of the *Residential Tenancies Act*.
Attached and marked Exhibit "A" is the printed verification receipt from Canada Post on-line. Attached and marked Exhibit "B" is the acknowledgement of receipt from the respondent or a person receiving it on the respondent's behalf dated on _____, 20 ____
Date from acknowledgment of receipt

Leaving the copies with an adult person residing with the respondent/by posting the copies on a conspicuous place on the rented premises, namely, _____
Print complete address of place they were posted, including City/Town, Province, Postal Code
on _____, 20 ____ because I believed the respondent to be absent from the premises/evading service.

Leaving the copies on _____, 20 ____ at the registered office of the above named corporation at

Print complete address including City/Town, Province, Postal Code

Mailing the copies on _____, 20 _____ by registered mail to the registered office of the
Date from postal receipt
above named corporation at _____
Print complete address including City/Town, Province, Postal Code
Attached and marked Exhibit "A" is the printed verification receipt from Canada Post on-line.

Leaving the copies on _____, 20 ____ with _____
Date Name of individual personally served
a / an _____
President, Head Officer, Director, Manager, Agent or Officer of the Corporation (Circle the one that applies)
at _____
Print complete address including City/Town, Province, Postal Code

As directed by the Residential Tenancy Dispute Resolution Service (Stipulate date and method)

Sworn / Affirmed before me

on _____, 2006

Signature

at Edmonton, Alberta

A Commissioner for Oaths

(Print name)

(Printed or stamped name and expiry date)