

FORM 12
APPLICATION BY LESSOR FOR APPROVAL OF RENT INCREASE EXCEEDING PERCENTAGE ALLOWED BY REGULATION

(Pursuant to Section 23(3) of the *Rental of Residential Property Act*, and section 14 of the Regulations)

TO: The Director of Residential Rental Property
P.O. Box 577
Charlottetown, PE C1A 7L1
Telephone: (902) 892-3501 or 1-800-501-6268

RE: Residential premises located at:

Type of Property (Check one):

- Apartment/Multiple Unit Rooming House Mobile Home
 Portion of Duplex or Row Housing Single Family Home Mobile Home Site

[If your application pertains to more than one of the above, or to properties at different street addresses, please use a separate form for each.]

Number of units affected by the proposed increase: _____.

Unit or Apt.	Name of Lessee	Current Rent*	Proposed Rent	% Increase	Effective Date of Proposed Increase	Date of Last Increase	Date Notice of Increase Served

*indicate whether the rent is monthly or weekly.

(If there are additional units, attach a schedule in this format.)

Services provided and included in the rent are: (CHECK ALL THAT APPLY. IF DIFFERENT FOR DIFFERENT UNITS, PLEASE INDICATE PARTICULARS ON A SEPARATE SHEET.)

- Heat Water Hot Water
 Electricity Cooking Stove Refrigerator
 Washer & Dryer (coin) Cable TV Service Cable TV Hook-up
 Washer & Dryer (non-coin) Janitorial Parking
 Other Specify _____

Is a change in services being proposed? _____ Yes _____ No

The reason(s) for seeking this rent increase are:

DATED this _____ day of _____, 20_____.

Signature: _____
[Lessor or Agent]

[Address & Telephone Number]

NOTE:

- A COPY OF THIS APPLICATION MUST BE SERVED ON THE LESSEE. (SECTION 23(5) OF ACT)
- THE PROPOSED RENT MAY NOT BE CHARGED PENDING THE OUTCOME OF THIS APPLICATION.