



Important information about the Payment Agreement

Read this information over carefully before filling out the attached Payment Agreement form. You may also want to get legal advice first. Once the Payment Agreement is signed, it is a legal contract.

A non-profit housing co-operative (Co-op) and a Co-op member can use this form to settle an application to evict a Co-op member for non-payment of housing charges. After it is filled out, you must give a copy to the Landlord and Tenant Board (LTB).

A Payment Agreement can include the following amounts:

- The amount of regular monthly housing charges that the Co-op member owes to the Co-op,
- Any NSF bank charges and related administration charges that the Co-op member owes to the Co-op,
- The fee of \$170.00 that the Co-op paid to file the application, and
- Any new regular monthly housing charges that will come due during the period covered by the Agreement.

A Payment Agreement cannot:

- End the occupancy or evict the Co-op member,
- Allow the Co-op to evict the Co-op member without first giving notice to the Co-op member, and
- Include repayment of any other amounts owing.

How to give this agreement to the LTB

You can give a copy of this agreement to the LTB by sending it to the following email address:

co-opprocessingLTB@ontario.ca

When you give this agreement to the LTB

The LTB will decide whether to make an order based on the agreement.

- If the LTB issues a consent order before the case management hearing, the hearing will be cancelled.
- If the LTB does not issue a consent order, the case management hearing will take place as scheduled. You must go to the hearing. If you do not go to the hearing, the LTB will hold the hearing without you. For information about your hearing, see the Notice of Hearings attached to the application.

If you do not receive an order from the LTB before the hearing date, you should contact the LTB's co-op processing office at **416-314-7061** or toll free at **1-844-288-7221** to find out if the hearing has been cancelled.



File Number:

Co-op:	Co-op Member:
Address of Member Unit:	

The Co-op and the Co-op member agree to the following repayment plan to settle the Co-op's application, file number:

1. The Co-op member owes the Co-op \$ which is made up of:

\$ for regular monthly housing charges owing up to dd/mm/yyyy

\$ for NSF bank charges and related administration charges, and

\$ for the fee the Co-op paid to file the application.

2. The Co-op member agrees to pay to the Co-op the amount in paragraph #1 above, as follows:

Amount to be paid \$	Due date (dd/mm/yyyy)
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

3. The Co-op member also agrees to pay the Co-op the regular monthly housing charges as they become due during the repayment period. The current regular monthly housing charge is

\$ and is due on the _____ day of each month.

4. The Co-op and the Co-op member ask the LTB to make an order based on this Agreement.



Important information to read before signing the agreement:

If the LTB makes an order based on this agreement and the Co-op member fails to make any payment in full and by the due date, the Co-op can ask the LTB to re-open the application within 30 days.

The Co-op or the Co-op member can ask the LTB to re-open the application within 30 days of the date the LTB makes the order, if they believe that the other party:

- Forced them to enter into the agreement, or
- Gave them false or misleading information on purpose that had a “material effect” on this Agreement and on the order.

If an application is re-opened, there will be a hearing and the LTB will decide if the order should be changed.

If you do not receive an order from the LTB before your hearing date, you should contact the LTB at 416-314-7061 or toll-free at 1-844-288-7221 to see whether you must attend your hearing.

Name of Co-op Member	Signature	Date
Name of Co-op Member	Signature	Date
Name of Co-op / Representative	Signature	Date
Name of Co-op / Representative	Signature	Date

(If there are more names than spaces, put them below, using the same format.)

COLLECTING PERSONAL INFORMATION

The LTB collects the personal information requested on this form under section 185 of the *Residential Tenancies Act, 2006*. This information will be used to determine applications under this Act. After this form is filed, your information may also become available to the public. Any questions about the collection of this information may be directed to a Customer Service Officer at **416-645-8080** or toll-free at **1-888-332-3234**.