Notice of Decision Letter - Appealable Decisions

*(Insert date letter will be issued)*

Dear *(Insert name of Tenant/Member)*,

This notice is to advise you of a decision made with regard to:

Your eligibility for RGI assistance

The amount of rent you are required to pay

The size of accommodation you are eligible for under the occupancy standards

Your eligibility for special needs housing

Other *(Insert specific details about the “other” reason)*

The decision was made on *(Insert date decision was made)*, and was based on the following reason(s):

Non-compliance *(Insert specific details about the reason)*

Change of Income *(Insert specific details about the reason)*

Other *(Insert specific details about the reason)*

If you disagree with this decision, you have the right to appeal the decision to the Region of Peel Service Manager within ***30 calendar days*** of receiving this notice.

To request a Region of Peel Service Manager Appeal, you must complete a Region of Peel Service Manager Request Form, which is available:

* from your housing provider’s office, or
* directly from the Region of Peel’s website at: <http://www.peelregion.ca/housing/provider/hip/policies/>

Sincerely,

*(Insert name of staff person and job title)*

*{\*Reminder: Print using letterhead or insert housing provider contact information here\*}*