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\*}*