

SAMPLE: REQUEST TO COUNCIL TO TERMINATE TENANCY

Request for Approval or Notification of Action

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Date:

To: Chief and Council, Turtle Falls First Nation

Re: Request to Authorize Terminating of Tenancy OR Notification of Action

The housing department is requesting approval from Chief and Council to terminate tenancy or, notifying Chief and Council of termination of tenancy, as follows:

Tenant Name:

Address of Unit:

Effective Date of Termination of Tenancy:

In accordance with the approved rental housing policy, termination of tenancy is being requested/is being taken because the tenant named above has committed a breach of their rental agreement (the tenant has not lived up to their obligations under the terms of the rental agreement) for the following reason(s):

- ☐ Failed to pay the rent payment in full on the day it is due; and/or
- ☐ Failed to keep the premises in a state of good repair; and/or
- ☐ Failed to pay the cost of heating and hydro for the unit; and/or
- ☐ Interfered in a significant manner with another lawful right, privilege or interest of Turtle Falls First Nation or another tenant or a neighboring household; and/or
- ☐ Performed illegal acts or carried on illegal trade, business or occupation in the premises; and/or
- ☐ Endangered persons or property in the unit; and/or
- ☐ Damaged the unit either willfully or negligently (including damage caused by other occupants, their guests or their pets); and/or
- ☐ Sublet, leased or assigned the premises without prior written consent by Turtle Falls First Nation; and/or
- ☐ Used the premises for other than residential purposes.

The housing department has documented evidence of contact with the tenant, or attempts to contact the tenant, to resolve the breach of the rental agreement as follows:

DATE OF CONTACT	METHOD OF CONTACT	RESPONSE/ACTION TAKEN BY TENANT	RESPONSE/ACTION TAKEN BY HOUSING DEPARTMENT

The breach of the rental agreement by the tenant has resulted in a financial loss for Turtle Falls First Nation as follows:

TYPE OF FINANCIAL LOSS	AMOUNT OF LOSS (ESTIMATED/ACTUAL)

Signed: Housing Manager

Authorization to proceed with **OR** notification of termination of tenancy for _____
(tenant) effective _____ (date)

_____ Councillor:	_____ Councillor:
_____ Councillor:	_____ Councillor: