Tribunal administratif du logement
Québec

Availability

Record number(s)

Application number(s)

ADDRESS OF DWELLING IN QUESTION

No.	Street	Apt.	Municipality	Postal code

PERSON CONCERNED

☐ Lessor ☐ Lessee ☐ Other (specify)

Last name	First name

The above-mentioned person wishes to state that they will not be available for the application hearing on the date(s) below:

The Tribunal administratif du logement will try as far as possible to take your availability into consideration.

Date of filing

☐ Lawyer ☐ Other:

Year Month Day Block letters Signature

Year Month Day Block letters Signature

Information clerk code