# **Application for Termination of Residential Tenancy Agreement due to Severe Hardship**

This form is used when a tenant or owner wishes to terminate at fixed term Residential Tenancy Agreement due to severe hardship.

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| **Tenant contact details** | |
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| Name: |  |
| Address: |  |
| Phone Number: |  |
| Email Address: |  |

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| **Details of tenancy** |

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| Bond Number (if known): |  |
| Property Address: |  |

| **Owner / Agent contact details** |
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|  |  |
| --- | --- |
| Name: |  |
| Address: |  |
| Phone Number: |  |
| Email Address: |  |

| **Evidence** (to be provided to the Commissioner) **(please tick) (\*mandatory)** |
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| **Lease agreement\*** |  |
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| **Proof of severe hardship e.g. letter of termination from employer or doctors letter\*** |  |
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| **Correspondence regarding hardship between parties** |  |
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| **Any other evidence that may support your claim** |  |
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| **Relevant information as to why you believe the agreement should not continue** |
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