



Division/Branch
Address
Town/City MB Postal Code
manitoba.ca/housing

Name
Title
E-mail address
Tel: (204) 945-xxxx
Toll Free: 1-800- if avail
Fax: (204) 945-xxxx

<<Date>>

<<Leaseholder name>>

<<Co-leaseholder name>>

<<Address>>

<<City/town, MB postal code>>

Tenancy Reference: <<Tcy Ref No>>

Client ID: <<Client ID>>

Client ID: <<Client ID>>

Request to Review Policy Decision - Expired

Dear << Leaseholder and Co-Leaseholder >>:

This letter is to acknowledge that Manitoba Housing has received your request to review the recent policy decision regarding your **[[Review of the policy decision regarding (Select one and enter: application for housing or Manitoba Housing tenancy)]]**.

A request to review a policy decision must be submitted within 60 days from the date of the decision. Your request was not received within the required timeframe and will not be reviewed.

If you have any questions or concerns, please contact me.

Regards,

<<Sender Name>>

<<Sender Title>>

Tel: <<Sender Tel>>