



Y Tribiwnlys Eiddo Preswyl
Residential Property Tribunal

Application Form Section 91(2) (d) of the Leasehold Reform, Housing and Urban Development Act 1993

Application for Reasonable Costs – Flats and Premises
provided for by section 20 of the Landlord and Tenant Act 1985

It is important that you read the notes below carefully before you complete this form.

Please write clearly in BLACK ink and tick boxes where appropriate.

This application form is also available in Welsh. Please contact the tribunal for a Welsh version of this form.

This is the correct form to use if you want to ask the Leasehold Valuation Tribunal (“the Tribunal”) for a determination of the reasonable costs payable under section 33(1) or 60(1) of the Leasehold Reform, Housing and Urban Development Act 1993 (the Act).

Documents

You must send the following document(s) (“required document(s)”) with this application:
a copy of all notices served in relation to the enfranchisement or extended lease
a copy of the bill or demand for the payment of costs

Failure to send any required documents might make this application invalid.

Please do not send any other documents at this time. If and when further documents, information or evidence are needed, you will be asked to send them separately.

Please send the completed application form and the required documents to:

**Residential Property Tribunal
1st Floor, West Wing
Southgate House
Wood Street
Cardiff
CF10 1EW**

Note to Applicants

Applicants are advised that any information that they provide to the Tribunal may be recorded in a decision document. All decisions are open to the public.

The Residential Property Tribunal will not accept application by Fax or Email

Language Preference

The Residential Property Tribunal welcomes receiving correspondence in Welsh or English. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding. The Tribunal also welcomes phone calls in Welsh or English.

You may submit forms, documents and make written representations to the tribunal in Welsh or English.

Please inform the tribunal of your language preference by completing box 3 below.

1. TYPE OF APPLICATION (S)

*I/We apply to The Tribunal for determination of the reasonable costs payable under

section 33(1) of the Act (enfranchisement)

section 60(1) of the Act (extended lease)

2. PROPERTY ADDRESS (including postcode)

3. LANGUAGE PREFERENCE

Please indicate your language preference:

Written correspondence? Welsh / English (please delete as appropriate)

Verbal communication? Welsh / English (please delete as appropriate)

Do you wish to speak Welsh in any legal proceedings that may result from this application i.e. tribunal hearing or pre-trial review?

Yes / No (please delete as appropriate)

4.DETAILS OF APPLICANT(S) (if there are multiple applicants, please continue on a separate sheet)

| | | |
|---|----------------|---------------|
| Name: _____ | | |
| Address (including postcode): _____ _____ | | |
| Address for correspondence (if different): _____ _____ | | |
| Telephone: Day: _____ | Evening: _____ | Mobile: _____ |
| Email address: _____ | | |
| Capacity e.g. (Leaseholder, Freeholder, Intermediate Landlord, Nominee Purchaser): _____ | | |
| Representative details: _____ _____ _____ | | |

Where details of a representative have been given, all correspondence and communications will be with him/her until the Tribunal is notified that he/she is no longer acting for you.

5.DETAILS OF RESPONDENT (S) (if there are multiple Respondents, please continue on a separate sheet)

| | | |
|---|----------------|---------------|
| Name: _____ | | |
| Address (including postcode): _____ _____ | | |
| Address for correspondence (if different) _____ _____ | | |
| Telephone: Day: _____ | Evening: _____ | Mobile: _____ |
| Email address (if known): _____ | | |
| Capacity (e.g. Leaseholder, Freeholder, Intermediate Landlord, Nominee Purchaser): | _____ | |
| Representative details: _____ _____ _____ | | |

6. DETAILS OF FREEHOLDER (if Freeholder is not Applicant or Respondent)

Name: _____

Address (including postcode): _____
_____Address for correspondence (if different) _____

Telephone: _____ Evening: _____ Mobile: _____

Email address (if known): _____

Representative details: _____
_____Is the Freeholder's interest in the property subject to a mortgage or charge? Yes No **7. DETAILS OF INTERMEDIATE LANDLORD**

Name: _____

Address (including postcode): _____
_____Address for correspondence (if different) _____

Telephone: Day: _____ Evening: _____ Mobile: _____

Email address (if known): _____ Fax: _____

Representative details: _____
_____Is the intermediate Landlord's interest in the property subject to
a mortgage or charge? Yes No If yes give details in section 7

8. DETAILS OF MORTGAGEE OR CHARGE

Name: _____

Address (including postcode): _____

Address for correspondence (if different) _____

Telephone: Day: _____ Evening: _____ Mobile: _____

Email address (if known): _____ Fax: _____

Capacity: _____

Representative details: _____

9. ADDITIONAL INFORMATION

Please answer the following questions:

(1) Please state the amount(s) in dispute

(2) Please give your reasons and state the amounts(s) you consider appropriate

10. CAN WE DEAL WITH YOUR APPLICATION WITHOUT A HEARING?

Is it possible for your application to be dealt with entirely on the basis of written representations (“A paper determination”) but only if:

- the Tribunal thinks it is appropriate
- all parties agree

Even if you agree to a paper determination

- the Tribunal may decide that an oral hearing is necessary
- you or any other party may still ask for an oral hearing at any time before the determination is made.

Do you agree to this application being determined without an oral hearing YES NO

Please ensure that you complete this form in full on the assumption that there will be an oral hearing.

11. AVAILABILITY

If there are any dates or days we must avoid during the next three months (either for your convenience or the convenience of any witness or expert you may wish to call) please list them here.

Dates on which you will NOT be available: _____

12. VENUE REQUIREMENTS

Please provide details of any special requirements you or anyone who will be coming with you may have (e.g. the use of a wheelchair and/or the presence of an interpreter). It will assist the Tribunal in making the arrangements if it has been aware of your needs.

13. STATEMENT OF TRUTH

I believe that the facts stated in this application are true.

Signed: _____

Name (IN CAPITALS): _____

Capacity (if appropriate) (e.g. Director, Company Secretary) _____

Date: _____

CHECKLIST

Please check that:

- you have completed this form in FULL
- you have enclosed all the required documents

The Tribunal will not process your application if you have not done so.

Please contact the Residential Property Tribunal if you have any questions about how to fill in this form or the procedures the Tribunal will use:

Telephone: 0300 025 2777

Email: rpt@gov.wales