



Application Form
Section 24(1) of the Leasehold Reform,
Housing and Urban Development Act 1993

Flats and Premises - Collective Enfranchisement
Application for Determination of the Terms of Acquisition remaining in Dispute

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

Please write clearly and 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, under section 24(1) of the Leasehold Reform, Housing and Urban Development Act 1993 (“the Act”), you want to ask the Leasehold Valuation Tribunal (“the Tribunal”) for a determination of the terms of acquisition which remain in dispute.

Documents

You must send the following documents (“required documents”) with this application:

- copy of the leases (or of a typical lease if they are in a standard form)
- copies of all Notices and Counter-Notices served.

Failure to send any required document(s) 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
Oak House
Cleppa Park
Celtic Springs
Newport
NP10 8BD**

Note to Applicants

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

The Residential Property Tribunal will not accept applications 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 under section 24(1) for a determination of the terms of acquisition which remain in dispute.

- a) the interest to be acquired by the nominee purchaser
- b) the extent of the property to which those interests relate, or the rights to be granted over any property
- c) the amounts payable as the purchase price for such interests
- d) the apportionment conditions or other matters in connection with the severance of any reversionary interest
- e) the provisions of the conveyance

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

Name: _____

Status of applicant (*Tick appropriate box*): Nominee Purchaser Reversioner Other (please specify)

Address (including postcode): _____

Address for correspondence (if different): _____

Telephone: Day: _____ Evening: _____ Mobile: _____

Email address: _____

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 are no longer acting for you.

5.DETAILS OF RESPONDENT

Name: _____

Address (including postcode): _____

Address for correspondence (if different) _____

Telephone: _____ Evening: _____ Mobile: _____

Email address (if known): _____

Representative details: _____

6.DETAILS OF FREEHOLDER IF FREEHOLDER IS NOT THE APPLICANT OR THE 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

If Yes please give details in Section 8

7.DETAILS OF INTERMEDIATE LANDLORD(S) (IF ANY) OTHER THAN APPLICANT OR RESPONDENT

Name: _____

Address (including postcode): _____

Address for correspondence (if different) _____

Telephone: _____ Evening: _____ Mobile: _____

Email address (if known): _____

Representative details: _____

Is the Intermediate Landlord's interest in the property subject to a Mortgage or Charge?

YES NO

If Yes please give details in Section 8

8.DETAILS OF MORTGAGEE OR CHARGE

Name: _____

Address (including postcode): _____

Address for correspondence (if different) _____

Telephone: Day: _____ Evening: _____ Mobile: _____

Email address (if known): _____

Representative details: _____

9.ADDITIONAL INFORMATION

Please give details of the terms of acquisition you wish to be determined, and if you are seeking a determination of the amounts payable for the acquisition of interests, please specify the amounts the applicant and respondent are currently seeking for those interests.

Please continue on a separate sheet if necessary

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

It is possible for your application to be dealt with entirely on the basis of written representations (“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 days or dates we must avoid during the next three months 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. wheelchair access, presence of an interpreter). It will assist the Tribunal in making the arrangements if it has been made 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) _____

Dated: _____

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