



Application Form
Section 22(1) Housing Act 1988
(as amended by Section 100 of the Housing Act 1996)

Application to a Rent Assessment Committee for determination of a rent under an Assured Shorthold Tenancy

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:

1. you have an assured shorthold tenancy which began (or for which a contract had been made) before 28 February 1997, and you wish to apply to have the rent reduced during the fixed term of the original tenancy, or;
2. you have an assured shorthold tenancy, whether fixed or periodic, which began on or after 28 February 1997 (unless a contract had been made before that date), and you wish to apply to have the rent reduced **within six months of the original tenancy**.

Please note:

An application cannot be made in the following circumstances:

1. if the rent payable under the tenancy is a rent previously determined by a Rent Assessment Committee, **OR**
2. if the tenancy is a replacement tenancy, and more than six months have elapsed since the beginning of the original tenancy.

A replacement tenancy is an assured shorthold tenancy which came into being on the ending of a tenancy which had been as assured shorthold of the same, or substantially the same property, and the landlord and tenant under each tenancy were the same at that time.

The Rent Assessment Committee cannot make a determination unless it considers:

1. that there is a sufficient number of similar properties in the locality let on assured tenancies (whether shorthold or not) for comparison; **AND**
2. that the rent payable under the shorthold tenancy in question is significantly higher than the rent which the landlord might reasonably be expected to get in comparison with other rents for similar properties let on assured tenancies (whether shorthold or not) in the locality.

Documents

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

- the written tenancy agreement (with a note of any variations)
- a copy of the Notice stating that the tenancy was to be an Assured Shorthold Tenancy before the agreement was entered into.

These documents will be returned to you.

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 together with 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. DETAILS OF TENANT(S)

Name: _____

Address of premises to which the tenancy relates (*including postcode*): _____

Address for correspondence (*if different*): _____

Telephone: *Day*: _____ *Evening*: _____ *Mobile*: _____

Email address: _____

2. DETAILS OF LANDLORD OR AGENT(S)

Name: _____

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 PREMISES

(a) What type of accommodation do you rent?

- | | | | |
|----------------|--------------------------|------------------------|--------------------------|
| Room(s) | <input type="checkbox"/> | Semi-detached House | <input type="checkbox"/> |
| Flat | <input type="checkbox"/> | Fully Detached House | <input type="checkbox"/> |
| Terraced House | <input type="checkbox"/> | Other (please specify) | <input type="checkbox"/> |

(b) If it is a flat or room(s), what floor(s) is it on?

- | | | | |
|------------------------|--------------------------|--------|--------------------------|
| Basement | <input type="checkbox"/> | First | <input type="checkbox"/> |
| Ground | <input type="checkbox"/> | Second | <input type="checkbox"/> |
| Other (please specify) | <input type="checkbox"/> | | |

(c) Give the number and type of rooms, e.g. 1 living room, 2 bedrooms, 1 bathroom etc

(d) Does the tenancy include any other facilities e.g. garden, garage or other separate building or land?

- YES NO

(e) If yes, please give details:

(f) Do you share any of the accommodation with:

- | | | |
|------------------------|------------------------------|-----------------------------|
| (i) the landlord | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| (ii) another tenant(s) | YES <input type="checkbox"/> | NO <input type="checkbox"/> |

(g) If yes, please give details:

5. RENT**(a) What is the current rent?**

£ _____ per (e.g. week, month etc.) _____

(b) Does the rent include Council Tax?YES NO **(c) If yes, what amount is included for Council Tax?**

£ _____ per (e.g. week, month etc.) _____

(d) Does the rent include water charges?YES NO **(e) If yes, what is the amount that is included for water charges?**

£ _____ per (e.g. week, month etc.) _____

6. ABOUT YOUR TENANCY**(a) When did the present tenancy begin?**

(b) When does the present tenancy end?

(c) Does the present tenancy replace an original tenancyYES NO **(d) If yes, when did the original tenancy begin?**

(e) If the tenancy began before 28 February 1997, please confirm (by ticking the box) that you received a notice stating that the tenancy was to be an Assured Shorthold Tenancy before the agreement was entered into.

7. ABOUT YOUR TENANCY

(f) Did you pay a premium?

YES NO

A premium is a payment which is additional to rent and is equivalent to more than two months rent. It may give you the right to assign the tenancy (pass it to someone else) unless the tenancy agreement states or implies otherwise.

(g) If yes, please give details:

8. SERVICES

(a) Are any services provided under the tenancy (e.g. cleaning, lighting, heating, hot water or gardening etc.)?

YES NO

(b) If yes, please give details:

(c) Is a separate charge made for services, maintenance, repairs, landlord's costs of management or any other item?

YES NO

(d) If yes, what charge is payable?

£ _____ per (e.g. week, month etc.) _____

(e) Does the charge vary according to the relevant costs?

YES NO

(f) If yes, please give details:

10. REPAIRS

(a) What repairs are the responsibility of the landlord?

(b) What repairs are the responsibility of the tenant?

11. TENANCY AGREEMENT

(a) Is there a written tenancy agreement?

YES NO

(b) Please give details (if known) of the other terms of the tenancy e.g. whether the tenancy is assignable, and whether a premium may be charged on assignment.

14. STATEMENT OF TRUTH

I/we* apply to the Rent Assessment Committee to determine a rent for the above mentioned premises

* to be signed and dated by the tenant OR the tenants agent.

If there are joint tenants, then each tenant or the agent must sign unless one signs on behalf of the rest with their agreement.

Please specify whether you are the:

Tenant	<input type="checkbox"/>
Joint Tenant	<input type="checkbox"/>
Tenant's Agent	<input type="checkbox"/>

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 the form fully. The Tribunal will not process your application until this has been done and it has a copy of the required documents.
- a copy of the required documents is enclosed.

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