

Application by occupier of a Mobile Home or a site owner for a determination of any question arising under Part 4 of the Mobile Homes (Wales) Act 2013 ("the Act") or any agreement to which it applies.

Section 54(1) of the Mobile Homes(Wales) Act 2013

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, by agreement with the site owner you are an occupier of a Mobile Home or you are party to such an agreement as a site owner and you want the tribunal to determine any other question arising under that agreement or under Part 4 of the Act. The other party to your application is known as the respondent.

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.

Documents

You must send the following document(s)("required document(s)") with this application:

- A copy of the agreement between the Mobile Home owner and the site owner.
- A copy of any relevant correspondence that you have given or received in connection with the question to be determined.

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.

Application Fee

Unless you are entitled to a waiver or reduction, you must send the Application Fee with the application and the required documents. The amount of the application fee will depend on the number of pitches or Mobile Homes to which this application relates.

Number of pitches or Mobile Homes to which this application relates	Application Fee
Where the application relates to one pitch or Mobile Home	£155
Where the application relates to two pitches or Mobile Homes	£205
Where the application relates to three or four pitches or Mobile Homes	£410
Where the application relates to five or more pitches or Mobile Homes	£515

The fee must be paid by crossed cheque or a postal order made payable to the "Welsh Government". Do not send cash under any circumstances. Cash payments will not be accepted.

Please note:

If you do not send the correct fee payable to the "Welsh Government" or if you send cash, the application and the cash will be returned to you at your risk.

Waiver of Fees

If the Applicant(s) or the partner(s) of any Applicant(s) is/are in receipt of certain income-related benefits, the Application Fee may be waived or reduced.

To claim a waiver or reduction in the Application Fee, the Applicant(s) in receipt of such benefit or Applicant(s) whose partner(s) is/are in receipt of such benefit must complete a waiver application form which can be obtained from the Residential Property Tribunal. This will not be copied to the other parties.

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.

It is important that you read the notes above carefully before you complete this form. Please write clearly in BLACK ink.

1. DETAILS OF SITE		WITH
Address of Cite		
Address of Site:		
Is the site a Local Authority (include travellers? Yes \(\sum \) No	ding County Counc	cil) site providing accommodation for gypsies and
2. DETAILS OF APPLICANT		
Name:		
Address of mobile home (including postcode):		
Address for correspondence (if different):		
Telephone:		
Day:		
Evening:		
Mobile:		
Email address:		
Name and address and details o	f agent/representat	tive (if relevant)
Where details of an agent/represe	entative have been	given, all correspondence and communications
will be with them until the Tribuna	I is notified that the	ey are no longer acting for the applicant(s).
3. LANGUAGE PREFERENCE		
Please indicate your langua	ge preference:	
Written correspondence? We	elsh / English	(please delete as appropriate)
Verbal communication? We	elsh / English	(please delete as appropriate)
Do you wish to speak Welsh in tribunal hearing or pre-trial rev		dings that may result from this application i.e.
Yes / No (please dele	te as appropriate)	

4. DETAILS OF RESPONDE	NT
Name:	
Address (including postcode):	
Telephone:	
Day:	
Evening:	
Mobile:	
Email address:	
5. DETAILS OF AGREEMEN	IT Control of the con
Date of agreement:	
Parties to the agreement:	
Date of any statement received o	r given:
Please enclose: A copy of the agreement A copy of any statement you A copy of any corresponden of this application	have received or given
6. ADDITIONAL INFORMAT	ION
	information about the conduct and financial circumstances of the you wish the tribunal to take into account. Please continue on a priefly
The question(s) you would like the	e Tribunal to determine

Date:	Date:	Date:	
Date:	Date:	Date:	
Dates on which you will NO	T be available:		
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.			
8. AVAILABILITY			
Please ensure that you co hearing.	mplete this form i	n full on the assumption hat there will be an oral	
Do you agree to this applica	tion being determir	ed without an oral hearing? Yes	
•	etheless decide tha	t an oral hearing is necessary. oral hearing at any time before the determination is	
It is possible for your applica ("paper determination") BUT The tribunal thinks it is No party requests a he	ONLY IF: appropriate and	h entirely on the basis of written representations	
7. CAN WE DEAL WIT	H YOUR APPLICA	TION WITHOUT A HEARING?	
Why you believe the Tribuna	al should make the	determination(s) and Order(s) requested:	
The Order(s) you are asking	the Tribunal to ma	ke:	

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.
10. STATEMENT OF TRUTH I believe that the facts stated in this application are true.
Signed:
Name (in capitals)
Capacity (if appropriate)(eg Director, Solicitor):
Date:

VENUE REQUIREMENTS

9.

CHECK LIST

Please check that:

- You have completed this form IN FULL.
- You have enclosed all the required documents.
- You have enclosed the appropriate fee or waiver application.

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

If you have any questions about how to fill in this form or the procedure the Tribunal will use, please contact the Residential Property Tribunal on 0300 025 2777 or e-mail rpt@gov.wales

The Residential Property Tribunal will not accept applications by FAX or Email.

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

Residential Property Tribunal Oak House Cleppa Park Celtic Springs Newport NP10 8BD