



Y Tribiwnlys Eiddo Preswyl
Residential Property Tribunal

Application Form Section 51(1)-(5) of the Leasehold Reform, Housing and Urban Development Act 1993

Flats and Premises
Leasehold Enfranchisement: Missing Landlord
Application to determine Lease Terms and/or Premium

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 as to the lease terms and / or premium under section 51(1)-(5) of the Leasehold Reform, Housing and Urban Development Act 1993 (“The Act”).

Documents

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

- the Vesting Order and any other Court Orders made in connection with the claim
- a copy of the lease

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 your 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 may be recorded in a decision document. All decisions made by the Tribunal are open to the public.

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.

The tribunal will accept applications by email to rpt@gov.wales or in hard copy by post.

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

1. PROPERTY ADDRESS (including Postcode)

2. DETAILS OF APPLICANT

Name: _____

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

Telephone: Day: _____

Evening: _____

Mobile: _____

Email address: _____

Fax: _____

Representative details: _____

_____**2A. Disclosure of information**

The Tribunal may copy the application form to other appropriate persons (e.g. other service charge paying leaseholders in the building or development). If you are a leaseholder and do not want your telephone number or email address to be disclosed to other such persons, please omit those details from Box 1 and attach them on a separate sheet.

Please also confirm that you do not want your (a) telephone number (b) email address details disclosed to other persons and confirm that you have supplied these on a separate sheet headed in bold and capital letters; **CONTACT DETAILS NOT TO BE SHARED WITH OTHERS.**

If you are sending in the application form and attachments by PDF, then the contact details not to be shared sheet **MUST** be sent in a separate attachment.

Note:

Where details of a representative have been given, all correspondence and communication will be through them until the Tribunal is notified that they are no longer acting.

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. LAST KNOWN DETAILS OF FREEHOLDER

Name: _____

Address (including postcode): _____

Address for correspondence (if different) _____

Telephone: Day: _____ Evening: _____ Mobile: _____

Email address (if known): _____ Fax: _____

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 5

5. DETAILS OF ANY 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 please give details in section 5

6. DETAILS OF MORTGAGEE OR CHARGE

Name: _____

Address (including postcode): _____

Address for correspondence (if different) _____

Telephone: Day: _____ Evening: _____ Mobile: _____

Email address (if known): _____ Fax: _____

Representative details: _____

7. 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 ("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.

8. 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: _____

9. 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.

10. STATEMENT OF TRUTH

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

Signed: _____

Name (IN CAPITALS) _____

Capacity (if appropriate) (eg 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