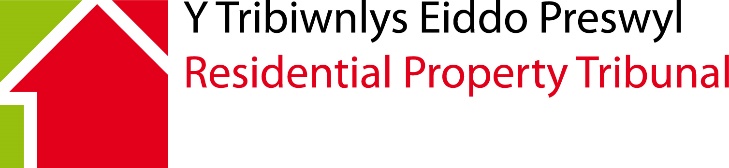
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# Application Form

# Section 21(1) (a) Leasehold Reform Act 1967

## Houses and premises – Leasehold Enfranchisement

## Application for a determination as to price payable

**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 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 the Tribunal to determine the price payable by the tenant for the acquisition of the freehold of his/her house and premises

There is a separate form if you want the Tribunal:

(a) to determine the provisions which ought to be contained in the conveyance; and / or

(b) to apportion the rent payable under the tenancy between the house and premises (or part of them) and other property; and / or

(c) to determine the amount of a sub-tenant’s share under Schedule 2 to the Act in any compensation payable to a tenant under section 17 or section 18 of the Act.

(d) to determine the reasonable costs payable under section 9 (4) or 14 (2) of the Act.

### Documents

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

* copies of the Notice of Claim and the Notice in Reply.
* a copy of the lease
* a copy of the Court Order (if applicable)

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 in separately.

**Please send the completed application form together with the copy of the 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.

RPT welcomes correspondence and phone calls in Welsh and English. This includes submitting forms, documents and written representations to the Tribunal.

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| 1. **1. Language Preference** |  |
| Would you prefer to correspond with us in: | Welsh  English  Both |
| Would you prefer any verbal communication to be in: | Welsh  English  Both |
| Would you prefer to speak Welsh or English at your Tribunal Hearing? | Welsh  English  Both |
| **2. Languages Spoken** |  |
| What languages do you use to communicate?  (Please tick all that apply) | Welsh  English  Other (please state) |
|  | Click or tap here to enter text. |
| 1. **3.** We would like to support the use of the Welsh language in Tribunals. If you can speak Welsh, and have indicated English as your language of choice, is there a specific reason why you have chosen to communicate in English? | (Your answer will not affect the substance of your case in any way) |
| Click or tap here to enter text. |  |

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| **1. DETAILS OF APPLICANT(S)** | | | | | | | | | | | |
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| Address (including postcode): | | | | |  | | | | | |  |
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| Address for correspondence (if different): | | | | | | |  | | | |  |
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| Telephone: Day*:* | | |  | | | Evening*:* | |  | Mobile: |  |  |
| Email address: | | |  | | | | | | | |  |
| Capacity (e.g. Tenant, Landlord): | | | | | | |  | | | |  |
| Representative details: | | | |  | | | | | | |  |
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| 1A. 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. |

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| **2. DETAILS OF RESPONDENT** | | | | | | | | | | | |
| Name: | |  | | | | | | | | |  |
| Address (including postcode): | | | | |  | | | | | |  |
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| Address for correspondence (if different): | | | | | | |  | | | |  |
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| Telephone: Day*:* | | |  | | | Evening*:* | |  | Mobile*:* |  |  |
| Email address: | | |  | | | | | | | |  |
| Capacity (e.g. Landlord/Tenant): | | | | | | |  | | | |  |
| Representative details: | | | |  | | | | | | |  |
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| **3. TYPE OF APPLICATION** |
| \*I/We apply to The Tribunal under section 21(1) (a) of the Act for a determination of the price payable under section 9(1) of the Act. |

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| **4. PROPERTY ADDRESS (including postcode)** | | | | |
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| **5. DETAILS OF FREEHOLDER (IF THEY ARE NOT THE RESPONDENT)** | | | | | | | | | | | |
| Name: | |  | | | | | | | | |  |
| Address (including postcode): | | | | |  | | | | | |  |
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| Email address: | | |  | | | | | | | |  |
| Representative details: | | | |  | | | | | | |  |
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|  | Is the Freeholder’s interest in the Property subject to a Mortgage or Charge? YES  NO | | | | | | | | | |  |
|  | If Yes please give details in Section 8 | | | | | | | | | |  |

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| **6. DETAILS OF INTERMEDIATE LANDLORD (IF ANY) OTHER THAN RESPONDENT** | | | | | | | | | | | |
| Name: | |  | | | | | | | | |  |
| Address (including postcode): | | | | |  | | | | | |  |
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| Address for correspondence (if different): | | | | | | |  | | | |  |
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| Telephone: Day*:* | | |  | | | Evening*:* | |  | Mobile*:* |  |  |
| Email address: | | |  | | | | | | | |  |
| Representative details: | | | |  | | | | | | |  |
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|  | Is the Intermediate Landlord’s interest in the Property subject to a Mortgage or Charge?  YES  NO | | | | | | | | | |  |
|  | If Yes please give details in Section 7 | | | | | | | | | |  |

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| **7. DETAILS OF MORTGAGEE OR CHARGEE** | | | | | | | | | | | |
| Name: | |  | | | | | | | | |  |
| Address (including postcode): | | | | |  | | | | | |  |
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| Address for correspondence (if different): | | | | | | |  | | | |  |
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| Telephone: Day*:* | | |  | | | Evening: | |  | Mobile*:* |  |  |
| Email address: | | |  | | | | | | | |  |
| Representative details: | | | |  | | | | | | |  |
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| **8. ADDITIONAL INFORMATION** | | |
|  | Has the landlord informed you of the price he/she is asking? YES  NO  If YES, enclose a copy of the letter or notice from the landlord and state the price the landlord considers appropriate.  Price £ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Have the terms of the conveyance (other than the price) been agreed? YES  NO  If not, you may need to make an application under Section 21(2) of the Act. A separate application form is available for this.. |  |
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|  | Has any application been made to the Court to determine any question relating to this application? YES  NO  If YES, has the Court made an Order? YES  NO |  |
|  | If Yes, please enclose a copy of the Order with this application. |  |
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| **9. 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. | | | |
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| **10. 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: | | | | |
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| **11. 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. | | | | |
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| **12. 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: | | |  |  |  |
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### 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**](mailto:rpt@gov.wales)