



Application by the occupier for an Order that the site owner secures that a temporarily re-sited mobile home is returned to the original pitch.

Mobile Homes (Wales) Act 2013, (“the Act”) Schedule 2, Chapter 2, Paragraph 14(3) and Schedule 2, Chapter 4, paragraph 44 (3).

THIS FORM RELATES TO MOBILE HOME SITES IN WALES ONLY INCLUDING PERMANENT PITCHES ON LOCAL AUTHORITY GYPSY AND TRAVELLER SITES IN WALES.

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 are the occupier of a Mobile Home on a protected site whose home has been moved temporarily to another pitch to enable the site owner to replace or carry out repairs to the base on which the home was situated and the owner has refused a request that the home be returned on the completion of the replacement or repairs.

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:

- Any request made by the occupier to the site owner to return the home to the original pitch and any response received to that request
- A copy of the agreement relating to the original pitch and the agreement relating to the alternative pitch; and
- The notification (if any) served by the occupier on the site owner specifying the occupier’s intention to make this application.

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 “National Assembly for Wales”.

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 “National Assembly for Wales” 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.

MH14

1. DETAILS OF SITE

Address of mobile home and site:	
----------------------------------	--

2. DETAILS OF APPLICANT

Name of occupier:	
-------------------	--

Address (including postcode):	
-------------------------------	--

Address for correspondence (if different):	
--	--

Telephone:

<i>Day:</i>

<i>Evening:</i>

<i>Mobile:</i>

Email address:

Name and address and details of agent/representative (if relevant)
--

Where details of an agent/representative have been given, all correspondence and communications will be with them until the Tribunal is notified that they are no longer acting for the applicant(s).

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 RESPONDENT

Name of site owner:	
---------------------	--

Address of site owner (including postcode):	
--	--

Address for correspondence (if different):	
--	--

Telephone:

<i>Day:</i>

<i>Evening:</i>

<i>Mobile:</i>

Email address:

5. ADDITIONAL INFORMATION

Please set out briefly why you believe that the Tribunal should make the determination requested:

--

6. 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 and either

All the parties agree or;

The Respondent has notified the Tribunal that he/she does not oppose the application.

Even if you agree to paper determination

The Tribunal may nonetheless 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.

7. 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:

Date: _____ Date: _____ Date: _____

Date: _____ Date: _____ Date: _____

8. 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.

9. 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:

CHECK LIST

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.

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 your completed application form and the required documents to:

Residential Property Tribunal
First Floor
West Wing
Southgate House
Wood Street
Cardiff
CF10 1EW