

**Paragraph 9 (1) of Part II to Schedule 3 to the Agricultural Holdings  
Act 1986**

**Application for Certificate that Tenant is not fulfilling his/her  
responsibilities to farm in accordance with the rules of Good  
Husbandry**

**This Application form is also available in Welsh. Please contact the Tribunal  
for a Welsh version of this form.**

## Section 1 – Information about the Applicant

Full Name	
Address (including Postcode)	
Telephone Number	
Email Address	

### Language Preference

The Agricultural Land 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 answering the following questions:

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)

## Section 2 – Information about the Respondent

Full Name	
Address (including Postcode)	
Telephone Number	
Email Address	

## Section 3 – Representative Details

Is there anyone who will be acting on your behalf?

Yes  No

If yes, please provide details below.

Full Name	
Address (including Postcode)	
Telephone Number	
Email Address	
Profession	

The Tribunal should deliver notices concerning the application to the above representative instead of to me.

## Section 4 – Reasons for Application

Details of the Holding to which the Application relates (please provide plan of scale 1/100 or larger together with details of Ordnance Survey numbers and acreages and description of any buildings).

The facts and matters on which I intend to rely are as follows:

I annex the following documents relevant to this Application (please annex all relevant documents).

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### Section 5 – Statement of Truth

**I believe (the Applicant believes) that the facts stated in this document are true.**

I am duly authorised by the Applicant to sign this statement

Full Name	
Name of Applicant's Solicitor/Agents firm, if applicable	
Date	
Signature	