

Agricultural Holdings Act 1986

Reply to Application for Consent to Operation of Notice to Quit

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

Section 1 – Information about You

| 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 Application Made

| Tribunal Number | ALT |
|--|-----|
| Name and Address of Applicant (including postcode) | |

Details of Holding (please provide name and address of Holding and additionally a plan of scale 1/10000 or larger together with details of Ordnance Survey numbers and description of any buildings

| I oppose the Application and rely upon the facts and matters set out below: | |
|---|--|
| | |
| | |

In addition to the land which is the subject of the Application, do you farm any other land?

Yes

No

If yes, please provide details:

Please annex any relevant documents on which you intend to rely.

My landlord is not acting fairly and reasonably because (please set out full details):

Section 3 – Statement of Truth

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

I am duly authorised by the Respondent to sign this statement

| Full Name | |
|--|--|
| | |
| Name of Respondent's Solicitor/Agents firm, if applicable | |
| | |
| Date | |
| Signature | |
| | |
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