

# Defence form – property located wholly in Wales (rented residential premises)

Name of court	Claim No.
Name of Claimant(s)	
Name of Defendant(s)	
Date of hearing	

## Personal details

1. Please give your:

Title  Mr  Mrs  Miss  Ms  Other

First name(s) in full

Last name

Date of birth

Address (if different from the address on the claim form)

Postcode

## Disputing the claim

2. Do you agree with what is said about the premises and the occupation contract/tenancy?  Yes  No

If No, set out your reasons below:

3. Did you receive the notice from the claimant referred to at paragraph 6 of the particulars of claim?  Yes  No

If Yes, when:

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**4.** Do you agree that there are arrears of rent as stated in the particulars of claim?  Yes  No

If No, state what you believe the arrears are: £ \_\_\_\_\_  None

**5.** If the particulars of claim give any reasons for possession other than rent arrears, do you agree with what is said?  Yes  No

If No, give details below:

**6.** Are there any other reasons why the court should not make a possession order?  Yes  No

If Yes, give details:

**7.** Do you agree with the landlord's claim to be registered?  Yes  No

**7a.** Do you agree with the landlord's claim to be licensed?  Yes  No

**8.** Has the landlord sent written terms of the occupation contract as required under the Renting Homes Wales Act 2016?  Yes  No

**9.** Do you have a money or other claim (a counterclaim) against your landlord?  Yes  No

If Yes, give details:

## Arrears

**10.** Have you paid any money to your landlord since the claim was issued?

Yes

No

If Yes, state how much you have paid and when:

£ \_\_\_\_\_ date \_\_\_\_\_

**11.** Have you come to any agreement with your landlord about repaying the arrears since the claim was issued?

Yes

No

I have agreed to pay £ \_\_\_\_\_ each (week)(month)

**12.** If you have not reached an agreement with your landlord, do you want the court to consider allowing you to pay the arrears by instalments?

Yes

No

**13.** How much can you afford to pay in addition to the current rent?

£ \_\_\_\_\_ per (week)(month)

## About yourself

### State benefits

14. Are you receiving Income Support?

Yes

No

15. Have you applied for Income Support?

Yes

No

If Yes, when did you apply?

\_\_\_\_\_

16. Are you receiving Housing Benefit?

Yes

No

If Yes, how much are you receiving?

£\_\_\_\_\_ per (week)(month)

17. Have you applied for Housing Benefit?

Yes

No

If Yes, when did you apply?

\_\_\_\_\_

18. Is the Housing Benefit paid

to you

to your landlord

### Dependants (people you look after financially)

19. Have you any dependant children?

Yes

No

If Yes, give the number in each age group below:

under 11    11-15    16-17    18 and over

### Other dependants

20. Give details of any other dependants for whom you are financially responsible:

### Other residents

21. Give details of any other people living at the premises for whom you are not financially responsible:

**22. Money you receive**

Weekly Monthly

Usual take-home pay or income if self-employed including overtime, commission, bonuses	£ _____	<input type="checkbox"/>	<input type="checkbox"/>
Job Seekers allowance	£ _____	<input type="checkbox"/>	<input type="checkbox"/>
Pension	£ _____	<input type="checkbox"/>	<input type="checkbox"/>
Child benefit	£ _____	<input type="checkbox"/>	<input type="checkbox"/>
Other benefits and allowances	£ _____	<input type="checkbox"/>	<input type="checkbox"/>
Others living in my home give me	£ _____	<input type="checkbox"/>	<input type="checkbox"/>
I am paid maintenance for myself (or children) of	£ _____	<input type="checkbox"/>	<input type="checkbox"/>
Other income	£ _____	<input type="checkbox"/>	<input type="checkbox"/>
<b>Total income</b>	£ _____	<input type="checkbox"/>	<input type="checkbox"/>

**Bank accounts and savings**

**23.** Do you have a current bank or building society account?  Yes  No

If Yes, is it

 in credit? If so, by how much? £ \_\_\_\_\_ overdrawn? If so, by how much? £ \_\_\_\_\_

**24.** Do you have a savings or deposit account?  Yes  No

If Yes, what is the balance? £ \_\_\_\_\_

**Money you pay out**

**25.** Do you have to pay any court orders or fines?

Court	Claim/Case number	Balance owing	Instalments paid
Total Instalments paid £			per month

**26.** Give details if you are in arrears with any of the court payments or fines:



### 30. Priority debts

This section is for **arrears** only. **Do not** include regular expenses listed at Question 29.

		Weekly	Monthly
Council tax arrears	£ _____	<input type="checkbox"/>	<input type="checkbox"/>
Water charges arrears	£ _____	<input type="checkbox"/>	<input type="checkbox"/>
Gas account	£ _____	<input type="checkbox"/>	<input type="checkbox"/>
Electricity account	£ _____	<input type="checkbox"/>	<input type="checkbox"/>
Maintenance arrears	£ _____	<input type="checkbox"/>	<input type="checkbox"/>
Others (give details below)			
	£ _____	<input type="checkbox"/>	<input type="checkbox"/>
	£ _____	<input type="checkbox"/>	<input type="checkbox"/>
	£ _____	<input type="checkbox"/>	<input type="checkbox"/>

- 31.** If an order for possession were to be made, would you have somewhere else to live?  Yes  No

If Yes, say when you would be able to move in: \_\_\_\_\_

- 32.** Give details of any events or circumstances which have led to your being in arrears of rent (for example divorce, separation, redundancy, bereavement, illness, bankruptcy) or any other particular circumstances affecting your case. If there are any reasons why the date any possession order takes effect should be delayed, give them here. If you believe you would suffer exceptional hardship by being ordered to leave the property immediately, say why.

**You need only answer question 33 if the claim form includes a claim for a prohibited conduct standard contract order.**

**33.** Do you agree with what is said about your conduct or use of the property?

Yes

No

If No, set out your reasons below:



## Statement of truth

I understand that proceedings for contempt of court may be brought against a person who makes, or causes to be made, a false statement in a document verified by a statement of truth without an honest belief in its truth.

**I believe** that the facts stated in this defence form are true.

**The defendant(s)** believes that the facts stated in this defence form are true. **I am authorised** by the defendant(s) to sign this statement.

### Signature

Defendant

Litigation friend (where defendant is a child or a protected party)

Defendant's legal representative (as defined by CPR 2.3(1))

### Date

Day

Month

Year

Full name

Name of legal representative's firm

If signing on behalf of firm or company give position or office held