THE HOUSING (RENT CONTROL) ACTS 1948 TO 1981

Reference of a contract of tenancy to the Isle of Man Rent and Rating Appeal Commissioners under Section 2(1) of the Housing (Rent Control) Act 1948

Person making the reference:

Full Name

Address

Telephone  Email

Tenant  Landlord  Department of Social Care

Tenant’s name and address: (if reference is made by Landlord)

Landlord’s name and address: (if reference is made by Tenant)

Particulars of contract of tenancy:

Written  (Please submit a copy with this form)  Verbal

Date of commencement

Property Details:

Address:

Description:

House  Furnished

Flat/Apartment  Unfurnished

Other*  

*If other, please give description
Period of Tenancy:

Fixed Term ☐ years from ________________________
☐ months from ________________________
☐ weeks from ________________________

Periodic
annual from ________________________
quartely from ________________________
monthly from ________________________
weekly from ________________________

Rent
£ per year
£ per quarter
£ per month
£ per week
£ other ________________________

Does the rent include the use of furniture and the provision of services, e.g. cleaning? ☐ Yes ☐ No

If No, please state what additional charge is made for the use of furniture and the provision of services:
£

Rateable Value**
£

**This can be obtained from:
Treasury Valuation Office, Illiam Dhone House, 1st Floor, 2 Circular Road, Douglas, IM1 1PH.
Telephone (01624) 685658

Reason for reference:
☐ Reduction of Rent
☐ Approval of Rent

Grounds for seeking reduction/approval of rent:

Please continue on a separate sheet if insufficient space above.

Signature ________________________ Date ________________________

When completed, please send or take this form to:
Clerk to Rent and Rating Appeal Commissioners, Tribunals Office, General Registry, Isle of Man Courts of Justice, Deemsters Walk, Bucks Road, Douglas, IM1 3AR
Telephone: (01624) 685023 Fax: (01624) 685573 Email: Tribunals@gov.im Website Information on Tribunals