

West of England Local Authorities
Application for a Mandatory House in Multiple Occupation (HMO)
Licence (Housing Act 2004 Part 2)

Please complete in black ink and block capitals

1	Section 1 of 17							
	APPLICATION DETAILS							
1.1	Type of application (please tick)	New licence		Renewal of licence		Unlicensed HMO		
	NB Planning permission may be required before using the property as an HMO							
	HMO To Be Licensed							
1.2	Address (including postcode)							

2	Section 2 of 17	
	APPLICANT DETAILS	
2.1	Full name	
2.2	E mail address	
2.3	Main telephone number	
2.4	Other telephone number	
2.5	Your address (including postcode)	
2.6	Date of birth	

3	Section 3 of 17
	PROPOSED LICENCE HOLDER
	<p>The licence holder will be legally responsible for the operation of the HMO or house to be licensed and must have the power to:</p> <ul style="list-style-type: none"> a) Let to and evict tenants b) Access all parts of the premises to the same extent as the owner (if different) c) Authorise any expenditure necessary to ensure the health and safety of the tenants and others <p>The proposed licence holder should normally be the “person having control” of the property (the person legally entitled to receive the rental income from the property), usually the owner of the property. However, there may be a good reason why this should not be the case (e.g. if the owner is ill or lives abroad). The “person having control” may be the leaseholder rather than freeholder. Where the landlord is a company, a limited liability partnership, or a board of trustees, the licence should be granted to it. The local authority has a duty to award the licence to the most appropriate person.</p>

3.1	If not the owner explain why you think the proposed licence holder should be the licence holder (e.g. the owner is ill or living abroad, or the proposed licence holder has a long lease on the property), including evidence that they have the necessary powers	
3.2	Are you the proposed licence holder or a proposed joint licence holder? Yes / No	If yes, go to 3.3 and then omit 3.4 to 3.10 If the proposed licence holder is a business or organisation, go to 4.1 (this does not apply to an individual or sole trader), if no for other reasons go to 3.3.
3.3	Your interest in the property	e.g. owner (freeholder), leaseholder, none.
	Details of proposed licence holder if applicant is not proposed licence holder.	
3.4	Interest in property	e.g. owner (freeholder), leaseholder, agent
3.5	Full name	
3.6	Address (including postcode)	
3.7	Email address	
3.8	Main telephone number	
3.9	Other telephone number	
3.10	Date of birth	
	If joint owners are the proposed licence holder, provide the following details for each owner whose details have not been provided above, continue on a separate sheet if necessary.	
3.11	Full name	
3.12	Address (including postcode)	
3.13	Email address	
3.14	Main telephone number	
3.15	Other telephone number	
3.16	Date of birth	

4	Section 4 of 17	
	PROPOSED LICENCE HOLDER – BUSINESSES AND ORGANISATIONS ONLY	
4.1	Legal status of the proposed licence holder: <input type="checkbox"/> Individual or sole trader <input type="checkbox"/> Company (Ltd or PLC) <input type="checkbox"/> Partnership <input type="checkbox"/> Charity or trust <input type="checkbox"/> Other	If individual or sole trader go to 5.1 If 'other', go to 4.2 Any other response go to 4.3
4.2	Provide details if other	
	Company, Partnership, Charity or Trust	
4.3	Business/organisation name	If registered, use the registered name
4.4	Charity no. (if appropriate)	
	If unincorporated business (operating under a trading name) provide the following details for each owner, continue on a separate sheet if needed	
4.5	Name	
4.6	Address	
4.7	Email address	
4.8	Main telephone number	
4.9	Other telephone number	
4.10	Name (2)	
4.11	Address	
4.12	Email address	
4.13	Main telephone number	
4.14	Other telephone number	

5	Section 5 of 17	
	LEGAL INTEREST	
5.1	Does anybody else have a legal interest in the property (e.g. as freeholder, leaseholder, mortgage provider)? Yes / No	If yes, provide the following details about each one If no, go to 6.1

5.2	Interest in the property		e.g. owner (freeholder), leaseholder, mortgage provider
5.3	Full name		
5.4	Organisation (if applicable)		
5.5	Mortgage acc no (if applicable)		
5.6	Address		If an organisation, give the registered office or other official address
5.7	Email address		
5.8	Main telephone number		
5.9	Other telephone number		
If necessary provide details of other persons on the continuation sheet (A) at the end of the application form.			

6	Section 6 of 17		
PROPOSED MANAGER			
6.1	Will the proposed licence holder(s) be the manager(s) of the HMO? Yes / No		If yes, go to 7.1 If no, go to 6.2
Provide details about the manager			
6.2	Full name		
6.3	Organisation (if applicable)		If an organisation, give the registered office or other official address
6.4	Address (including post code)		
6.5	Email address		
6.6	Main telephone number		
6.7	Other telephone number		
6.8	Date of birth		

7	Section 7 of 17		
DETAILS OF THE HMO			
7.1	Has the HMO been licensed before?		If yes, go to 7.2 If no, go to 7.3

7.2	Have structural alterations been carried out in the term of the previous licence that have altered the number of storeys of the HMO or any non-residential parts of the building	If yes, go to 7.3 If no, go to 8.1
7.3	Type of property <input type="checkbox"/> House in multiple occupation <input type="checkbox"/> Flat in multiple occupation <input type="checkbox"/> Other (give details)	Multiple occupation - occupants are not all part of the same family .
7.4	How many storeys does the HMO have?	State how many storeys are used in connection and integral with the HMO (includes basements, mezzanines and unused attic rooms)
7.5	Which levels are these storeys located on?	Give the levels the HMO is on eg basement, ground floor.
7.6	Are any parts of the building used for non - residential purposes? Yes / No	If yes, go to 7.7 If no, go to 7.8
7.7	Describe which part(s) and how they are used.	e.g. ground floor used for storage, shop, restaurant, office
7.8	When was the building originally built? <input type="checkbox"/> Before 1919 <input type="checkbox"/> 1919 - 1945 <input type="checkbox"/> 1946 - 1964 <input type="checkbox"/> 1965 - 1980 <input type="checkbox"/> After 1980	

8	Section 8 of 17	
	OCCUPATION OF THE HMO	
8.1	Has the HMO been licensed before? Yes / No	If yes, go to 8.2 If no, go to 8.3
8.2	Are you applying for the permitted number of the previous licence to remain the same? Yes / No	The permitted number is the number of households and individuals stated on the previous licence. If yes, go to 8.7 If no, go to 8.3

8.3	Give the number of households and occupants in the property	At the time of application	Proposed maximum	
8.4	Households			A household consists of family members / cohabiting couple. A group of 4 friends is 4 separate households
8.5	Occupants			Account for all occupants (where applicable include any children, the landlord and family)
8.6	Number of separate letting units in the property			Rooms or units let on separate tenancy contracts or to separate households
Catering arrangements				
8.7	Is board provided	Yes / No		If yes, go to 8.8 If no, go to 9.1
8.8	How many meals per person per day are provided?			

9	Section 9 of 17			
	ACCOMMODATION DETAILS			
	Provide the number of			
9.1	Habitable rooms			Bedrooms, living rooms, dining rooms - exclude kitchens
9.2	Kitchens			Include kitchen-dining rooms and kitchens in bedsits
9.3	Sinks			Exclude wash hand basins
9.4	Shower/bathrooms			
9.5	Toilets in shower/bathrooms with wash hand basins			
9.6	Separate toilets with wash hand basins			Exclude external toilets
9.7	Has the HMO been licensed before? Yes / No			If yes, go to 9.8 If no, complete the facilities table (B) at the end of the application form and go to 10.1.
9.8	Is the layout the same as indicated in schedule 2 of the most recent licence? Yes / No			If yes, go to 10.1 If no, complete the facilities table (B) at the end of the application form and go to 10.1.

10	Section 10 of 17	
	GAS AND FURNITURE	
10.1	Does the property have a gas supply? Yes / No	If yes, go to 10.2 If no, go to 10.4
10.2	Do all provided gas appliances meet all safety requirements? Yes / No	The licence will be refused if the answer is 'no'.
10.3	Gas safety certificates are included with the application as evidence. Yes / No / Previously provided within the last 12 months	Gas safety certificates must be provided on annual basis to the local authority. It is not a requirement to include these with the application.
10.4	Does all furniture provided meet all safety requirements? Yes / No	See The Furniture and Furnishings (Fire) (Safety) Regulations 1988 (as amended), The licence will be refused if the answer is 'no'.

11	Section 11 of 17	
	FIRE PRECAUTIONS	
11.1	Has the HMO been licensed before? Yes / No	If yes, go to 11.2 If no, go to 11.3
11.2	Do the fire precautions meet the licensing standard? Yes / No	If yes, go to 12.1 If no, go to 11.3
11.3	Are smoke and/or heat alarms (or detectors) provided in the property? Yes / No	
11.4	Type of alarms or detectors <input type="checkbox"/> Battery operated only <input type="checkbox"/> Mains electricity – standalone <input type="checkbox"/> Mains electricity – interlinked <input type="checkbox"/> Mains electricity – panel controlled	
11.5	Give the location of each smoke and heat detector e.g. ground floor hall, first floor kitchen	

Other fire equipment and precautions	
11.6	<p>Is the following equipment provided in the property?</p> <input type="checkbox"/> Fire blankets in each shared kitchen <input type="checkbox"/> Emergency lighting <input type="checkbox"/> Fire door to each shared kitchen <input type="checkbox"/> Fire doors to other rooms. Please state which rooms: <input type="checkbox"/> None of the above
11.7	<p>Is there a clear fire escape route(s) from the property? Yes / No</p>
11.8	<p>Has fire safety information or training been provided to the occupiers of the property? Yes / No</p>

12 Section 12 of 17	
MANAGEMENT ARRANGEMENTS	
12.1	<p>Are occupants given a tenancy agreement (or other written statement of terms of occupancy)? Yes / No</p> <p>This is a mandatory licence condition.</p>
12.2	<p>Will the West of England's Code of Good Management Practice be followed at all times? Yes / No</p> <p>See notes that accompany the application form. Any person involved in the management of the HMO could lose their 'fit and proper person' status if the Code is not followed.</p>
12.3	<p>If no local manager is appointed, what arrangements are in place to deal with emergencies?</p> <p>Local is within 25 miles of the property.</p>

12.4	If no local manager is appointed, what arrangements are in place to manage the HMO whilst the licence holder is not available eg when on holiday?	Local is within 25 miles of the property.
12.5	Provide a telephone no. in case of emergencies.	
12.6	Will regular inspections (at least quarterly) be carried out to check occupation in accordance with licence conditions and to assess the need for maintenance? Yes / No	The licence will be refused if the answer is 'no'.
12.7	If a manager has been appointed, are there sufficient funds for all their management obligations to be met? Yes / No	The licence will be refused if the answer is 'no'.

13	Section 13 of 17	
	FIT AND PROPER PERSON TEST	
13.1	Is the proposed licence holder a company, partnership, charity or trust? Yes / No	If yes, go to 13.2 If no, go to 13.3
13.2	A 'fit and proper person' declaration signed by the company secretary or other responsible person is included on behalf of the company, partnership, charity or trust. Yes	A declaration must be provided, go to 13.5. The fit and proper person declaration is at the end of application form (C)
13.3	A 'fit and proper person' declaration for each licence holder is included with this application. Yes	If more than one person is proposed to be the licence holder each person must submit a declaration. This includes joint owners. A declaration must be provided, go to 13.4.

13.4	List the names and addresses of any other persons other than the manager in section 6 who are involved with the management of the property or who are key holders.	
13.5	<p>A 'fit and proper person' declaration is included for the manager and all other persons named in 13.4</p> <p>Yes / Not applicable</p>	<p>Manager is as stated in Section 6. Where the manager is a company or partnership, the company secretary or other responsible person on behalf of the company or partnership should sign the declaration.</p> <p>A declaration must be provided if there is a manager who is not also the licence holder, go to 14.1</p> <p>'Not applicable' is where the licence holder is also the manager.</p>

14 Section 14 of 17		
OTHER PROPERTIES LICENSABLE UNDER THE HOUSING ACT 2004		
14.1	<p>Is the proposed licence holder a licence holder for other properties which require a licence under the Housing Act 2004?</p> <p>Yes / No</p>	<p>If yes, go to 14.2</p> <p>If no, go to 15.1</p>
14.2	Address(es)	

15 Section 15 of 17		
NOTIFYING PEOPLE ABOUT THE LICENCE APPLICATION		
<p>You must let certain people know in writing that you have made this application or give them a copy of it.</p> <p>The people who need to know about it are:</p> <ul style="list-style-type: none"> Any owner of the property to which the application relates (if that is not you) i.e. the freeholder and any head lessors who are known to you Any mortgage provider for the property to be licensed Any other person who is a tenant or long leaseholder of the property or any part of it (including any flat) who is known to you. This is other than a statutory tenant or other tenant whose lease or tenancy is for less than three years (including a periodic tenancy) The proposed licence holder (if that is not you) The proposed managing agent (if any) (if that is not you) Any person who has agreed that he will be bound by any conditions in a licence if it is granted 		

<p>You must tell each of these people (or organisations):</p> <p>Your name, address, telephone number and email address or fax number (if any)</p> <p>The name, address, telephone number and email address or fax number (if any) of the proposed licence holder (if it will not be you)</p> <p>That this is an application for an HMO licence under Part 2 of the Housing Act 2004</p> <p>The address of the property to which the application relates</p> <p>The name and address of the local housing authority to which the application will be made</p> <p>The date the application will be submitted</p>			
<p>Provide details of notifying these people about the licence application</p>			
15.1	Name of person / organisation notified	Interest	Date of notification
16	Section 16 of 17		
ADDITIONAL DETAILS			
16.1	<p>Please provide any additional information which is required or relevant to your application (check for local guidance notes and conditions which may provide details of specific requirements in your area)</p>		

17	Section 17 of 17	
	DECLARATION	
	<p>I declare that the information contained in this application is correct to the best of my/our knowledge. I understand that I commit an offence if I supply any information to a local housing authority in connection with any of their functions under any of Parts 1 to 4 of the Housing Act 2004 that is false or misleading and which I know is false or misleading or am/are reckless as to whether it is false or misleading.</p> <p>I declare that I have served a notice of the application on the people listed in Section 17 above and that these are the only people known to me/us that are required to be informed that I have made this application.</p>	
17.1	Full name (applicant)	
17.2	Signature	
17.3	Date	
17.4	Full name (proposed licence holder if different)	
17.5	Signature	
17.6	Date	
17.7	Other joint applicants to sign, print name and date:	

A. LEGAL INTEREST - CONTINUATION SHEET	
Interest in the property	
Full name	
Organisation (if applicable)	
Mortgage acc no (if applicable)	
Address	
Email address	
Main telephone number	
Other telephone number	

Interest in the property	
Full name	
Organisation (if applicable)	
Mortgage acc no (if applicable)	
Address	
Email address	
Main telephone number	
Other telephone number	

Interest in the property	
Full name	
Organisation (if applicable)	
Mortgage acc no (if applicable)	
Address	
Email address	
Main telephone number	
Other telephone number	

C. Declaration in respect of a fit and proper person - see Section 13 (a separate declaration will be needed for each person)

Full name	
Address	

1 In connection with the application for an HMO licence in respect of (address)

Date of application	
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I hereby declare that I am (delete as appropriate):
 (i) the proposed licence holder
 (ii) the manager of the property (if different to (i) above)
 (iii) someone who is otherwise engaged in the management of the property
 (iv) key holder
 (v) other person, please specify:

2 In support of the above declaration I confirm that I :-

- i. do not have any unspent convictions particularly in respect of any offence involving fraud or other dishonesty, or violence or drugs, or any offence listed in Schedule 3 to the Sexual Offences Act 2003 (offences attracting notification requirements);
- ii. have not been found guilty by any court or tribunal of practising unlawful discrimination on grounds of sex, colour, race ethnic or national origins or disability in, or in connection with, the carrying on of any business;
- iii. have not had any judgements (whether civil or criminal) against me under housing, environmental health, public health or landlord and tenant law;
- iv. have not acted otherwise than in accordance with any applicable code of practice approved under section 233 of the Housing Act 2004.

And to the best of my knowledge (i) to (iv) above do not apply to anyone who is associated with me whether on a personal, work or other basis (includes husband, wife, colleague, business partner and employees).

3	<p>Also please indicate and give details if you have:</p> <ul style="list-style-type: none"> i. Been in control of any property subject to a Control Order under S379 of the Housing Act 1985 or Demolition Order in the last 5 years; ii. Been in control of a property that has been subject to the service of an Improvement Notice, a Prohibition Order, a Hazard Awareness Notice, or Emergency Remedial Action under the Housing Act 2004; iii. Been refused a licence or had a licence revoked for any property in relation to an HMO under the Housing Act 2004 (includes additional and selective licensing schemes); iv. Been found to have breached a condition of a licence for an HMO under the Housing Act 2004 (includes additional and selective licensing schemes); v. Been in control of any property, which has subsequently been the subject the subject of an Interim or Final Management Order or Special Interim Management Order under the Housing Act 2004. <p>Provide details:</p>
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4	<p>Have you ever been refused fit and proper status by a local authority?</p> <p>Yes/No</p>	<p>If yes, state which local authority and date:</p>
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I accept that in connection with the checking of the accuracy of this declaration that the local authority will share this information with other statutory bodies, particularly other local authorities and the Police.

Please note that it is a criminal offence to knowingly supply information which is false or misleading for the purposes of obtaining a licence. Evidence of any statements made in this application with regard to the property concerned may be required at a later date. If we subsequently discover something which is relevant and which you have not disclosed, or which has been incorrectly stated or described, your licence may be revoked or other action taken.

Signed:

Name:

Date:

If you are unable to sign the above declaration you should give brief details here: