

HMO Licence Application Form

Buildings Converted entirely into Self Contained Flats Housing Act 2004, Part 2

Please use the accompanying notes when completing this form.

You are required to complete a separate application form for each property which requires licensing. Failure to apply for a Licence for a property which is subject to licensing is a criminal offence and may result in legal action being taken and upon conviction could be fined up to £20,000.

Please fill in the form using **BLOCK CAPITALS** and **black ink**.

If you require more space to answer any question, please use additional sheets, specifying which question your answer relates to, and attach the sheets to the application form.

Type of application: **NEW** or **RENEWAL**

Address of property to be licensed

	Postcode
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Is the applicant the proposed licence holder? Yes No

If **yes**, please go straight to Part 2 of the form. If **no**, please complete Part 1 of the form.

PART 1. APPLICANT DETAILS - See note 1 (if a Company, please provide full company name and registered number)

Surname <input style="width: 95%;" type="text"/>	First Name <input style="width: 95%;" type="text"/>
Address <input style="width: 99%;" type="text"/>	
Telephone Number Home <input style="width: 95%;" type="text"/>	Work <input style="width: 95%;" type="text"/>
Mobile <input style="width: 95%;" type="text"/>	Fax <input style="width: 95%;" type="text"/>
E-mail Address <input style="width: 95%;" type="text"/>	Date of Birth <input style="width: 95%;" type="text"/>

What is your relationship to the proposed licence holder? *(please tick appropriate box)*

Friend Relative Agent Solicitor Other *(please specify)*

What is your interest in the property?

<i>For Office Use only</i> <input style="width: 95%; height: 20px;" type="text"/>
<i>Date Received</i> <input style="width: 95%; height: 20px;" type="text"/>
<i>Fees received</i> <input style="width: 95%; height: 20px;" type="text"/>
<i>Date Passed to Officer</i> <input style="width: 95%; height: 20px;" type="text"/>

PART 2. PROPOSED LICENCE HOLDER DETAILS - See note 2

2.1 Is the applicants' business registered in the UK with Companies House? Yes NO

2.2 Is the applicants' business registered outside the UK with Companies House? Yes NO

2.3 Name of the proposed licence holder (please tick the appropriate box)

Name of proposed licence holder (if a company, please give full company name)

Address (if company please give number and registered office address)

Postcode

Telephone numbers: Home

Mobile

Work

Fax number

E-mail address

Date of birth

Name of company secretary (if applicable)

Name of directors/partners/trustees: (if applicable)

Postcode

2.4 The proposed licence holder must confirm that he has the following powers necessary to manage the property including:

To grant and terminate tenancies Yes

Access to all parts of the premises Yes

Authorise any necessary expenditure Yes

2.5 Explain why you think the proposed licence holder should be the licence holder? (e.g the proposed licence holder is the owner, 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.

PART 3. MANAGER DETAILS – See note 3

3.1 Has an agent or individual been employed to manage the property?

No *go to 3.2* **Yes** *go to 3.3*

3.2 If No Please provide the name, address and telephone of the person who is responsible for the management of the property.

Name

Telephone Number

Address

<input type="text"/>	Postcode
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3.3 If Yes

Individual Company Partnership Trustee Charity Other *(please specify)*

Name of manager (if a company, please give full company name)

Address (if company please give registered office address)

<input type="text"/>	Postcode
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Telephone numbers: Home

Work

Mobile

Fax number

E-mail address

Date of birth

3.4 Is the manager a member of a regulatory body? Yes No

If **yes**, please state which regulatory body

PART 4. OWNERSHIP AND CONTROL OF THE PROPERTY TO BE LICENSED - See note 4

4.1 Please provide the details of ownership and all others with a legal interest in the property. If you require more space, please continue on a separate sheet.

Surname of Freeholder 1

(Company name and number if registered)

Forename(s)

Address of Freeholder 1 **(Registered office for companies)**

Postcode

E-mail address

Telephone No.

Surname of Freeholder 2

(Company name and number if registered)

Forename(s)

Address of Freeholder 2 **(Registered office for companies)**

Postcode

E-mail address

Telephone No.

4.2 Name and address of Mortgagee **(if applicable or if none, state none)**.
e.g. bank, building society or other who has a loan secured against the property.

Postcode

4.3 Name of leaseholder(s) **(if none, state none)**. Please continue on an additional sheet if necessary

Surname of leaseholder 1

(Company name if registered)

Forename(s)

Address of leaseholder 1 **(Registered office for companies)**

Postcode

E-mail address

Telephone No.

4.4 Name of person who collects the rent

Surname

Forename(s)

Address of person who collects the rent

Postcode

E-mail address

Telephone No.

4.5 Name of person who receives the rent

Surname

Forename(s)

Address

Postcode

E-mail address

Telephone No.

4.6 Name of any other person who may be bound by a condition of the proposed licence and not referred to in parts 1,2 and 3 of the form. (if none, state none).

Surname

Forename(s)

Address

Postcode

E-mail address

Telephone No.

PART 5. PLAN OF PROPERTY

5.1 Please provide a sketch plan of your property on a separate sheet of paper. Please use the key provided in the sample plan to show the following details:

- Every habitable room on every floor of the house (i.e. living room, dining room, kitchen and bedroom).

- Location of carbon monoxide detector
- Location of Fire alarms

PART 6. PROPERTY INFORMATION - See note 6

6.1 Please provide the type of property being licensed (please tick appropriate box)

Type	
House in single occupation	
Flat in single occupation	
A house converted into and comprising only of self-contained flats	
A purpose built block of flats	
Other (please specify)	

6.2 When was the property built (please tick appropriate box)

Pre 1919
 1919 to 1945
 1945 to 1964
 1965 to 1980
 Post 1980

6.3 Description of the property (please tick appropriate box)

Detached
 Semi-detached
 Terraced
 End of terrace
 Purpose built block of flats

 Mixed residential & Commercial
 House converted into self-contained units

Other (please specify)

6.4 Was the property to be licensed

Purpose built with its present design
 Converted from a previous residential dwelling Date of conversion
 Converted from a non-residential structure

 Do you have documents which give evidence of planning and/or building regulation approval of the conversion? Yes No

6.5 Please tick all the floors the property has:

Floor	Residential	Commercial
Basement		
Ground		
First		
Second		
Third		
Fourth		
Fifth		
Six and Over		

PART 7. FIRE SAFETY – See note 7

Has a fire risk assessment of the property been undertaken? Yes No

7.1 Have you fitted any of the following (**tick appropriate**)

Type of alarm/detector	Smoke	Heat	Carbon Monoxide	Location
Battery				
Mains electricity - standalone				
Mains electricity - interlinked				
Mains electricity - panel controlled				

7.2 Provide details of any fire precaution equipment (e.g. fire blanket), safety information including fire escape routes and any training provided to the occupiers of the property.

PART 8. AMENITIES – See note 8

8.1 Please specify which lettings detailed in Part 5 have exclusive use of a bath and /or shower

8.2 How many shared baths and/or showers are there in the property?

Baths

Showers

8.3 Please specify which lettings detailed in Part 5 have exclusive use of a WC?

8.4 How many shared WC's in the property ?

8.5 How many shared WC's are in a separate compartment to the bathroom?

8.6 Please specify which lettings detailed in Part 5 have exclusive use of a wash hand basin

8.7 How many shared wash hand basins are there in the property?

8.8 What kitchen facilities are provided in the house? (Please tick appropriate boxes)

Shared kitchen Mixture of exclusive/shared kitchens Exclusive use of kitchen

8.9 How many sets of shared kitchen facilities are provided in the house?

8.10 Please specify which lettings detailed in Part 5 have exclusive use of kitchen facilities

8.11 How many sinks are in the property?

8.12 Do all the bathrooms and kitchens have a means of natural or mechanical ventilation?

Bathrooms: Yes No Mixture Kitchens: Yes No Mixture

PART 9. PROPERTY MANAGEMENT- See note 9

9.1 Is there, displayed in a suitable position within the property, a notice giving the name and

telephone number of the manager? Yes No

9.2 How many gas appliances are there in the property?

9.3 Please specify how your property is heated?

Gas central heating

Electrical central heating/night storage heaters

Fixed gas heaters/fires

Solid fuel fires

Other (please specify)

9.4 Please specify which room(s) are not heated (this includes bathrooms, toilets and common parts)

9.5 Is there a maintenance programme in place? Yes No

9.6 Is there a cleaning programme in place? Yes No

9.7 Energy Efficiency

Are the windows double glazed

All

Some

None

Is the roof space insulated

All

Some

None

N/A

Are cavity walls insulated

All

Some

None

N/A

Are hot water tanks lagged

All

Some

None

N/A

Is there an Energy Performance Certificate for the property?

Yes

No

PART 10. TENANCY MANAGEMENT - See note 10

10.1 Are any of your tenants 'regulated tenants'.

Yes

No

10.2 Are occupants given a tenancy agreement (or other written statement of terms of occupancy). If YES please submit copies of tenancy agreement/terms of occupancy with your application.

Yes

No

10.3 Does the written statement of terms include any clauses relating to anti-social behaviour?

Yes No, please see Application Notes.

10.4 Does the written statement of terms include guidelines on procedures for occupants to report necessary repairs and make complaints about the property? Yes No

10.5 Are rent books provided? Yes No

10.6 If rents books are not provided are occupants given receipts/rents statements? Yes No

10.7 Are the occupants given an emergency 24 hour contact telephone number in relation to the property? Yes No

If yes, please provide the number

10.8 Is a deposit required at the start of the tenancy? Yes No

10.9 Are the terms of the tenancy deposit clearly set out in writing? Yes No

10.10 Is the proposed license holder or manager a member of any government authorised scheme that protects tenants' deposits? Yes No

PART 11. OCCUPIER INFORMATION - See note 11

11.1 Please include all occupiers, including children and babies.

Details about the applicants at the time of the application

Adults Children People in landlords household

Which part of the property does the landlord's household occupy (if applicable)

11.2 Please ensure that the details you provide are for all the occupants in the property.

Line number	Name of Occupiers	Age	Description (e.g, living room, bedroom)	Type of tenancy (e.g. Statutory Assured Shorthold)
1				
2				

3				
4				
5				
6				
7				
8				

PART 12. RELEVANT INFORMATION – SEE NOTE 12

12.1 Subject to the provisions of the Rehabilitation of Offenders Act 1974, please state the particulars of any relevant issues (see below) recorded against any person named in Parts 1, 2, 3 and/or 4 or any person associated or formerly associated on a personal or work basis with those named in Parts 1,2,3 and or 4. (Continue on a seperate sheet if necessary).

12.2 If not applicable please write '**NONE**', **DO NOT LEAVE BLANK.**

NAME	DATE	COURT	OFFENCE	SENTENCE

Relevant issues include:

- i. Criminal offences involving: Fraud, Dishonesty, Violence, Drugs, Schedule 3 of the Sexual Offences Act 2003
- ii. Practiced unlawful discrimination on grounds of sex, colour, race ethnic or national origins or disability in connection with a business.
- iii. Contravened any provision of housing and/or landlord and tenant law. These include but are not limited to:
 - a. A Control Order under the Housing Act 1985
 - b. Proceedings by a local authority
 - c. The local authority carrying out Works in Default
 - d. A Management Order under the Housing Act 2004
 - e. Harassment or illegal eviction
 - v. Contravened any Approved Code of Practice (AcoP)
- iv. Any Enforcement actions as described below:
 - i. improvement notice under section 11;
 - ii. prohibition order under section 20;
 - iii. hazard awareness notice under section 28;
 - iv. emergency remedial action under section 40;
 - v. emergency prohibition order under section 43;
 - vi. demolition order under subsection (1) or (2) of section 265 of the Housing Act 1985 (c. 68);
 - vii. declaring the area in which the premises concerned are situated to be a clearance area by virtue of section 289(2) of that Act.

Any criminal offence or subject to any other proceedings brought by a local authority or other Regulatory Body (for example breaches of the Environmental Protection Act 1990, planning control or compulsory purchase proceedings or fire safety requirement(s)?)

12.3. Has any person named in Parts 1,2,3 and/or 4 of this form previously held or do they currently hold any licence, e.g. House in Multiple Occupation or Selective Licence?

Yes No

If **yes**, please provide the addresses of these properties and details of the Authorities that issued the license. (Use a separate sheet of paper if necessary)

Postcode

Postcode

12.4 Has any person named in Parts 1,2,3 and/or 4 of this form ever applied for and been refused any licence, e.g. a House in Multiple Occupation?

Yes No

If **yes**, which Authority refused the licence?

When was it refused?

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12.5 Has any person named in Parts 1,2,3 and/or 4 of this form ever breached any condition of a license issued under Parts 2 and 3?

Yes No

If **yes**, please provide details of the licence condition(s) breached and the local Authority in which they were breached.

12.6 Has any person named in Parts 1, 2, 3 and/or 4 of this form ever been subject of an interim or final management order?

Yes No

If **yes**, please provide details.

PART 13. ADDITIONAL INFORMATION – See Note 13

13.1 Is the proposed licence holder a member of any landlords' association or other professional body?

Yes No

If **yes**, please indicate which

13.2 Please list in the space below any training courses undertaken or conferences attended by the proposed licence holder/manager, in the last three years, which support this application.

PART 14. DECLARATION – See note 14

As the applicant, you must let certain persons know in writing that you have made this application or give them a copy of it.

The persons who need to know about it are:

- Any mortgagee of the property to be licensed;
- 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 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 other than a statutory tenant or other 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.

You must tell each of these persons:

- Your name, address, telephone number and email address or fax number (if any);
- The name, address, telephone number and email address or fax number (if any) of the proposed licence holder (if it will not be you);
- Whether this application is for a house licence under Part 3 of the Housing Act 2004;
- The address of the property to which the application relates;
- The name and address of the local housing authority to which the application will be made;
- The date the application has been submitted.

Name	Address	Date of service	Description of the persons interest in the property or application

Note to applicants: It is a criminal offence to knowingly supply information which is false or misleadingly for the purposes of obtaining a licence. Evidence of any statements made in this application with regard to this property maybe required at a later date.

We may approach other authorities, such as the Police, Fire and Rescue Service, Office of Fair Trading etc. and tenants for additional information and verification. Signing of this application will be taken as your agreement to any such action.

If we subsequently discover something which is relevant and which you should have disclosed, or which has been incorrectly stated or described, your licence may be cancelled or further action taken.

I/we declare that the information contained in this application is correct to the best of my/our knowledge. I/we understand that I/we commit an offence if I/we 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/we know is false or misleading or am/are reckless as to whether it is false or misleading.

I/we declare that I/we have served a notice of this application on the following persons who are the only persons known to me/us that are required to be informed that I/we have made this application.

I/we declare that Gas Installations and Appliances are maintained in safe condition and good working order and receive a gas safety check annually in order to satisfy the provisions of the Gas Safety (Installation and Use) Regulations 1998.

I/we declare that any upholster furniture provided in the house comply with the Furniture and Furnishing (Fire Safety) Regulations 1988 (as amended in 1989 and 1993).

I/we declare that any electrical equipment/ appliances provide by me/us made available are in a good working order and in a safe condition.

I/we declare that smoke alarms and carbon monoxide alarms/detectors are in a proper working order and that the alarms in my property had been checked/ tested at the start of the each tenancy.

Name of applicant	<input type="text"/>	Signature
Date	<input type="text"/>	
Name of proposed licence holder (If different to applicant)	<input type="text"/>	Signature
Date	<input type="text"/>	
Name of manager (If different to applicant)	<input type="text"/>	Signature
Date	<input type="text"/>	
Name (If different to applicant)	<input type="text"/>	Signature
Date	<input type="text"/>	

The sketch plan of your property should include the following:

- Every room in the property, i.e. living room, dining room, bedrooms etc.

- All the facilities and amenities in the property, i.e. bathrooms, shower rooms, toilets, wash hand basins and sinks etc.

The Council may require you to submit, or you may wish to submit other documents to support your application.

The attached conditions which are listed as Mandatory will be applied to all licences regardless. The discretionary conditions to ensure the scheme are sustainable and achieves its objectives. Please state clearly with reason if you consider any of the discretionary conditions are not applicable, or others which should be included. Your comments will be taken into account when the scheme is reviewed.

Checklist for submitting an application form

The council may require you to submit, or you may wish to submit, other documents, for example, copies of planning permissions, building regulations approvals, licence agreements, certified accounts (or summaries), recent portable electrical equipment tests in support of your application.

- Sketch plan for the property detailing the layout and position of each room (minimum A4 size)
- Certificate from a Gas Safe Registered approved gas engineer
- Tenancy agreements from all tenants in the property
- Cheque made payable to Harrow Council/or payment online
- Fire Safety Risk Assessment
- Anti-Social Behaviour Action Plan
- Current Installation Inspection and Test Certificate (Electrical Safety)

Please send completed application form, payment and copies of any necessary documentation to:

Harrow Council
 Community Safety
 Residential Licensing Team
 Public Protection
 Civic Centre, PO Box 18, Station Road
 Harrow, Middlesex HA1 2UT or scan and e-mail at
 Residential.licensing@harrow.gov.uk