

Application to Renew a licence for a House in Multiple Occupation (HMO)

You can only use this form if there has been no material change to the original licence. Therefore, there can be no changes to the applicant, proposed licence holder or manager, the internal layout, number of amenities and the number of occupants must be the same.

If there is a material change to the original licence you will need to complete a standard application form.

Please fill in the form using BLOCK CAPITALS and black ink and use the attached guidance to help you.

For office use only 240380078 Date stamp

Fee calculation

Reference number

ass the attached galachies to help year					
Address of property to be licensed					
		Postcode			
Date that current licence expires:					
Is the applicant the proposed licence holder? See note 1					
Yes – please go straight to Part 2 No – pl	ease comp	lete Part 1			
PART 1 – Applicant details – see note 1					
First name(s)					
Family name					
Address					
		Postcode			
Contact numbers Home	Work				
Mobile	Fax				
Email address Date of birth					
What is your relationship to the proposed licence holder? (please tick the appropriate box)					
Relative Solicitor Other (please specify)					
What is your interest in the property?					

PART 2 – Proposed licence holder details – see note 2 Is the proposed licence holder (please tick the appropriate box) Partnership Individual Company Trustee Charity Other (please specify) Full name of proposed licence holder (if a company, please give full company name) Address (if a company, please give registered office address) Postcode Contact numbers Home Work Mobile Fax Date of birth Email address Name of company secretary, if applicable Names of directors/partners/trustees, if applicable PART 3 - Manager details - see note 3 Has an agent or individual been employed to manage the property? Yes – please go to 3.2 No – please go to 3.1 3.1 If no, please provide the name, address and telephone number of the person who is responsible for the management of the property Name Telephone number Address Postcode **3.2** If **yes**, is the manager (please tick appropriate box) Individual Company Partnership Trustee Other (please specify)

PART 3 – Manager details (continued) – see note 3 Full name of manager (if a company, please give full company name)				
Turriame or manager (ii a cor	Therity, produce give run company mame)			
Address (if a company, please	e give registered office address)			
	Postcode			
Contact numbers Home Work				
Mobile	Fax			
Email address	Date of birth			
Is the manager a member of a	regulatory body?			
Yes – please state which	regulatory body			
No				
PART 4 – Ownership details	of property to be licensed – see note 4			
	ownership and all others with a legal interest in the property to be licensed. ase continue on a separate sheet.			
4.1 Name of freeholder	(s)			
Full name of freeholder 1				
Address of freeholder 1				
	Postcode			
Email	Telephone			
Full name of freeholder 2				
Address of freeholder 2				
	Postcode			
Email	Telephone			

Name of mortgagee (if none, state none)e.g. bank, building society or other who has a loan secured against the property		
Referer	nce or roll number	
Address	s of mortgagee	
	Postcode	
4.3	Name of leaseholder(s) (if none, state none). Please continue on a separate sheet, if necessary.	
Full nar	me of leaseholder 1	
Address	s of leaseholder 1	
	Postcode	
Email	Telephone	
Full nar	me of leaseholder 2	
Address	s of leaseholder 2	
	Postcode	
Email	Telephone	
4.4	Address of person who collects the rent	
	Postcode	
Email	Telephone	
4.5	Full name of person who receives the rent	

Address	of person who receives the rent			
	Postcode			
Email	Telephone			
4.6	Full name of any other person who may be bound by a condition of the proposed licence and who is not referred to in Parts 1, 2 or 3.			
Address				
	Postcode			
Email	Telephone			
PART 5	- Occupier information - see note 5			
Please I	nclude all occupiers, including children and babies occupying the lettings.			
5.1	How many individuals currently live in the property?			
5.2	How many households currently live in the property?			
5.3	How many separate lettings are available in the property?			
5.4	How many people are you applying to licence the property for?			
5.5	Are any of the people listed in Parts 1, 2, 3 or 4 of the form living in the property?			
Yes	s – please state their names			
No				

5.6 Please give details of all habitable rooms in the property and occupants names

ROOM TYPE (bedroom, kitchen, living room)	ROOM LOCATION (ground floor front)	OCCUPANTS NAME(S)

PART 6 - Relevant information - see note 6

6.1	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 separate sheet if necessary).					
Name	Э	Date	Court	Offence	Sentence	
	ant issues in	clude:				
ii) iii)	Criminal offences involving: fraud, dishonesty, violence, drugs, schedule 3 of the Sexual Offences Act 2003. Practised unlawful discrimination on the grounds of sex, colour, race, ethnic or national origins or disability in connection with a business. Contravened any provision of housing and/or landlord and tenant law.					
Has any person named in Parts 1, 2, 3 and/or 4 of this form previously held or do they currently hold a licence for another house in multiple occupation? If yes , please provide the addresses of these properties, along with details of the authorities that issued the licences						
6.3	ever app	•	Parts 1, 2, 3 and/or refused a licence fo		Yes No	

	If yes, which authority refused the licence	When was it refused?
6.4	Has any person named in Parts 1, 2, 3 and/or 4 of this form ever breached any condition of a licence issued under Parts 2 or 3 of the Housing Act 2004?	Yes No
	If yes , please provide details of the licence conditions breached and which they were breached	the local authority in
ART	7 – Additional information – see note 7	
7.1	Is the proposed licence holder a member of any landlords association or other professional body?	Yes No
	If yes , please state which	
7.2	Please list any training courses undertaken, and/or conferences or form	orums attended by the
	proposed licence holder/manager, in the last three years, which sup	
7.3	Is there details of the name, address and telephone number of the N suitable position within the property?	Manager displayed in a
ART	8 – Further information – see note 8	
	use this space if you need more room for any of your answers or for arnk may be relevant to the application.	ny additional information

PART 9 - Declaration - see note 9

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

The people 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 any part of the property (including any flat) who is known to you, 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 to be bound by any conditions in a licence if it is granted.

You must tell each of these people:

- Your name, address, telephone number, email address and fax number (if any);
- The name, address, telephone number, email address and fax number (if any) of the proposed licence holder (if it will not be you);
- That this is an application for an HMO licence under Part 2 of the Housing Act 2004;
- The address of the property to which the application relates;
- The name and address of the local housing authority (Rushmoor Borough Council, Council Offices, Farnborough Road, Farnborough, GU14 7JU) to which the application will be made;
- The date the application will be submitted.

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.

Name	Address	Date	Description of the person's interest in the property or application

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 persons detailed in section 14 of this application, who are the only persons known to me/us that are required to be informed that I/we have made this declaration.

The following additional declarations also apply if (and only if) you have indicated in section 2 of this application that this is a renewal application:

I/We declare that the house in respect of which a licence is sought under Part 2/Part 3 of the Housing Act 2004 is subject to a licence under that part at the time this application is made. I/We further declare that to the best of my/our knowledge either: (a) none of the information described in paragraph 2(c) to (g) of that Act and previously submitted to the authority has materially changed since that licence was granted; OR (b) the only material changes to that information are described in the preceding sections of this application.

Na	me of applicant			Signature		
		Date				
	me of proposed			Signature		
`	different to plicant)	Date				
	,,					
Na	me of manager			Signature		
		Date				
Na	ıme			Signature		
		Date				
Na	ıme			Signature		
		Date				
Checklist for submitting an application						
Ple	ease enclose the follo	owing:				
•				Please send the completed application form and copies of any necessary documents to:		
•	A landlord's gas safety certificate, issued by a Gas Safe Registered contractor (valid for 1 year)			Rushmoor Borough Council Housing Services		
•	BS5839 test reports system (if applicable	relating to the fire detection) (valid for 1 year)		Council Offices Farnborough Road		
•	BS5266 test reports	relating to the emergency plicable) (valid for 1 year)		Farnborough GU14 7JU		