

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.

Fee calculation

Reference number

Address of property to be licensed

	Postcode
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Date that current licence expires:

Is the applicant the proposed licence holder? **See note 1**

Yes – please go straight to **Part 2**

No – please complete **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 Agent 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)

Individual Company Partnership 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
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Contact numbers

Home

Work

Mobile

Fax

Email address

Date of birth

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
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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)

Address (if a company, please give registered office address)

		Postcode
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Contact numbers	Home	<input type="text"/>	Work	<input type="text"/>
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Mobile	<input type="text"/>	Fax	<input type="text"/>
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Email address	<input type="text"/>	Date of birth	<input type="text"/>
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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

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

4.1 Name of freeholder(s)

Full name of freeholder 1

Address of freeholder 1

		Postcode
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Email	Telephone
<input type="text"/>	<input type="text"/>

Full name of freeholder 2

Address of freeholder 2

		Postcode
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Email	Telephone
<input type="text"/>	<input type="text"/>

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

Reference or roll number

Address of mortgagee

Postcode

4.3 Name of leaseholder(s) (if none, state none). Please continue on a separate sheet, if necessary.

Full name of leaseholder 1

Address of leaseholder 1

Postcode

Email

Telephone

Full name of leaseholder 2

Address 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 include 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 – please state their names

No

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	Date	Court	Offence	Sentence

Relevant issues include:

- i) Criminal offences involving: fraud, dishonesty, violence, drugs, schedule 3 of the Sexual Offences Act 2003.
- ii) Practised unlawful discrimination on the 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.

6.2 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? Yes No

If **yes**, please provide the addresses of these properties, along with details of the authorities that issued the licences

6.3 Has any person named in Parts 1, 2, 3 and/or 4 of this form ever applied for and been refused a licence for a house in multiple occupation? 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 the local authority in which they were breached

PART 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 forums attended by the proposed licence holder/manager, in the last three years, which support this application.

- 7.3** Is there details of the name, address and telephone number of the Manager displayed in a suitable position within the property?

Yes No

PART 8 – Further information – see note 8

Please use this space if you need more room for any of your answers or for any additional information you think may be relevant to the 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.

Name of applicant		Signature
	Date	

Name of proposed licence holder (if different to applicant)		Signature
	Date	

Name of manager		Signature
	Date	

Name		Signature
	Date	

Name		Signature
	Date	

Checklist for submitting an application

Please enclose the following:

- A current Periodic Inspection Report from a competent electrician (valid for 5 years)
- A landlord's gas safety certificate, issued by a Gas Safe Registered contractor (valid for 1 year)
- BS5839 test reports relating to the fire detection system (if applicable) (valid for 1 year)
- BS5266 test reports relating to the emergency lighting system (if applicable) (valid for 1 year)

Please send the completed application form and copies of any necessary documents to:

**Rushmoor Borough Council
Housing Services
Council Offices
Farnborough Road
Farnborough
GU14 7JU**