



Application to license a house in multiple occupation (HMO)

Housing Act 2004 Part 2

Housing Act 2004 Part 2 – Application to license a house in multiple occupation (HMO)

NOTES

Every HMO located in the district of Blaby which is subject to licensing under Part 2 of the Housing Act 2004 must be licensed with Blaby District Council (the council). If you need clarification on this please contact the Environmental Health Team on 0116 2727784 or email environmental.health@blaby.gov.uk

The same form may be used for renewing an existing HMO licence. You should apply for a new HMO licence shortly before an existing licence expires. If you need to amend/ vary details on an existing HMO licence please contact the Environmental Health Team on 0116 2727784 as you will need to complete a different form.

HMO licences are not transferrable, so if the licence holder changes, any proposed licence holder will be required to complete a new HMO licence application and submit the appropriate application fee.

IMPORTANT NOTICES

Licence holder

A licensable HMO must have a licence holder. This person must be the person who, out of all the persons reasonably available to be the licence holder, is the most appropriate person to be the licence holder.

The licence holder will be responsible for adhering to all conditions which will be attached to the licence unless another person, such as a manager, consents to condition(s) being placed against them. Such person(s) will be liable for legal action should conditions be breached.

Public Register

The council is required by law to maintain a public register of HMOs within its borough (Section 232 Housing Act 2004). This register will be available for inspection at the council offices, it may also be published on the council's website and hard copies will be disclosed to the public if requested.

Data Protection Privacy Notice

Blaby District Council (BDC) is the data controller collecting this personal information from you. BDC can be contacted by telephone on 0116 275 0555 or email customer.services@blaby.gov.uk

| Council Service | Environmental Health – HMO Licensing |
|--|---|
| The information we are collecting from you | Name Address Contact details Proof of identification Company details Qualifications / experience Details of relevant criminal offences |
| Why we use it | This information is required to process the licence application and determine whether the licence can be issued. |
| Why we are allowed to use your information | We are allowed to use your information because it is necessary for compliance with a legal obligation (Housing Act 2004). To use legal obligation the processing has to be actually necessary for compliance with a common law or statutory obligation. We are allowed to use your information because it is necessary for the performance of a task carried out in the public interest, or so that we can undertake our official duties under part 2 of the Housing Act 2004. We are also allowed to use your information because you have given us consent to process your information for this specific purpose. |
| Who we may share it with | We may also share your information with the police or other regulatory or law enforcement bodies where it is lawful to do so. |

We do not use computers to make any decisions about you, and we do not send your information to other countries.

How long we keep your information, depends on why we need it, but we will only keep information for as long as there is a legal or business need for us to do so. You can find out how long we keep information for in our Records Retention Schedule available on the Council's website.

You have a number of legal rights in respect of your personal data which are: the right to be informed about how it is being used and why; the right the right of access to it to check that we are acting lawfully and, in some cases, the right to rectify it or to have it erased; the right to restrict our processing of it; the right of data portability; and the right to object to automated decision taking.

Contact us

If you have any questions about the way in which Blaby District Council handles your personal information, or want to raise a concern, you may contact:

Name: Louisa Horton, Data Protection Officer
Telephone: 0116 275 0555
Email: gdpr@blaby.gov.uk

You can also contact the Information Commissioner's Office (The ICO) to find out more about your rights as a data subject (a person that we hold personal data about) if you think there is a problem by email to casework@ico.org.uk or by telephone on 0303 123 1113. You can also visit the ICO's website www.ico.org.uk

Section 1 – Property address and type of application

A) What is the address of the property to be licensed?

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Postcode

What is this application for?

Application to license a HMO – first property

Application to license a HMO – subsequent property (at the same time)

Renewal of HMO licence

Renewal of HMO licence – subsequent property (at the same time)

Section 2 – Applicant, proposed licence holder and ownership details

Who is applying?

The proposed licence holder

A person or agent acting on behalf of the proposed licence holder

If you are not the proposed licence holder, please tell us who you are.

Name (in full)

Address

| |
|----------------------|
| <input type="text"/> |
| <input type="text"/> |
| <input type="text"/> |

Postcode

Telephone number

Home:

Mobile:

Email

What is your connection to the proposed licence holder or property?

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Who is the proposed licence holder?

Name (in full)

Address

Postcode

Telephone number

| | |
|----------------------------|------------------------------|
| Home: <input type="text"/> | Mobile: <input type="text"/> |
|----------------------------|------------------------------|

Email

Is the proposed licence holder part of a limited company? (Yes / No)

If yes:

Is the business registered in the UK with Companies House? (Yes / No)

Is the business registered outside the UK? (Yes / No)

What is the business name?

VAT number (put 'none' if you're not VAT registered)

Legal status

Proposed licence holder's position in the business

What is the business address? If there is one, this should be the official address for receiving communications.

Address

Postcode

Does the proposed licence holder currently have, or has previously held, a HMO licence for another property either inside or outside of Blaby District? (Yes / No)

If yes, please state which council's have granted licences.

Does the proposed licence holder own the property? (Yes / No)

If no, please tell us who owns the property:

Name (in full)

Address

Postcode

Telephone number

| | |
|----------------------------|------------------------------|
| Home: <input type="text"/> | Mobile: <input type="text"/> |
|----------------------------|------------------------------|

Email

Is the property owned by a limited company? (Yes / No)

If yes:

Is the business registered in the UK with Companies House? (Yes / No)

Is the business registered outside the UK? (Yes / No)

What is the business name?

VAT number (put 'none' if you're not VAT registered)

Legal status

What is the limited company's address? If there is one, this should be the official address for receiving communications.

Address

Postcode

Do any other persons have an interest in the property? (e.g. mortgage lender, leaseholder) (Yes / No)

If yes, please provide the following information:

Person 1

Name (in full)

Their interest in the property

Address

Postcode

Telephone number

Email

Person 2

Name (in full)

Their interest in the property

Address

Postcode

Telephone number

Email

Continue on additional sheets if necessary

Section 3 – Management arrangements

Section 66 of the Housing Act 2004 requires the Council to decide whether a person proposed to be involved in the management of a HMO has a sufficient level of competence to be so involved. It also requires them to decide whether the proposed management arrangements are satisfactory. To help us decide this, please answer all questions below as fully as possible.

Is the proposed licence holder, the proposed manager of the property?
(Yes / No)

If no, please tell us who is the proposed manager:

Name (in full)

Address

Postcode

Telephone
number

Home:

Mobile:

Email

Is the proposed manager part of a limited company? (Yes / No)

If yes:

Is the business registered in the UK with Companies House? (Yes / No)

Is the business registered outside the UK? (Yes / No)

What is the business name?

VAT number (put 'none' if you're not VAT registered)

Legal status

What is the limited company's address? If there is one, this should be the official address for receiving communications.

Address

Postcode

What is the business address? If there is one, this should be the official address for receiving communications.

Address

Postcode

Other than management, does the proposed manager have any legal or other interest in the property? (Yes / No)

If yes, please detail the extent of this:

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Continue on additional sheets if necessary

Is the proposed manager a member of a Redress Scheme? (Yes / No)

If yes, please provide their membership details below

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Other than a Redress Scheme, is the proposed manager a member of a landlords' association or other professional body relevant to the ownership and management of residential property? (Yes / No)

If yes, please detail what they are a member of

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Does the proposed manager manage any other licensed HMOs inside or outside of Blaby District? (Yes / No)

If within the Blaby District, please detail their addresses. If outside of this district, please detail which other local authority boundaries they are located within.

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Continue on additional sheets if necessary

If you cannot answer 'Yes' above, what experience does the proposed manager have of managing other properties of this kind?

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Continue on additional sheets if necessary

Please provide details of all training, qualifications and experience the proposed manager has relating to HMOs.

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Continue on additional sheets if necessary

How are repairs and improvements managed? For example, please detail who agrees and commissions works and improvements at the property. In support of this, you may wish to include proposed contract documents between the proposed licence holder and person proposed to be involved in managing the property.

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Continue on additional sheets if necessary

What funding arrangements are in place concerning the ongoing management, maintenance/repair and improvement of this property?

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Continue on additional sheets if necessary

Please detail how the cost would be covered of major emergency repair work or improvements to the property which are not insured.

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Continue on additional sheets if necessary

How will prospective tenants apply for accommodation at this property and how will they be vetted?

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Continue on additional sheets if necessary

Please detail how you will ensure the property is clean, safe and suitable to live in before each new tenancy commences.

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Continue on additional sheets if necessary

Are or will inventories be agreed with tenants before they move in? (Yes / No)

How often will the general condition of the property both internally and externally be reviewed to ensure it is maintained in good and safe repair?

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Section 4 – Fit and proper person

The Council must consider evidence which shows that both the proposed licence holder and proposed manager of the HMO or any person associated, or formerly associated with them, whether on a personal, work or other basis are 'fit and proper' persons.

Has the proposed licence holder, proposed manager, or anyone else associated with the proposed licence holder, ever been cautioned by the Police, a local council or other authority, or convicted of an offence involving any of the following? (Please note that convictions which are spent under the Rehabilitation of Offenders Act 1974 do not need to be declared)

Please tick or cross all that apply:

| | Proposed Licence holder | Proposed Manager | Anyone associated or formerly associated |
|--|-------------------------|------------------|--|
| Offences relating to violence? | | | |
| Crimes of dishonesty (theft, fraud, etc.)? | | | |
| Offences relating to drugs? | | | |
| Offences under Schedule 3 of the Sexual Offenders Act 2003? (c. 42) (offences attracting notification requirements) | | | |
| Unlawful discrimination on the grounds of sex, colour, race, ethnic or national origins or disability in or in connection with the carrying out of any business? | | | |
| Harassment and/ or illegal eviction of tenants? | | | |
| Any other provision of the law relating to housing or landlord and tenant law? | | | |
| None of the above | | | |

If you have ticked any of the above, please provide the relevant details below, including date, offence and any sentence or order of the court.

| Date of offence | Date of conviction | Name and place of court | Nature of offence | Sentence |
|-----------------|--------------------|-------------------------|-------------------|----------|
| | | | | |

Continue on additional sheets if necessary

Has the proposed licence holder, proposed manager, or anyone else associated with the proposed licence holder, ever?

| | Proposed licence holder | Proposed manager | Anyone associated or formerly associated |
|--|-------------------------|------------------|--|
| <p>Received a statutory notices served under the:</p> <ul style="list-style-type: none"> • Housing Act 1985 (as amended) Housing Act 2004 • Environmental Protection Act 1990 • Building Act 1984 • Town and Country Planning Act 1990 • Public Health Act 1936 or 1961 • Housing and Building Control Act 1984 • Local Government (Miscellaneous Provisions) Act 1976, 1982, 2003 • Prevention of Damage by Pests Act 1949 • Energy Act 2013 • Deregulation Act 2015 • Housing and Planning Act 2016 • Anti-Social Behaviour Crime And Policing Act 2014 | | | |
| Wilfully or intentionally failed to comply with any statutory notice relating to any of the Acts detailed above? | | | |

Section 5 – Property details

Is the property a:

| | |
|---|--|
| Shared house -where tenants share one or more facilities such as kitchens or bathrooms | |
| Bedsits - kitchen facilities provided in rooms but bathroom or toilet facilities shared | |
| Shared flat/ maisonette | |
| Hostel/ bed and breakfast for homeless person | |
| Asylum seeker accommodation | |
| Other (please specify) | |

Property type:

| | |
|---------------------------------------|--|
| Detached house | |
| Semi detached house | |
| Mid terraced house | |
| End terraced house | |
| Accommodation above a commercial unit | |
| Other (please describe) | |

Approximate year of construction

Number of storeys (including basement or attic / loft if connected with the accommodation)

Number of rooms used exclusively as:

| | |
|------------------------------|--|
| Bedrooms/ bed sitting rooms | |
| Kitchens | |
| Bathrooms | |
| Communal lounge/ dining room | |
| Separate toilet compartments | |

Please list every room within the house and state the use of the room, what facilities are provided within it, where it is located and the room size.

| Floor level | Room use | Does this room contain....? (please tick or cross) | | | | | |
|-------------|----------|--|--------------------|------|----------------|--------|-------------|
| | | Wash hand basin | Cooking facilities | Bath | Shower cubicle | Toilet | Size |
| e.g. Ground | Bathroom | X | | X | X | X | 2.5m x 3.2m |
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Is there a resident landlord? (Yes / No)

How many people could live in the property?

How many separate families or households live in the property?

Are any of the occupiers considered vulnerable? (e.g. children, disabled occupiers, drug/ alcohol dependents, senior citizens?)

If yes, please tell us why you think they are vulnerable:

.....

.....

.....

.....

Are there any smoke detectors/alarms in the property? (Yes / No)

Is it a mains-operated, interlinked fire alarm system? (Yes / No)

If known, please supply the type/grade of system

Is emergency lighting installed within the property? (Yes / No)

Has a fire risk assessment been undertaken? (Yes / No)

What type of heating is installed in the property?

| | |
|------------------------------|--|
| Gas central heating | |
| Electric central heating | |
| Fixed gas fires | |
| Fixed electric heaters | |
| Other (please specify) | |

Is heating supplied in every room? (Yes / No)

If 'no', which rooms don't have a heating appliance?

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| |

| | All | Some | None | N/A |
|--------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Are the windows double glazed? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Is the roof space insulated? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Are cavity walls insulated? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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|-----------------------------|--|--|--|--|
| Are hot water tanks lagged? | | | | |
|-----------------------------|--|--|--|--|

Is there an Energy Performance Certificate for the property?
(Yes / No)

| | Microwaves | Ovens | Hobs |
|---|------------|-------|------|
| How many cooking appliances are supplied? | | | |

How many fridges are provided?

What other electrical and gas appliances are supplied to the tenants for their use?
Please state below (e.g. kettle, refrigerator, vacuum cleaner etc.):

| | | |
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| | Yes | No | Don't know | None provided |
|--|-----|----|------------|---------------|
| Do all furniture and soft furnishings provided at the property comply with The Furniture and Furnishings (Fire Safety) Regulations 1988 (as amended)? | | | | |

Section 6 – Notifying others about this application

You must let certain people 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 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 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

You must tell each of these persons:

- Your name, address telephone number and e-mail address or fax number (if any)
- The name, address, telephone number and e-mail address or fax number (if any) of the proposed licence holder (if it will not be you)
- That this application is for a 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 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 and address | Their interest in the property (e.g. mortgagee) |
|-------------------------|--|
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Continue on additional sheets if necessary

Section 7 – Supporting Evidence

Please supply the following in support of the licence application. All documents must be original and either posted or hand delivered to Environmental Health, Blaby District Council, Council Offices, Desford Road, Narborough, Leicestershire, LE19 2EP. * See notes on page 26 for details of acceptable documents.

Please complete the table below with the documents / information supplied. All of these documents (except those which are not applicable to your property) must be provided before the application can be accepted.

| Document / Information | Yes | No | N/A |
|---|-----|----|-----|
| Photo ID of the proposed licence holder * | | | |
| Proof of address of the proposed licence holder * | | | |
| Photo ID of the proposed manager * | | | |
| Proof of address of the proposed manager * | | | |
| Basic Disclosure and Barring Service certificate less than 6 months old for licence holder AND manager (if different people) * | | | |
| Current Landlord's Gas Safety Record (less than 12 months old) – only if a gas supply is present | | | |
| An Electrical Installation Condition Report carried out within the last 5 years detailing the condition of the whole of the fixed electrical wiring in the property | | | |
| PAT testing certificate covering all portable electric appliances supplied to the tenants | | | |
| Copy of the fire risk assessment | | | |
| An example of a tenancy agreement or terms of occupation | | | |
| Latest fire alarm test certificate (depends on system installed) | | | |
| Latest emergency lighting test certificate (if emergency lighting installed) | | | |
| Service contract for the fire alarms / emergency lighting (depends on system installed) | | | |
| Floor plans detailing the layout of every floor (an example of a floorplan with the level of detail required is in the guidance notes) | | | |

If you would like the documents to be returned by post please tell us who to send the original documents back to:

Name

Address

Postcode

Please note that any documents returned will be sent by normal post. Blaby District Council cannot take responsibility for any documents lost or damaged in the post.

If you would like to collect the documents from the Council please tick here.

If you would like to deliver the documents in person and take them away please contact the Environmental Health team on 0116 272 7784 and make an appointment to see an officer.

* Acceptable documents (photocopies of the documents are not acceptable)

Evidence that will be accepted as proof of identification will include one of the following:

- current driver's licence
- current passport
- any other form of ID please contact the Council for advice

Evidence that will be accepted as proof of address will include one of the following:

- current driver's licence
- recent bank or building society statement – from the last three months
- recent utility bill - from the last three months
- recent tax correspondence

The supporting documents to confirm the business address will include one of the following:

- recent utility bill (from the last three 3 months)
- business rates
- recent tax correspondence

Basic DBS certificates can be requested online at <https://www.gov.uk/request-copy-criminal-record> for £25.

Section 8 – Declaration

Please note that it is a criminal offence to knowingly supply information that is false or misleading for the purpose of obtaining a licence. Evidence of any statement made in this application may be required at a later date. If we later discover something that is relevant and which you should have disclosed, or which has been incorrectly stated or described, then your licence may be revoked or other 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 the council in connection with any functions under Parts 1 to 4 of the Housing Act 2004 that is false or misleading or I / we are reckless as to whether it is false or misleading.
- I / we declare that I / we have read the statements contained in this form and completed all parts of this application to the best of my / our knowledge and ability, and it is valid as of the date below.

Applicant:

Signed

Print name

Date

Proposed licence holder:

Signed

Print name

Date

Proposed manager:

Signed

Print name

Date

GUIDANCE NOTES TO ASSIST IN COMPLETING THE HOUSE IN MULTIPLE OCCUPATION MANDATORY LICENSING APPLICATION FORM

If you make any mistakes, or do not complete all the relevant sections, it may delay the processing of the application form and incur further charges. If additional information is supplied on a separate sheet/s, please make sure that they are securely attached to the application form. Please read the form and guidance notes carefully to assist you in:

- deciding if the property requires a licence
- applying for the correct licence
- completing the form correctly
- enclosing all the relevant documents

The Housing Act 2004 defines a House in Multiple Occupation (HMO) as a building or part of a building such as a flat that is:

- a) occupied by more than one household and where more than one household shares – or lacks – an amenity, such as bathroom, toilet or cooking facilities, or
- b) a converted building – but not entirely self-contained flats - whether or not some amenities are shared, or
- c) converted self contained flats, that do not meet the 1991 Building Regulations, and at least one third of the flats are occupied under short tenancies

Not all HMOs require a licence. The definition below details which HMOs require a licence.

WHICH HMOS REQUIRE A LICENCE?

To make sure that the most vulnerable tenants living in the highest risk properties are protected, the following definition as set out in The Housing Act 2004 (as amended) makes it compulsory for certain HMOs to be licensed, if:

- a) it is occupied by five or more persons comprising more than one household; and
- b) the tenants are living in the dwelling as their main or only residence.

Please note that this is the amended definition that will be in force from October 2018 and it removes the requirement of the property to have three or more storeys.

Anyone who owns or manages a HMO that must be licensed will have to apply for a Licence from the Local Housing Authority in which the property is situated. An application for a HMO Licence has to be made under Part 2 of the Housing Act 2004 which has made it compulsory for local authorities to licence larger, high risk HMOs.

Properties that are operating without a licence will be committing an offence that is liable to an unlimited fine.

Definition of Household

- A single household refers to persons who are all members of the same family. A person is a member of the same family if they are married to each other, live together as husband and wife including same sex couples, and other relationships.
- A 'relationship' means parent, grandparent, child, grandchild, brother, sister, uncle, nephew, niece or cousin. A relationship of the half-blood shall be treated as a relationship of the whole blood and a stepchild shall be treated as his/her child.
- A person who lives in accommodation supplied by his/her employer or by a member of his/hers employer's family, is classed as living in the same household, for example, au pair, nanny, nurse, carer, governess, servants, chauffeur, gardener, secretary or personal assistant.

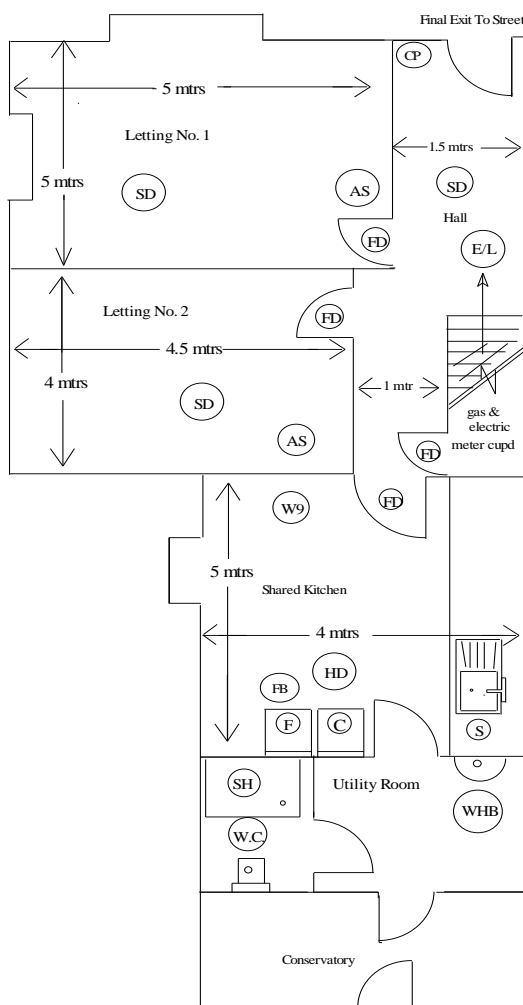
Definition of main or only residence

- Living accommodation occupied by persons as their main or only residence includes persons undertaking a full-time course of further or higher education, migrant and/or seasonal workers and asylum seekers or his/her dependents, who have been provided with accommodation under section 95 of the Immigration and Asylum Act 1999(a) and the accommodation is provided under contract to, or on behalf of, the National Asylum Support Service. It also includes HMOs that are operated as a refuge.

Floor Plans

The sketch plan must contain measurements showing the location and size of each room in the property. Below is an example showing the type of sketch and detail required. Please use the abbreviations listed below to mark details on the plan. Please provide a separate sketch of each floor level of the property. The plans do not need to be drawn to scale but must be an accurate enough representation for officers to determine the application.

KEY TO SYMBOLS TO BE USED ON PLAN



| | |
|-------|--------------------|
| (FD) | FIRE DOOR |
| (EL) | EMERGENCY LIGHTING |
| (SD) | SMOKE DETECTOR |
| (HD) | HEAT DETECTOR |
| (AS) | ALARM SOUNDER |
| (CP) | CALL POINT |
| (FB) | FIRE BLANKET |
| (W9) | WATER EXTINGUISHER |
| (AAF) | FOAM EXTINGUISHER |
| (SH) | SHOWER |
| (WC) | WATER CLOSET |
| (C) | COOKER |
| (S) | SINK |
| (F) | FRIDGE |
| (B) | BATH |
| (WHB) | WASH HAND BASIN |
| [FAP] | FIRE ALARM PANEL |

Either

EXAMPLE GROUND FLOOR PLAN