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| --- |
| **Housing Act 2004 – Selective Licence** |
| **Application Form for an Individual Property Licence** |

Complete this form in **black** ink only; write clearly within the spaces provided and complete to the best of your knowledge. If you make a mistake, or do not complete all the relevant sections, it may delay the processing of the application and may incur further charges.

**Only complete this application form for a licensable property within the Selective Licensing area.**

Please see the Nottingham City Council website for all information and guidance related to **‘Selective Licensing’**. [**www.nottinghamcity.gov.uk**](http://www.nottinghamcity.gov.uk)

Please return your completed form by post or alternatively, if you wish to do to in person, please contact the office to arrange a convenient appointment time.

**Selective Licensing Team, c/o Nottingham City Council, Loxley House Station, Street, Nottingham, NG2 3NG**

**Email:** [**selective.licensing@nottinghamcity.gov.uk**](mailto:selective.licensing@nottinghamcity.gov.uk)

|  |  |
| --- | --- |
| **The documents & information required for this form**  *(****copies only, no original documents can be returned)*** | |
| **A clear proof of address for the proposed Licence Holder**. *For example, a Council tax bill, utility bill, bank statement or driving licence. (Not applicable to Companies)* |  |
| **Licence Holder Declaration (if you, the applicant is not the proposed licence holder)** |  |
| **Correct Application Fee – We will contact you for payment arrangements**  *When the department contacts you, it may be displayed as a random mobile phone number* |  |

**You will also need to gather the following information for all applications:**

* The proposed licence holder(s) and proposed manager(s) name, address and contact details.
* The name, address and contact details for any other persons with an interest in the property, such as other leaseholders, freeholders, and mortgage companies.
* Confirmation and a date of having served a notice of the application to those with an interest in the property.
* Details in relation to the type of property and safety of the property.
* Details in relation to how the property is managed.

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| --- | --- | --- | --- |
| **Individual Property Licence Fees** | **Accredited (Accredited with DASH, Unipol or ANUK)** | **Non-accredited** | **Less compliant\*** |
| **Part A fee  (1st payment)** | £219.00 | £263.00 | £263.00 |
| **Part B fee  (2nd payment)** | £446.00 | £624.00 | £970 |
| **Total licence fee** | **£665.00** | **£887.00** | **£1,233.00** |

*\* Less compliant fees may apply when certain criteria are met within the fee policy.*

|  |  |
| --- | --- |
| **Paper Application Fee(s) (additional fee to individual property licence fee above)** | |
| Application downloaded and printed from website | £65.00 |
| Requesting NCC to send application by post | £100.00 |

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| **A Licensing Support Officer will contact you by phone to take the first (Part A) payment and the additional paper application fee. All major Credit/Debit cards accepted.** |

**Short Form Privacy Notice**

We will use the information provided by you for the processing of licence applications and compliance of such licences whilst they remain in force. The basis under which the Council uses personal data for this purpose is under Parts 1 to 4 of the Housing Act 2004. This is necessary for the performance of a task carried out in the public interest by the Council or in the exercise of official authority vested in the Council by the Housing Act 2004 and other associated legislation.

The information that you have provided will be kept for the duration of the licence and 7 years after the expiry date of the licence. If the licence is refused, it will be kept for 7 years after the date of the licence refusal.

As part of our duty under the Housing Act 2004 we may have to share and/or check your information with other agencies for example the Police, Fire and Rescue Service, Office of Fair Trading, accreditation partners (e.g. DASH and Unipol), other local authorities and other relevant departments within the Council, for example Planning, Council Tax, Revenues and Benefits and Debtors .For more detailed information regarding our privacy notice please go to [www.nottinghamcity.gov.uk/privacy-statement](http://www.nottinghamcity.gov.uk/privacy-statement)

The Data Protection Officer is Naomi Matthews. You can contact the data protection officer at the Loxley House address on page one or via email at [data.protectionofficer@nottinghamcity.gov.uk](mailto:data.protectionofficer@nottinghamcity.gov.uk)

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**Section 1 - Renewal of a Previously Granted Selective Licence**

Are you applying to renew a selective licence that is currently in force but due to expire **Yes / No**

soon?

**Property to which this application applies to:** *(the property being rented*)

|  |  |
| --- | --- |
| House Number / Building Name | |
| Address Line 1: |  |
| Address Line 2: | County: |
| Town/City: | Postcode: |

What is the expiry date of the current licence for the property?

What is the previous Selective Licence reference number? **FS-Case**

Licence Holder’s DASH Accreditation reference number? **DASH**

*\*Remember to claim DASH Accreditation discount the accredited person needs to be listed as the Licence holder*

Is the Applicant the same as listed on the previous application? **Yes / No**

Is the Licence Holder(s) the same as listed on the previous application? **Yes / No**

Is the Manager(s) the same as listed on the previous application? **Yes / No**

Is the DASH Accredited Licence Holder the same as listed on the previous application? **Yes / No**

If you hold a copy of the existing Selective Licensing application you submitted and have answered **YES** to all the questions above, you can attach the copy to this application. You can move to section 3 and continue with the rest of form.

If you have answered **NO** to any of the questions above, please complete this Selective Licensing application form in full as previously done.

**If you wish to change the number of occupants and or households that the property is licensed for, you may need to vary the licence and/or apply for a licence under a different scheme. For further information on this please contact us on the details below.**[**hmo@nottinghamcity.gov.uk**](mailto:hmo@nottinghamcity.gov.uk)**(Additional & Mandatory HMOs)**[**selective.licensing@nottinghamcity.gov.uk**](mailto:selective.licensing@nottinghamcity.gov.uk)**(Non-HMOs)**

|  |
| --- |
| **Section 2 – Type of Licence and Occupancy** |

**What type of rented accommodation is this? (Tick appropriate option)**

|  |
| --- |
|  |
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|  |

A house

A flat

A house converted into and compromising only of self-contained flats

A purpose-built block of flats (block licence)

**Flat:** Is the flat located in a purpose-built block of flats **Yes / No**

**House Conversation:**

When were the conversion works done on the property?

Does this building meet the appropriate building regulations? **Yes / No**

How many flats are there within the building?

**Which storey(s) is the property occupied over? (Tick all that apply):**

Habitable basement

(This does not include cellars that do not form part of the living space)

Ground floor

First floor

Second floor

Third floor

Floors above the third floor

**Section 2 Number of Occupants (For individual property licence application)**

Please enter the total number of people that occupy the property at present.

The number of occupants is simply the number of people that live in the property. This includes babies and children.

Please enter the total number of households that occupy the property at present.

The number of households must be at least 1. If the property is unoccupied a licence is not required.

**A Household:** anyone related or living together as a ‘family’ is considered as one household. This includes step, foster and adopted children and partners and so on. Unrelated people are separate households. (This is regardless of tenancy agreements)

This does NOT refer to the number of tenancies or cover multiple households on one tenancy. Ensure you are clear on the number of households, as this will affect the licensing scheme that applies to this accommodation.

Examples:

Family of mum, stepdad, 3 children and one of the children’s partners = 1 household.

A couple and their child = 1 household.

A couple (1) and their friend (1) = 2 households.

5 unrelated people = 5 households.

**The questions below relate to the maximum number you would like the licence for / the property to be occupied by:**

Please enter the maximum number of people that occupy the property at present.

The number of occupants is simply the number of people that live in the property. This includes babies and children.

Please enter the maximum number of households that occupy the property at present.

The number of households must be at least 1. If the property is unoccupied a licence is not required.

Are any of the occupants that live here an actual owner of the property?

A ‘live in landlord’ can have up to 2 lodgers and not require a licence. 3 or more lodgers would require a licence. **Yes / No**

How many of the occupants are part of the owner’s household?

**Section 3 - Property Details (Applicant to complete all Sections)**

**When was the property built? (Tick appropriate response - if you do not know please estimate)**

Before 1919 1919 > 1944 1945 > 1964

1965 > 1979 After 1979

How many bedrooms does the property have?

How many rooms excluding kitchens does the property have?

How many bathrooms and/or shower rooms does the property have?

How many toilets does the property have?

How many wash hand basins does the property have?

(Not including kitchen sinks)

**Fire Safety**

**Please select the descriptions which best fit the fire safety measures installed within the property.**

A fire alarm control panel with detectors and alarm sounders (This is a system with an electrical control component for the fire alarm system. It may indicate zones and faults)

Interlinked mains wired smoke and/or heat alarms (Interlinked is electrical wiring between the alarms, so that when one is activated, they are all activated)

A sprinkler or misting system (A sprinkler or mister is also activated alongside the alarm)

Mains wired smoke and/or heat alarms - not interlinked (Wired to its own electrical circuit so that it activates even if the mains electric fails)

Battery operated smoke alarms (Alarms powered only by batteries; no back up power or connection or mains wire)

None of the above

Please explain below what fire safety measures are installed within the property:

**Please select all floors where the smoke alarms are present.**

|  |  |
| --- | --- |
| Habitable basement *(this does not include cellars that do not form part of the living space)* |  |
| Ground floor |  |
| First floor |  |
| Second floor |  |
| Third floor |  |
| Floors above the third floor |  |

**Please select the descriptions that best fit the fire escape routes and any safety training provided to tenants.**

All final exit doors are openable from inside without the use of a key.

None of the bedrooms are inner rooms.

(Inner rooms are those which are accessed through another room)

Tenants are encouraged to regularly test their smoke alarms.

Tenants are provided with fire safety information / training.

I declare that any furniture provided to tenants within the property meets the safety

requirements contained in any enactment.

**Is gas supplied to the house?** **Yes / No**

I declare that all gas appliances that are provided within the property are to safe use

and are also included on a valid gas safety certificate (obtained in respect of this house

within the last 12 months), which is available for production to the Authority upon request.

I declare that the electrical installation in respect of this house is in proper working order

and is safe for continued use. A valid electrical installation condition report (obtained in

respect of this house within the last 5 years), is available for production to the Authority

upon request.

**Section 4 - Applicant Details (Person completing the form)**

**Applicants Name**

Title:

Forename:

Surname:

Middle Name(s) (if any):

**Applicant’s Address**

|  |  |
| --- | --- |
| House Number / Building Name | |
| Address Line 1: |  |
| Address Line 2: | County: |
| Town/City: | Postcode: |

**Applicant’s Contact Details**

Telephone Number:

Work Telephone Number:

Mobile Number:

Email Address:

**Does the applicant have any of the following interests in the property? (Tick all that apply)**

|  |  |
| --- | --- |
| Owner / Freeholder |  |
| Leaseholder |  |
| A person having control of the HMO or house |  |

A person having control of a premises is generally someone who receives the rent of the premises, whether on his own account OR as agent or trustee of another person. There can therefore be more than one 'person having control' for any premises. For example, if the rent is collected by a managing agent and then passed on to the owner, both the agent and the owner may be the 'person having control'. In circumstances where the owner/freeholder has leased the property to another person or company, the leaseholder will become the person having control of the property.

**Please Note Proof of address**

**A clear proof of address for all the proposed Licence Holders is required. *Please attach copies of the documents to this application form***

* For example, a Council tax bill, utility bill, bank statement or driving licence.
* This is not applicable to Companies & Charities

**Section 5 – Proposed Licence Holder 1 Details**

The Licence Holder may be an individual, a company, charity or partnership. You can also have multiple licence holders, for example where it’s the same owners such as a husband and wife, but not a different entity such as an owner and manager.

The proposed Licence Holder should normally be the ‘person having control’ of the property.

The Licence Holder will be bound to the licence conditions and be legally responsible for the operation of the HMO or house to be licensed. They must have the power to:

* Let and evict tenants.
* Access all parts of the premises to the same extent as the owner (if a different person)
* Authorise any expenditure required to ensure the health and safety of the tenants and others.

Nottingham City Council will send e-mail and text alerts in relation to this application to include (but not limited to) reminders, alerts of changes and updates and to request additional information.

**Please be mindful that information, including the address of the Licence Holder and manager will be published on the public register.**

**Licence Holder Accreditation**

Please note: If there is more than one company director and if the company is to be the proposed Licence Holder whilst claiming DASH accreditation, the accredited fee will only be applicable if the individual who holds the DASH accreditation is fully accredited and listed as the Licence Holder. In addition, the property rental address for this application requires listing in your DASH Accreditation account.

**Is the Licence Holder 1 Accredited**

Not Accredited DASH Accredited Unipol / ANUK Accredited

**DASH Accreditation**

**DASH** Accredited Persons Name:

*(Not The Company Name)*

DASH Accreditation Number:

**Unipol / ANUK**

Unipol / ANUK Name *(as stated*

*on the website register):*

**You may need to ensure the following Licence Holder Declaration Form is completed:**

If the person completing this application is not also a proposed licence holder, the proposed licence holder(s) needs to complete the 'Licence Holder Declaration'. Each Licence Holder requires a Licence Holder Declaration form.

|  |  |
| --- | --- |
| **Licence Application Declaration – Proposed Licence Holder 1** | |
| **Property Address:** | |
| As part of any application for an HMO or Selective licence, the proposed licence holder(s), if a different person to the applicant, must read, complete this form with their application. **Note: if the licence holder and applicant are NOT the same person, then this declaration is required for each licence holder.** | |
| **DECLARATIONS (Tick to confirm)** | |
| ☐ | I confirm that I am 18 years or over. |
| ☐ | I declare that the information contained in this application is correct to the best of my knowledge. |
| ☐ | I declare that I have served a notice of this application on each person known to me, that are required to be informed that this application has been made. |
| ☐ | I confirm that I agree to pay the 2nd part of the licence fee, upon demand by the Nottingham City Council, if the applicant fails to do so in the period provided to them. The 1st part of the 2-part fee has already been paid by the Applicant (unless agreed otherwise). |
| ☐ | I can confirm that all future correspondence can be sent to me via the email address that was provided within this application and that this email inbox will be checked regularly. I also agree to receiving text message notifications. |
| ☐ | I agree to receive the licence and/or other relevant documents under Parts 2 and 3 of the Housing Act 2004, transmitted by electronic means (via email) in accordance with s247 of the Act. |
| ☐ | 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 reckless as to whether it is false or misleading. |
| Name of proposed licence holder:  Name & role (if signing on behalf of a company):  .  Signed:  Dated: | |
| ☐ | **The Council may send information on any changes to legislation, training opportunities other items of interest and occasionally relevant information from other selected partners e.g. accreditation providers and landlord organisations. We will not release your information to these other partners unless required by law. Please tick to confirm you would like to receive this information (optional).** |

\*For further information on the Housing Act 2004, please visit: [www.legislation.gov.uk](http://www.legislation.gov.uk/)

**Type of Licence Holder 1 (please tick the box that applies)**

Individual Company Charity Partnership

**Company or Charity Name as stated on the Companies House / Charities Commission Registers**

The link below will direct you the Companies House Register where you will find your company details:

[**https://www.gov.uk/get-information-about-a-company**](https://www.gov.uk/get-information-about-a-company)

[**https://register-of-charities.charitycommission.gov.uk/charity-search**](https://register-of-charities.charitycommission.gov.uk/charity-search)

**Licence Holder 1 Details *(Complete which applies, including any acronyms Ltd/ PLC/ Sons etc.)***

**Title:** Mr / Mrs / Miss / Ms / other

**Individual Forename:**

**Individual Surname:**

**Individual Middle Name(s) (if any):**

**Company Name:**

**Company Trading Name:**

**Company Number:**

**Charity Name:**

**Charity Number:**

Is this a Limited Liability Partnership (LLP) **Yes / No**

*This is a legally registered partnership and information on which can be found on Companies House website.*

**Partnership Name:**

**Partner 1 Title:** Mr / Mrs / Miss / Ms / other

**Partner 1 Forename:**

**Partner 1 Surname:**

**Partner 1 Middle Name(s) (if any):**

**Licence Holder 1 Individual Address/ Registered Address as shown on Companies/ Charity Commissions Register**

|  |  |
| --- | --- |
| House Number / Building Name | |
| Address Line 1: |  |
| Address Line 2: | County: |
| Town/City: | Postcode: |

**Licence Holder 1 Correspondence/ Branch Address**

|  |  |
| --- | --- |
| House Number / Building Name | |
| Address Line 1: |  |
| Address Line 2: | County: |
| Town/City: | Postcode: |

**Licence Holder 1 Contact Details**

Telephone Number:

Work Telephone Number:

Mobile Number:

Email Address:

**Does the Licence Holder 1 have any of the following interests in the property? (Tick all that apply)**

|  |  |
| --- | --- |
| Owner / Freeholder |  |
| Leaseholder |  |
| A person having control of the HMO or house |  |

A person having control of a premises is generally someone who receives the rent of the premises, whether on his own account OR as agent or trustee of another person. There can therefore be more than one 'person having control' for any premises. For example, if the rent is collected by a managing agent and then passed on to the owner, both the agent and the owner may be the 'person having control'. In circumstances where the owner/freeholder has leased the property to another person or company, the leaseholder will become the person having control of the property.

**Licence Holder 1 Fit and Proper**

**Does the proposed licence holder 1 have any of the following?**

Any unspent convictions **Yes / No**

Court or tribunal findings in relation to unlawful discrimination **Yes / No**

Civil or criminal proceedings resulting in a judgement being made against them **Yes / No**

Enforcement notices or management orders under the Housing Act 2004 **Yes / No**

Refused or revoked licences under the Housing Act 2004 **Yes / No**

Breaches of codes of practice under the Housing act 2004 **Yes / No**

None of the above  **Yes / No**

Does the proposed licence holder named above have any unspent convictions in **Yes / No**

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?

Does the proposed licence holder named above have any other unspent convictions **Yes / No**

that may be relevant to the proposed licence holders and / or manager's fitness to

hold a licence and / or manage the HMO or house?

Has the proposed licence holder named above ever contravened any provision of **Yes / No**

any enactment relating to housing, public health, environmental health, health and

safety at work, planning, building or landlord and tenant law which led to civil or

criminal proceedings resulting in a judgement being made against them?

Does the proposed licence holder named above own or manage, or has owned or **Yes / No**

managed, any HMO or house which has been the subject of any appropriate

enforcement action described in section 5(2) of the Housing Act 2004?

E.g. Improvement notice, prohibition order or emergency works

Does the proposed licence holder named above own or manage, or has owned or **Yes / No**

managed, any HMO or house which has been the subject of an interim or final

management order under the Housing Act 2004?

Does the proposed licence holder named above own or manage, or have they owned **Yes / No**

or managed, any HMO or house for which a local housing authority has refused to

grant a licence under Part 2 or 3 of the Housing Act 2004, or has revoked a licence in consequence of the licence holder breaching the conditions of their licence?

Has the proposed licence holder named above acted otherwise than in accordance **Yes / No**

with any applicable code of practice approved under section 233 of the

Housing Act 2004?

Is the proposed licence holder an undischarged bankrupt? **Yes / No**

Does any proposed licence holder have any outstanding County Court judgements **Yes / No**

(CCJ) against them or any company they are associated with?

**Licence Holder 1 Associates Fit and Proper**

**Do any associates of the proposed licence holder have any of the following?**

Any unspent convictions **Yes / No**

Court or tribunal findings in relation to unlawful discrimination **Yes / No**

Civil or criminal proceedings resulting in a judgement being made against them **Yes / No**

Enforcement notices or management orders under the Housing Act 2004 **Yes / No**

Refused or revoked licences under the Housing Act 2004 **Yes / No**

Breaches of codes of practice under the Housing act 2004 **Yes / No**

None of the above  **Yes / No**

Does any associate of the proposed licence holder named above have any unspent **Yes / No**

convictions 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?

Does any associate of the proposed licence holder named above have any other **Yes / No**

unspent convictions that may be relevant to any associate of the proposed licence

holder’s and / or manager's fitness to hold a licence and / or manage the HMO or house?

Has any court or tribunal found against any associate of the proposed licence holder **Yes / No**

named above that they have practised unlawful discrimination on grounds of sex,

colour, race, ethnic or national origin or disability in, or in connection with, the carrying

on of any business?

Has any associate of the proposed licence holder named above ever contravened any **Yes / No**

provision of any enactment relating to housing, public health, environmental health,

health and safety at work, planning, building or landlord and tenant law which led to civil

or criminal proceedings resulting in a judgement being made against them?

Does any associate of the proposed licence holder named above own or manage, or **Yes / No**

has owned or managed, any HMO or house which has been the subject of any

appropriate enforcement action described in section 5(2) of the Housing Act 2004.

e.g. Improvement notice, prohibition order or emergency works.

Does any associate of the proposed licence holder named above own or manage, or **Yes / No**

has owned or managed, any HMO or house which has been the subject of an interim

or final management order under the Housing Act 2004?

Does any associate of the proposed licence holder named above own or manage, or **Yes / No**

they have owned or managed, any HMO or house for which a local housing authority

has refused to grant a licence under Part 2 or 3 of the Housing Act 2004, or has revoked

a licence in consequence of the licence holder breaching the conditions of their licence

Has any associate of the proposed licence holder named above acted otherwise **Yes / No**

than in accordance with any applicable code of practice approved under

section 233 of the Housing Act 2004.

**Section 6 – Proposed Licence Holder 2 Details**

The Licence Holder may be an individual, a company, charity or partnership. You can also have multiple licence holders, for example where it’s the same owners such as a husband and wife, but not a different entity such as an owner and manager.

The proposed Licence Holder should normally be the ‘person having control’ of the property.

The Licence Holder will be bound to the licence conditions and be legally responsible for the operation of the HMO or house to be licensed. They must have the power to:

* Let and evict tenants.
* Access all parts of the premises to the same extent as the owner (if a different person)
* Authorise any expenditure required to ensure the health and safety of the tenants and others.

Nottingham City Council will send e-mail and text alerts in relation to this application to include (but not limited to) reminders, alerts of changes and updates and to request additional information.

**Please be mindful that information, including the address of the Licence Holder and manager will be published on the public register.**

**If there are more than 2 partners in the partnership additional forms can be found at the end of the application.**

**Licence Holder Accreditation**

Please note: If there is more than one company director and if the company is to be the proposed Licence Holder whilst claiming DASH accreditation, the accredited fee will only be applicable if the individual who holds the DASH accreditation is fully accredited and listed as the Licence Holder. In addition, the property rental address for this application requires listing in your DASH Accreditation account.

**Is the Licence Holder 2 Accredited**

Not Accredited DASH Accredited Unipol / ANUK Accredited

**DASH Accreditation**

DASH Accredited Persons Name:

*(Not The Company Name)*

DASH Accreditation Number:

**Unipol/ ANUK**

Unipol/ ANUK Name *(as stated*

*on the website register):*

**You may need to ensure the following Licence Holder Declaration Form is completed:**

If the person completing this application is not also a proposed licence holder, the proposed licence holder(s) needs to complete the 'Licence Holder Declaration'. Each Licence Holder requires a Licence Holder Declaration form.

|  |  |
| --- | --- |
| **Licence Application Declaration – Proposed Licence Holder 2** | |
| **Property Address:** | |
| As part of any application for an HMO or Selective licence, the proposed licence holder(s), if a different person to the applicant, must read, complete this form with their application. **Note: if the licence holder and applicant are NOT the same person, then this declaration is required for each licence holder.** | |
| **DECLARATIONS (Tick to confirm)** | |
| ☐ | I confirm that I am 18 years or over. |
| ☐ | I declare that the information contained in this application is correct to the best of my knowledge. |
| ☐ | I declare that I have served a notice of this application on each person known to me, that are required to be informed that this application has been made. |
| ☐ | I confirm that I agree to pay the 2nd part of the licence fee, upon demand by the Nottingham City Council, if the applicant fails to do so in the period provided to them. The 1st part of the 2-part fee has already been paid by the Applicant (unless agreed otherwise). |
| ☐ | I can confirm that all future correspondence can be sent to me via the email address that was provided within this application and that this email inbox will be checked regularly. I also agree to receiving text message notifications. |
| ☐ | I agree to receive the licence and/or other relevant documents under Parts 2 and 3 of the Housing Act 2004, transmitted by electronic means (via email) in accordance with s247 of the Act. |
| ☐ | 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 reckless as to whether it is false or misleading. |
| Name of proposed licence holder:  Name & role (if signing on behalf of a company):  .  Signed:  Dated: | |
| ☐ | **The Council may send information on any changes to legislation, training opportunities other items of interest and occasionally relevant information from other selected partners e.g. accreditation providers and landlord organisations. We will not release your information to these other partners unless required by law. Please tick to confirm you would like to receive this information (optional).** |

\*For further information on the Housing Act 2004, please visit: [www.legislation.gov.uk](http://www.legislation.gov.uk/)

**Type of Licence Holder 2 (Please tick the box that applies)**

Individual Company Charity Partnership

**Company or Charity Name as stated on the Companies House / Charities Commission Registers**

The link below will direct you the Companies House Register where you will find your company details:

[**https://www.gov.uk/get-information-about-a-company**](https://www.gov.uk/get-information-about-a-company)

[**https://register-of-charities.charitycommission.gov.uk/charity-search**](https://register-of-charities.charitycommission.gov.uk/charity-search)

**Licence Holder 2 Details *(Complete which applies, including any acronyms Ltd/ PLC/ Sons etc...)***

**Title:** Mr / Mrs / Miss / Ms / other

**Individual Forename:**

**Individual Surname:**

**Individual Middle Name(s) (if any):**

**Company Name:**

**Company Trading Name:**

**Company Number:**

**Charity Name:**

**Charity Number:**

Is this a Limited Liability Partnership (LLP) **Yes / No**

*This is a legally registered partnership and information on which can be found on Companies House website.*

**Partnership Name:**

**Partner 2 Title:** Mr / Mrs / Miss / Ms / other

**Partner 2 Forename:**

**Partner 2 Surname:**

**Partner 2 Middle Name(s) (if any):**

**Licence Holder 2 Individual Address / Registered Address as shown on Companies / Charity Commissions Register**

|  |  |
| --- | --- |
| House Number / Building Name | |
| Address Line 1: |  |
| Address Line 2: | County: |
| Town/City: | Postcode: |

**Licence Holder 2 Correspondence/ Branch Address**

|  |  |
| --- | --- |
| House Number / Building Name | |
| Address Line 1: |  |
| Address Line 2: | County: |
| Town/City: | Postcode: |

**Licence Holder 2 Contact Details**

Telephone Number:

Work Telephone Number:

Mobile Number:

Email Address:

**Does the Licence Holder 2 have any of the following interests in the property? (Tick all that apply)**

|  |  |
| --- | --- |
| Owner / Freeholder |  |
| Leaseholder |  |
| A person having control of the HMO or house |  |

A person having control of a premises is generally someone who receives the rent of the premises, whether on his own account OR as agent or trustee of another person. There can therefore be more than one 'person having control' for any premises. For example, if the rent is collected by a managing agent and then passed on to the owner, both the agent and the owner may be the 'person having control'. In circumstances where the owner/freeholder has leased the property to another person or company, the leaseholder will become the person having control of the property.

**Licence Holder 2 Fit and Proper**

**Does the proposed licence holder 2 have any of the following?**

Any unspent convictions **Yes / No**

Court or tribunal findings in relation to unlawful discrimination **Yes / No**

Civil or criminal proceedings resulting in a judgement being made against them **Yes / No**

Enforcement notices or management orders under the Housing Act 2004 **Yes / No**

Refused or revoked licences under the Housing Act 2004 **Yes / No**

Breaches of codes of practice under the Housing act 2004 **Yes / No**

None of the above  **Yes / No**

Does the proposed licence holder named above have any unspent convictions in **Yes / No**

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?

Does the proposed licence holder named above have any other unspent convictions **Yes / No**

that may be relevant to the proposed licence holders and / or manager's fitness to

hold a licence and / or manage the HMO or house?

Has the proposed licence holder named above ever contravened any provision of **Yes / No**

any enactment relating to housing, public health, environmental health, health and

safety at work, planning, building or landlord and tenant law which led to civil or

criminal proceedings resulting in a judgement being made against them?

Does the proposed licence holder named above own or manage, or has owned or **Yes / No**

managed, any HMO or house which has been the subject of any appropriate

enforcement action described in section 5(2) of the Housing Act 2004?

E.g. Improvement notice, prohibition order or emergency works.

Does the proposed licence holder named above own or manage, or has owned or **Yes / No**

managed, any HMO or house which has been the subject of an interim or final

management order under the Housing Act 2004?

Does the proposed licence holder named above own or manage, or have they owned **Yes / No**

or managed, any HMO or house for which a local housing authority has refused to

grant a licence under Part 2 or 3 of the Housing Act 2004, or has revoked a licence in consequence of the licence holder breaching the conditions of their licence?

Has the proposed licence holder named above acted otherwise than in accordance **Yes / No**

with any applicable code of practice approved under section 233 of the

Housing Act 2004?

Is the proposed licence holder an undischarged bankrupt? **Yes / No**

Does any proposed licence holder have any outstanding County Court judgements **Yes / No**

(CCJ) against them or any company they are associated with?

**Licence Holder 2 Associates Fit and Proper**

**Do any associates of the proposed licence holder 2 have any of the following?**

Any unspent convictions **Yes / No**

Court or tribunal findings in relation to unlawful discrimination **Yes / No**

Civil or criminal proceedings resulting in a judgement being made against them **Yes / No**

Enforcement notices or management orders under the Housing Act 2004 **Yes / No**

Refused or revoked licences under the Housing Act 2004 **Yes / No**

Breaches of codes of practice under the Housing act 2004 **Yes / No**

None of the above  **Yes / No**

Does any associate of the proposed licence holder named above have any unspent **Yes / No**

convictions 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?

Does any associate of the proposed licence holder named above have any other **Yes / No**

unspent convictions that may be relevant to any associate of the proposed licence

holder’s and / or manager's fitness to hold a licence and / or manage the HMO or house?

Has any court or tribunal found against any associate of the proposed licence holder **Yes / No**

named above that they have practised unlawful discrimination on grounds of sex,

colour, race, ethnic or national origin or disability in, or in connection with, the carrying

on of any business?

Has any associate of the proposed licence holder named above ever contravened any **Yes / No**

provision of any enactment relating to housing, public health, environmental health,

health and safety at work, planning, building or landlord and tenant law which led to civil

or criminal proceedings resulting in a judgement being made against them?

Does any associate of the proposed licence holder named above own or manage, or **Yes / No**

has owned or managed, any HMO or house which has been the subject of any

appropriate enforcement action described in section 5(2) of the Housing Act 2004.

e.g. Improvement notice, prohibition order or emergency works.

Does any associate of the proposed licence holder named above own or manage, or **Yes / No**

has owned or managed, any HMO or house which has been the subject of an interim

or final management order under the Housing Act 2004?

Does any associate of the proposed licence holder named above own or manage, or **Yes / No**

they have owned or managed, any HMO or house for which a local housing authority

has refused to grant a licence under Part 2 or 3 of the Housing Act 2004, or has revoked

a licence in consequence of the licence holder breaching the conditions of their licence.

Has any associate of the proposed licence holder named above acted otherwise **Yes / No**

than in accordance with any applicable code of practice approved under

section 233 of the Housing Act 2004

**Section 7 – Proposed Manager 1 Details**

The Manager may be an individual, a company, charity or partnership. You can also have multiple Managers, for example a husband and wife.

The proposed Manager should normally be the ‘person having control’ of the property.

The Licence Holder will be bound to the licence conditions and be legally responsible for the operation of the HMO or house to be licensed. They must have the power to:

* Let and evict tenants.
* Access all parts of the premises to the same extent as the owner (if a different person)
* Authorise any expenditure required to ensure the health and safety of the tenants and others.

Nottingham City Council will send e-mail and text alerts in relation to this application to include (but not limited to) reminders, alerts of changes and updates and to request additional information.

**Please be mindful that information, including the address of the Licence Holder and manager will be published on the public register.**

**If there are more than 2 partners in the partnership additional forms can be found at the end of the application.**

**Type of Manager 1 (Please tick the box that applies)**

Individual Company Charity Partnership

**Company or Charity Name as stated on the Companies House / Charities Commission Registers**

The link below will direct you the Companies House Register where you will find your company details:

[**https://www.gov.uk/get-information-about-a-company**](https://www.gov.uk/get-information-about-a-company)

[**https://register-of-charities.charitycommission.gov.uk/charity-search**](https://register-of-charities.charitycommission.gov.uk/charity-search)

**Manager 1 Details *(Complete which applies, including any acronyms Ltd/ PLC/ Sons etc...)***

**Title:** Mr / Mrs / Miss / Ms / other

**Individual Forename:**

**Individual Surname:**

**Individual Middle Name(s) (if any):**

**Company Name:**

**Company Trading Name:**

**Company Number:**

**Charity Name:**

**Charity Number:**

Is this a Limited Liability Partnership (LLP) **Yes / No**

*This is a legally registered partnership and information on which can be found on Companies House website.*

**Partnership Name:**

**Partner 1 Title:** Mr / Mrs / Miss / Ms / other

**Partner 1 Forename:**

**Partner 1 Surname:**

**Partner 1 Middle Name(s) (if any):**

**Manager 1 Individual Address / Registered Address as shown on Companies / Charity Commissions Register**

|  |  |
| --- | --- |
| House Number / Building Name | |
| Address Line 1: |  |
| Address Line 2: | County: |
| Town/City: | Postcode: |

**Manager 1 Correspondence/ Branch Address**

|  |  |
| --- | --- |
| House Number / Building Name | |
| Address Line 1: |  |
| Address Line 2: | County: |
| Town/City: | Postcode: |

**Manager 1 Contact Details**

Telephone Number:

Work Telephone Number:

Mobile Number:

Email Address:

**Does the Manager 1 have any of the following interests in the property? (Tick all that apply)**

|  |  |
| --- | --- |
| Owner / Freeholder |  |
| Leaseholder |  |
| A person having control of the HMO or house |  |

A person having control of a premises is generally someone who receives the rent of the premises, whether on his own account OR as agent or trustee of another person. There can therefore be more than one 'person having control' for any premises. For example, if the rent is collected by a managing agent and then passed on to the owner, both the agent and the owner may be the 'person having control'. In circumstances where the owner/freeholder has leased the property to another person or company, the leaseholder will become the person having control of the property.

**Manager 1 Fit and Proper**

**Does the proposed Manager 1 have any of the following?**

Any unspent convictions **Yes / No**

Court or tribunal findings in relation to unlawful discrimination **Yes / No**

Civil or criminal proceedings resulting in a judgement being made against them **Yes / No**

Enforcement notices or management orders under the Housing Act 2004 **Yes / No**

Refused or revoked licences under the Housing Act 2004 **Yes / No**

Breaches of codes of practice under the Housing act 2004 **Yes / No**

None of the above  **Yes / No**

Does the proposed manager named above have any unspent convictions in respect **Yes / No**

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?

Does the proposed manager named above have any other unspent convictions that **Yes / No**

may be relevant to the proposed manager’s and / or manager's fitness to hold a

licence and / or manage the HMO or house?

Has any court or tribunal found against the proposed manager named above that they **Yes / No**

have practised unlawful discrimination on grounds of sex, colour, race, ethnic or

national origin or disability in, or in connection with, the carrying on of any business?

Has the proposed manager named above ever contravened any provision of any **Yes / No**

enactment relating to housing, public health, environmental health, health and safety

at work, planning, building or landlord and tenant law which led to civil or criminal

proceedings resulting in a judgement being made against them?

Does the proposed manager named above own or manage, or has owned or managed, **Yes / No**

any HMO or house which has been the subject of any appropriate enforcement action

described in section 5(2) of the Housing Act 2004. e.g. Improvement notice, prohibition

order or emergency works

Does the proposed manager named above own or manage, or has owned or managed, **Yes / No**

any HMO or house which has been the subject of an interim or final management order

under the Housing Act 2004?

Does the proposed manager named above own or manage, or have they owned or **Yes / No**

managed, any HMO or house for which a local housing authority has refused to grant a

licence under Part 2 or 3 of the Housing Act 2004, or has revoked a licence in

consequence of the manager breaching the conditions of their licence

Has the proposed manager named above acted otherwise than in accordance with any **Yes / No**

applicable code of practice approved under section 233 of the Housing Act 2004?

Is the proposed manager an undischarged bankrupt? **Yes / No**

Does any proposed manager have any outstanding County Court judgements (CCJ) **Yes / No**

against them or any company they are associated with?

**Manger 1 Associates Fit and Proper**

**Do any associates of the proposed Manager 1 have any of the following?**

Any unspent convictions **Yes / No**

Court or tribunal findings in relation to unlawful discrimination **Yes / No**

Civil or criminal proceedings resulting in a judgement being made against them **Yes / No**

Enforcement notices or management orders under the Housing Act 2004 **Yes / No**

Refused or revoked licences under the Housing Act 2004 **Yes / No**

Breaches of codes of practice under the Housing act 2004 **Yes / No**

None of the above  **Yes / No**

Does any associate of the proposed manager named above have any unspent **Yes / No**

convictions 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?

Does any associate of the proposed manager named above have any other unspent **Yes / No**

convictions that may be relevant to any associate of the proposed manager’s and /

or manager's fitness to hold a licence and / or manage the HMO or house?

Has any court or tribunal found against any associate of the proposed manager named **Yes / No**

above that they have practised unlawful discrimination on grounds of sex, colour, race,

ethnic or national origin or disability in, or in connection with, the carrying on of any

business?

Has any associate of the proposed manager named above ever contravened any **Yes / No**

provision of any enactment relating to housing, public health, environmental health,

health and safety at work, planning, building or landlord and tenant law which led to

civil or criminal proceedings resulting in a judgement being made against them?

Does any associate of the proposed manager named above own or manage, or has **Yes / No**

owned or managed, any HMO or house which has been the subject of any appropriate enforcement action described in section 5(2) of the Housing Act 2004. E.g. Improvement

notice, prohibition order or emergency works.

Does any associate of the proposed manager named above own or manage, or has **Yes / No**

owned or managed, any HMO or house which has been the subject of an interim or

final management order under the Housing Act 2004?

Does any associate of the proposed manager named above own or manage, or they **Yes / No**

have owned or managed, any HMO or house for which a local housing authority has

refused to grant a licence under Part 2 or 3 of the Housing Act 2004, or has revoked

a licence in consequence of the manager breaching the conditions of their licence

Has any associate of the proposed manager named above acted otherwise than in **Yes / No**

accordance with any applicable code of practice approved under section 233 of the

Housing Act 2004

**Section 8 – Proposed Manager 2 Details**

**Type of Manager 2 (Please tick the box that applies)**

Individual Company Charity Partnership

**Company or Charity Name as stated on the Companies House / Charities Commission Registers**

The link below will direct you the Companies House Register where you will find your company details:

**https://www.gov.uk/get-information-about-a-company**

**https://register-of-charities.charitycommission.gov.uk/charity-search**

**Manager 2 Details *(Complete, which applies, including any acronyms Ltd/ PLC/ Sons etc...)***

**Title:** Mr / Mrs / Miss / Ms / other

**Individual Forename:**

**Individual Surname:**

**Individual Middle Name(s) (if any):**

**Company Name:**

**Company Trading Name:**

**Company Number:**

**Charity Name:**

**Charity Number:**

Is this a Limited Liability Partnership (LLP) **Yes / No**

*This is a legally registered partnership and information on which can be found on Companies House website.*

**Partnership Name:**

**Partner 2 Title:** Mr / Mrs / Miss / Ms / other

**Partner 2 Forename:**

**Partner 2 Surname:**

**Partner 2 Middle Name(s) (if any):**

**Manager 2 Individual Address / Registered Address as shown on Companies / Charity Commissions Register**

|  |  |
| --- | --- |
| House Number / Building Name | |
| Address Line 1: |  |
| Address Line 2: | County: |
| Town/City: | Postcode: |

**Manager 2 Correspondence/ Branch Address**

|  |  |
| --- | --- |
| House Number / Building Name | |
| Address Line 1: |  |
| Address Line 2: | County: |
| Town/City: | Postcode: |

**Manager 2 Contact Details**

Telephone Number:

Work Telephone Number:

Mobile Number:

Email Address:

**Does the Manager 2 have any of the following interests in the property? (Tick all that apply)**

|  |  |
| --- | --- |
| Owner / Freeholder |  |
| Leaseholder |  |
| A person having control of the HMO or house |  |

A person having control of a premises is generally someone who receives the rent of the premises, whether on his own account OR as agent or trustee of another person. There can therefore be more than one 'person having control' for any premises. For example, if the rent is collected by a managing agent and then passed on to the owner, both the agent and the owner may be the 'person having control'. In circumstances where the owner/freeholder has leased the property to another person or company, the leaseholder will become the person having control of the property.

**Manager 2 Fit and Proper**

**Does the proposed Manager 2 have any of the following?**

Any unspent convictions **Yes / No**

Court or tribunal findings in relation to unlawful discrimination **Yes / No**

Civil or criminal proceedings resulting in a judgement being made against them **Yes / No**

Enforcement notices or management orders under the Housing Act 2004 **Yes / No**

Refused or revoked licences under the Housing Act 2004 **Yes / No**

Breaches of codes of practice under the Housing act 2004 **Yes / No**

None of the above  **Yes / No**

Does the proposed manager named above have any unspent convictions in respect **Yes / No**

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?

Does the proposed manager named above have any other unspent convictions that **Yes / No**

may be relevant to the proposed manager’s and / or manager's fitness to hold a

licence and / or manage the HMO or house?

Has any court or tribunal found against the proposed manager named above that they **Yes / No**

have practised unlawful discrimination on grounds of sex, colour, race, ethnic or

national origin or disability in, or in connection with, the carrying on of any business?

Has the proposed manager named above ever contravened any provision of any **Yes / No**

enactment relating to housing, public health, environmental health, health and safety

at work, planning, building or landlord and tenant law which led to civil or criminal

proceedings resulting in a judgement being made against them?

Does the proposed manager named above own or manage, or has owned or managed, **Yes / No**

any HMO or house which has been the subject of any appropriate enforcement action

described in section 5(2) of the Housing Act 2004. E.g. Improvement notice, prohibition

order or emergency works

Does the proposed manager named above own or manage, or has owned or managed, **Yes / No**

any HMO or house which has been the subject of an interim or final management order

under the Housing Act 2004?

Does the proposed manager named above own or manage, or have they owned or **Yes / No**

managed, any HMO or house for which a local housing authority has refused to grant a

licence under Part 2 or 3 of the Housing Act 2004, or has revoked a licence in

consequence of the manager breaching the conditions of their licence

Has the proposed manager named above acted otherwise than in accordance with any **Yes / No**

applicable code of practice approved under section 233 of the Housing Act 2004?

Is the proposed manager an undischarged bankrupt? **Yes / No**

Does any proposed manager have any outstanding County Court judgements (CCJ) **Yes / No**

against them or any company they are associated with?

**Manger 2 Associates Fit and Proper**

**Do any associates of the proposed Manager 2 have any of the following?**

Any unspent convictions **Yes / No**

Court or tribunal findings in relation to unlawful discrimination **Yes / No**

Civil or criminal proceedings resulting in a judgement being made against them **Yes / No**

Enforcement notices or management orders under the Housing Act 2004 **Yes / No**

Refused or revoked licences under the Housing Act 2004 **Yes / No**

Breaches of codes of practice under the Housing act 2004 **Yes / No**

None of the above  **Yes / No**

Does any associate of the proposed manager named above have any unspent **Yes / No**

convictions 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?

Does any associate of the proposed manager named above have any other unspent **Yes / No**

convictions that may be relevant to any associate of the proposed manager’s and /

or manager's fitness to hold a licence and / or manage the HMO or house?

Has any court or tribunal found against any associate of the proposed manager named **Yes / No**

above that they have practised unlawful discrimination on grounds of sex, colour, race,

ethnic or national origin or disability in, or in connection with, the carrying on of any

business?

Has any associate of the proposed manager named above ever contravened any **Yes / No**

provision of any enactment relating to housing, public health, environmental health,

health and safety at work, planning, building or landlord and tenant law which led to

civil or criminal proceedings resulting in a judgement being made against them?

Does any associate of the proposed manager named above own or manage, or has **Yes / No**

owned or managed, any HMO or house which has been the subject of any appropriate enforcement action described in section 5(2) of the Housing Act 2004. E.g. Improvement

notice, prohibition order or emergency works.

Does any associate of the proposed manager named above own or manage, or has **Yes / No**

owned or managed, any HMO or house which has been the subject of an interim or

final management order under the Housing Act 2004?

Does any associate of the proposed manager named above own or manage, or they **Yes / No**

have owned or managed, any HMO or house for which a local housing authority has

refused to grant a licence under Part 2 or 3 of the Housing Act 2004, or has revoked

a licence in consequence of the manager breaching the conditions of their licence.

Has any associate of the proposed manager named above acted otherwise than in **Yes / No**

accordance with any applicable code of practice approved under section 233 of the

Housing Act 2004.

**Section 9 – Mortgage Details**

**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 be notified are:**

* any mortgagee of the property (i.e. Mortgage company) 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 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 they will be bound by any conditions in a licence if it is granted.

A relevant person may also include business or company loans which are listed on land registry. If you are unsure who the relevant person is please consider checking the latest version of the land registry. There may be more than one land registry per property, particularly if the property is a flat. Please note the Council does not administer land registry, please contact them directly if you have any queries about the results. <https://www.gov.uk/search-property-information-land-registry>

You must notify 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)
* whether this is an application for an HMO licence under Part 2 or for a house licence under Part 3 (Selective licensing of other properties) 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 and the date the application will be submitted.

**You must also declare all persons with an interest in the property below.  
All those who appear as a 'proprietor' on the Land Registry must be declared. This is freeholders, leaseholders and mortgage companies.  
This should also include anyone else who will be involved in the property or bound to the licence conditions, but not mentioned in the application already.**

**Mortgage Details**

Do you have a mortgage on the property? **Yes / No**

Mortgagees show on the Land Registry as a proprietor. NOTE: if they have been paid off and no money is outstanding, they should be removed from the Land Registry. It is your responsibility to update the land registry details.

**Mortgage Company or Finance Company Name as stated on the Companies House registers *(including any acronyms Ltd/ PLC/ Sons etc...)***

**Company Name:**

**Company Trading Name:**

**Company Trading Name:**

**Mortgage Company or Finance Company Registered Address**

As shown on the Companies House register.

|  |  |
| --- | --- |
| House Number / Building Name | |
| Address Line 1: |  |
| Address Line 2: | County: |
| Town/City: | Postcode: |

**Mortgage Company or Finance Company Contact Details**

Telephone Number:

Email Address:

Date the mortgage provider was notified that this application

was made.

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**Section 10 - Relevant Person 1 Details**

**Individual or Company Relevant Person 1**

***(Complete which applies, including any acronyms Ltd/ PLC/ Sons etc...)***

**Title:** Mr / Mrs / Miss / Ms / other

**Individual Forename:**

**Individual Surname:**

**Individual Middle Name(s) (if any):**

**Company Name:**

**Company Trading Name:**

**Company Trading Name:**

**Individual Address or Company Registered Address**

|  |  |
| --- | --- |
| House Number / Building Name | |
| Address Line 1: |  |
| Address Line 2: | County: |
| Town/City: | Postcode: |

**Individual or Company Contact Details**

Telephone Number:

Work Telephone Number:

Mobile Number:

Email Address:

**Does the Relevant Person 1 have any of the following interests in the property?**

**(Tick all that apply)**

|  |  |
| --- | --- |
| Owner / Freeholder |  |
| Leaseholder |  |
| Other (Please detail in the box below) |  |

**Section 11 - Relevant Persons 2 Details**

**Individual or Company Relevant Person 2**

***(Complete which applies, including any acronyms Ltd/ PLC/ Sons etc...)***

**Title:** Mr / Mrs / Miss / Ms / other

**Individual Forename:**

**Individual Surname:**

**Individual Middle Name(s) (if any):**

**Company Name:**

**Company Trading Name:**

**Company Trading Name:**

**Individual Address or Company Registered Address**

|  |  |
| --- | --- |
| House Number / Building Name | |
| Address Line 1: |  |
| Address Line 2: | County: |
| Town/City: | Postcode: |

**Individual or Company Contact Details**

Telephone Number:

Work Telephone Number:

Mobile Number:

Email Address:

**Does the Relevant Person 2 have any of the following interests in the property?**

**(Tick all that apply)**

|  |  |
| --- | --- |
| Owner / Freeholder |  |
| Leaseholder |  |
| Other (Please detail in the box below) |  |

Does any person with an estate or interest in the property, or any person associated **Yes / No**

with those persons, have a banning order under section 16 of the Housing and

Planning Act 2016, in force against them?

Relationship of the banned person to the property

Date of the banning order

Date of the banning order

Local Authorities

**Section 12 – Management Arrangements**

**I can confirm that the proposed licence holder(s) and manager(s) meet the following criteria:**

Are the most appropriate persons to be so **Yes / No**

Have a sufficient level of competency for this type of property **Yes / No**

They have a suitable level of funding and management structure in place **Yes / No**

to satisfactorily manage this property

**Section 13 – Other Properties**

Do any of the proposed licence holders have any other properties licensed with this **Yes / No**

or any other authorities?

Please list the Local Authorities that the other properties are licensed with:

|  |  |
| --- | --- |
|  | |
|  |  |
|  | |
|  |  |
|  | |
|  |  |
|  |  |
|  | |
|  |  |

**Section 14 – Declaration (Please tick each box)**

I confirm that I am 18 years or over.

I declare that the information contained in this application is correct to the best of my

knowledge.

I have taken measures to ensure that I have gained the appropriate information in order to

answer the questions within this application.

I declare that I have served a notice of this application on the persons listed on the relevant persons tab who are the only persons known to me that are required to be informed that I

have made this application.

I have read and understood the data sharing agreement.

I can confirm that all future correspondence will be sent to me via the email address that I

have provided within this application form and that this email inbox will be checked

regularly. I also agree to receiving text message notifications.

I understand that I am required to upload information in relation to this property and licence application directly to this website or provide it by email and that it will not be accepted via

post and Nottingham City Council are not responsible for any information sent to us in any

other form than digitally via the online portal or by email.

By providing email addresses I am indicating my willingness/the willingness of the person

who’s email address is given to receive the licence and/or other relevant documents under

Parts 1 and 4 of the Housing Act 2004 transmitted by electronic means (via email) in

accordance with s247 of the Act. Where I am indicating the consent of a person other than

myself, that I have the specific consent of that person to do so and to act as their agent in providing the information to the Council.

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 reckless as to

whether it is false or misleading.

I declare that the house to which this application relates is subject a licence, under Part 3 (Selective) of the Housing Act 2004, at the time of this application being made

None of the information described in paragraph 2(c) to (g) of the Act\* and previously

submitted to the authority has materially changed since the last licence was granted for this property.

[**http://www.legislation.gov.uk/uksi/2006/373/contents/made**](http://www.legislation.gov.uk/uksi/2006/373/contents/made)