

# Application for Licence for a House in Multiple Occupation



**Forest Heath**  
District Council

## **Please use the accompanying notes when completing this form.**

If you have more than one house in multiple occupation you will need to complete a separate application form for each property.

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

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

Type of application (please tick appropriate box):

New Licence       Renewal of Licence

Address of property to be licensed:

	Postcode

Is the applicant the proposed licence holder?       Yes       No

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

### **PART 1. APPLICANT DETAILS - see note 1**

Surname	First name(s)
<input type="text"/>	<input type="text"/>

Address	
<input type="text"/>	Postcode

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

Mobile	Fax No.
<input type="text"/>	<input type="text"/>

Email	Date of birth
<input type="text"/>	<input type="text"/>

What is your interest in the property?

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

**Please go to Part 2**

**PART 2. PROPOSED LICENCE HOLDER DETAILS – see note 2**

Type of proposed licence holder (please tick the appropriate box)

Individual    Company    Partnership    Trustee    Charity

Other (please specify)

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

Company Number

Address  
  
 Postcode

Telephone numbers: Home

Work

Mobile

Fax No.

Email

Date of birth

Name of company secretary (if applicable)

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

**Please go to Part 3**

**PART 3. MANAGER DETAILS – see note 3**

Has an agent been employed to manage the property?    Yes   **Please go to 3.2**  
 No   **Please go to 3.1**

**3.1** If **no**, please provide the name, address and telephone number of the person who is responsible for the management of the property.

Name      Telephone number  

Address  
  
 Postcode

**3.2** If **yes**, is the manager (please tick the appropriate box)

Individual    Company    Partnership    Trustee

Other (please specify)

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

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

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

Telephone numbers: Home

Work

Mobile

Fax No.

Email

Date of birth

Is the manager a member of a regulated body?

Yes

No

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

**Please go to Part 4**

**PART 4. OWNERSHIP DETAILS OF THE PROPERTY TO BE LICENSED –see note 4**

Please provide the details of ownership and all others with a legal interest in the property to be licensed.

**4.1** Name of freeholder 1

Address of freeholder 1

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

Email

Telephone

Name of freeholder 2

Address of freeholder 2

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

Email

Telephone

**4.2** Name of mortgagee e.g. bank, building society or other who has a loan secured against the property.

Address of mortgagee(s)

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

Email

Telephone

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

Address of leaseholder(s) (a)

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

Email

Telephone

Address of leaseholder(s) (b)

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

Email

Telephone

**4.4** Name of person who collects the rent

Address of person who collects the rent

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

Email

Telephone

**4.5** Name of person who receives the rent

Address of person who receives the rent

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

Email

Telephone

**4.6** Name of any other person who may be bound by a condition of the proposed licence and who is not referred to in Parts 1, 2 and 3 of the form:

Name

Address of person bound by a condition

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

Email

Telephone

**Please go to Part 5**

**PART 5. OCCUPIER INFORMATION –see note 5**

Please include all occupiers, including children and babies occupying the letting

- 5.1** How many individuals currently live at the property?
- 5.1.1** What is the maximum number of individuals that can occupy the property?
- 5.2** How many households currently live in the property?
- 5.2.1** What is the maximum number of households that can occupy the property?
- 5.3** How many separate lettings are available in the property?
- 5.4** Are any of the people listed in Parts 1,2 and 3 of the form living in the house? YES/NO

If **yes**, please state their names:

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

**Please go to Part 6**

**PART 6. PROPERTY INFORMATION – see note 6**

**6.1** When was the property built approximately (please tick appropriate box)?

- Before 1919                       1919 to 1944                       1945 to 1964  
 1965 to 1980                       After 1980

**6.2** Description of the property (please tick appropriate box)

- detached                       semi-detached                       terraced                       end of terrace  
 purpose built                       mixed residential and                       house converted into self-contained flats  
                    block of flats                      commercial  
 other (please specify)

**6.3** Description of occupation (please tick appropriate box)

- shared house     shared flat     bedsits with shared facilities
- a mix of self-contained units and shared accommodation
- other (please specify)


**6.4** Please tick all of the floors the property has:

- basement storage     basement residential     basement commercial
- ground floor     first floor     second floor
- third floor     fourth floor (and above)

**6.5** How many habitable rooms are there in the property?

**Please go to Part 7.**

**PART 7. AMENITIES – see note 7**

**7.1** Please specify how many lettings have exclusive use of a bath and/or shower?


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

Baths     Showers

**7.3** Please specify how many lettings have exclusive use of a WC?


**7.4** How many shared WCs are there in the property?

**7.5** How many shared WCs are in a separate compartment to the bathroom?

**7.6** Please specify how many lettings have the exclusive use of a wash hand basin?

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

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

**7.9** How many lettings have exclusive use of a set of kitchen facilities?  
(please specify)

**7.10** How many sinks are there in the property?

**Please go to Part 8**

**PART 8. FIRE SAFETY – see note 8**

- 8.1** Does the property have a system of fire detection?  Yes  No  
If **yes**, does the system include:
- a fire alarm control panel  Yes  No
  - heat detectors in the kitchens  Yes  No
  - mains wired smoke detectors in rooms  Yes  No
  - mains wired smoke detectors in common parts  Yes  No
  - battery powered smoke detectors in common parts only  Yes  No
  - sounders/alarms on all levels  Yes  No
  - call points in the communal areas  Yes  No

**8.2** Does the property have an emergency lighting system?  Yes  No

**8.3** Are the doors that open onto the escape route capable of 30 minutes fire resistance?  Yes  No  
If **yes**, are they fitted with self-closures?  Yes  No

**8.4** Is the following fire safety equipment provided?

- fire blankets in all kitchens?  Yes  No
- fire extinguishers?  Yes  No

If **yes**, how many and where are they located?


**8.5** Does each tenant have clear written instructions on what to do in the event of a fire?  Yes  No

**8.6** Are the tenants provided with upholstered furniture?  Yes  No  
If **yes**, does it all comply with the Furnishings (Fire Safety) Amendment Regulations 1988 (as amended)?  Yes  No

**Please go to Part 9**

**PART 9 PROPERTY MANAGEMENT – see note 9**

**9.1** Is there, displayed in a suitable position within the property, a notice giving the name, address and telephone number of the person managing the house?  Yes  No

9.2 Are there gas appliances in the house? Yes No

**If yes, please provide a copy of the latest gas safety certificate**

9.3 Is there a programme in place for general maintenance of the property? Yes No

Does this include:

Structural repair	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Amenities	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Equipment	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Furniture	<input type="checkbox"/> Yes	<input type="checkbox"/> No

9.4 Are there adequate financial arrangements in place to allow for repair works to be carried out at the property? Yes No

9.5 Are arrangements in place for the regular cleaning of the common parts? Yes No

If yes, how often are the common parts cleaned?

9.6 Are all portable electrical appliances you provide in safe and serviceable working condition?

Yes No

9.7 Has a competent person inspected the fixed electrical installation within the last 5 years? Yes No

**If yes, please provide a copy of the latest certificate; if no, please have an inspection carried out and submit a copy of the report.**

9.8 What form of heating does the property have?

**Please go to Part 10**

**PART 10 RELEVANT INFORMATION –see note 10**

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

Relevant issues include:

- i) Criminal offences involving:  
Fraud, Dishonesty, Violence, Drugs, Schedule 3 of the Sexual Offences Act 2003.
- ii) Practiced unlawful discrimination on grounds of sex, colour, race, ethnic or national origins or disability in connection with a business.



- iii) Contravened any provision of housing or landlord & tenant law.  
These include but are not limited to:
  - a) A Control Order under the Housing Act 1985.
  - b) Proceedings by a local authority
  - c) The local authority carrying out Works in Default
  - d) A Management Order under the Housing Act 2004.
  - e) Harassment or illegal eviction.
  
- iv) Any criminal offence or subject to any other proceedings brought by a local authority or other Regulatory Body (for example breaches of the Environmental Protection Act 1990, planning control or compulsory purchase proceedings or fire safety requirements)?

<b>Name</b>	<b>Date</b>	<b>Court</b>	<b>Offence</b>	<b>Sentence</b>

**10.2** Has any person named in Parts 1, 2, 3 and/or 4 of this form previously held or do they currently hold a licence for another House in Multiple Occupation? Yes No

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

Other Licences in Forest Heath:

Postcode

Postcode

Other Licences in other local authorities

Postcode

Postcode

**10.3** Has any other person named in Parts 1, 2, 3 and/or 4 of this form ever applied for and been refused a house in multiple occupation licence? Yes No

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

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When was it refused?

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**10.4** Has any person named in Parts 1, 2, 3 and/or 4 of this form ever breached any condition of a licence issued under Parts 2 and/or 3 of the Housing Act 2004? Yes No

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


**Please go to Part 11**

**PART 11 ADDITIONAL INFORMATION – see note 11**

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

Yes No

If **yes**, please indicate which:

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**11.2** Is the proposed licence holder an accredited landlord?

Yes No

If **yes**, please indicate which accrediting body:

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**11.3** Please list in the space below any training course you have undertaken or conferences attended, in the last three years, which you feel make you a better landlord:

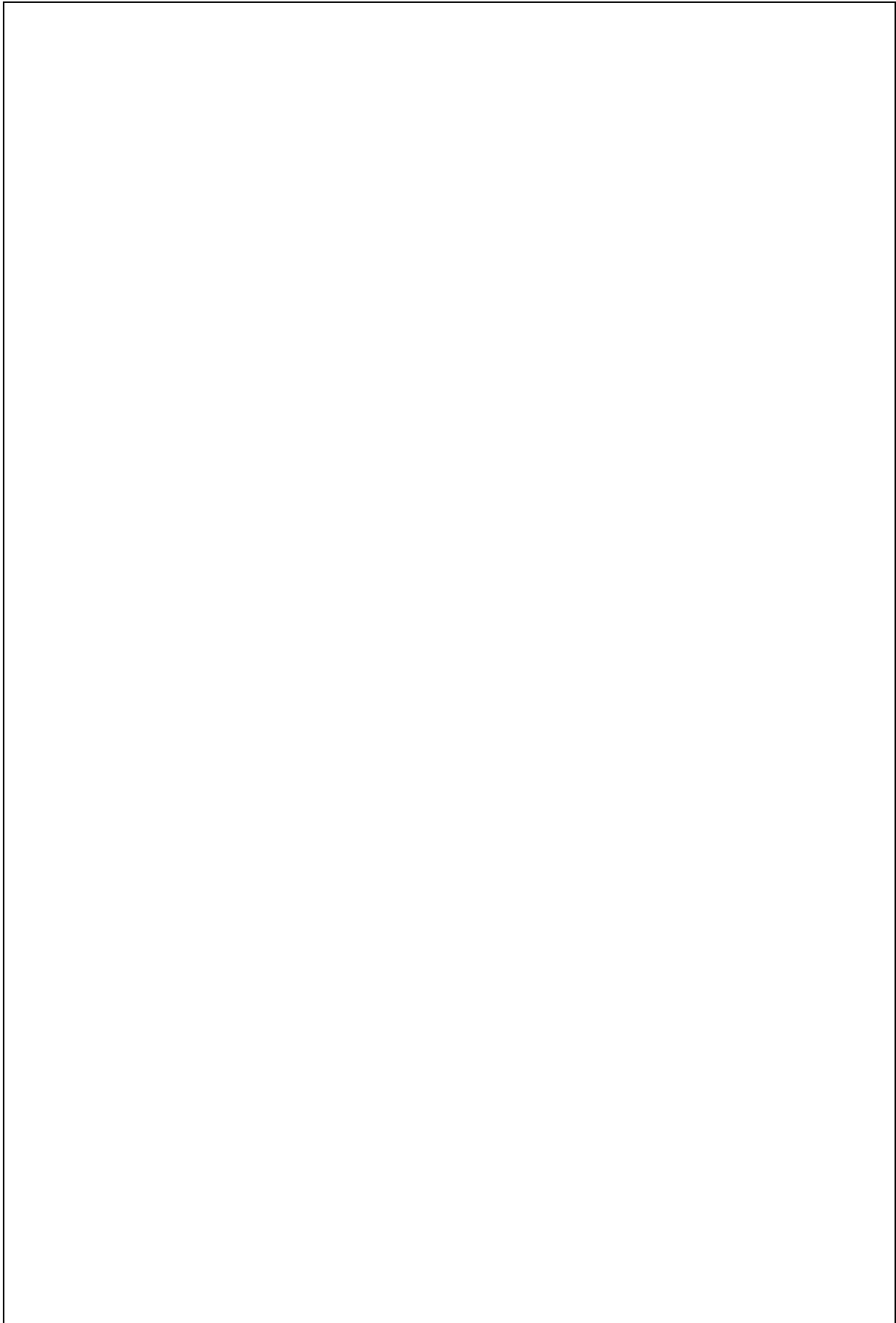

**Please go to Part 12**

**PART 12 FURTHER INFORMATION**

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

If none **please go to Part 13**

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**Please go to Part 13**

**PART 13 DECLARATION –see note 13**

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

**The persons who need to know about it are:**

- Any mortgagee of the property to be licensed;
- Any owner of the property to which the application relates (if that is not you) i.e. the freeholder and any head lessors who are known to you;
- Any other person who is a tenant or long leaseholder of the property or any part of it (including any flat) who is known to you other than a statutory tenant or other tenant whose lease or tenancy is for less than 3 years (including a periodic tenancy);
- The proposed licence holder (if that is not you);
- The proposed managing agent (if any) (if that is not you);
- Any person who has agreed that he will be bound by any conditions in a licence if it is granted.

**You must tell each of these persons:**

- Your name, address, telephone number and email address or fax number (if any);
- The name, address telephone number and email address or fax number (if any) of the proposed licence holder (if it will not be you);
- This application is for an HMO licence under Part 2 of the Housing Act 2004;
- The address of the property to which the application relates;
- The name and address of the local housing authority to which the application will be made;
- The date the application will be submitted.

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

Name	Address	Date	Description of the persons Interest in the property or the application
	Postcode		
	Postcode		
	Postcode		
	Postcode		

**I/we declare that the information contained in this application is correct to the best of my/our knowledge. I/we understand that if/we commit an offence if I/we supply any information to a local housing authority in connection with any of their functions under any of Parts 1 to 4 of the Housing Act 2004 that is false or misleading and which I/we know is false or misleading or am/are reckless as to whether it is false or misleading.**

**Name of applicant**

**Date**

**Signature**

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

**Signature**

**Name of manager**

**Date**

**Signature**

**Name (if different to applicant)**

**Date**

**Signature**

Please send the completed application form, electrical inspection report and gas safety certificate, if appropriate with a Licence fee of £500.00 (cheques made payable to Forest Heath District Council) to:-

Forest Heath District Council  
Public Health & Housing  
Housing Services  
District Offices  
College Heath Road  
Mildenhall  
Suffolk IP28 7EY

Note to applicants: Please note that it is a criminal offence to knowingly supply information, which is false or misleading for the purposes of obtaining a licence. Evidence of any statements made in this application with regard to the property concerned may be required at a later date. We may approach other authorities, such as the Police, Fire and Rescue Service, Office of Fair Trading etc. and tenants for additional information and verification. Signing of the application will be taken as your agreement to any such action. If we subsequently discover something which is relevant and that you should have disclosed, or which has been incorrectly stated or described, your licence may be cancelled or other action taken.