METROPOLITAN BOROUGH COUNCIL OF CALDERDALE

Housing Act 2004 – Part 2 – Licensing of Houses in Multiple Occupation (HMO)

Application for Mandatory HMO Licence **RENEWAL**

Please ensure all parts are completed in **black ink.** If you need help completing this form please do not hesitate to ask.

This form has been designed to gather information required by statute, to enable the Council to issue a renewal of an existing HMO licence.

DO NOT ENCLOSE ANY PAYMENT WITH THIS APPLICATION. YOU WILL BE INVOICED FOR THE ASSOCIATED FEE AFTER SUBMISSION OF YOUR APPLICATION FORM.

Please return the completed form to: Calderdale MBC; Housing, Environment and Renewal; Environmental Health; Northgate House; Northgate; Halifax; HX1 1UNH

Tel: 01422 288001 Fax: 01422 392399 e-mail: environmental.health@calderdale.gov.uk

Address of Property: **Post Code:**	
Number of persons property to be licensed for	
Date of expiry of previous licence	
Date of application	
Are the applicant(s) and licence holder(s) the same as on the previous licence?*	Yes/No

**** both the applicant and the licence holder on the previous licence must be the same as on this renewal. If not, a new initial full licence application will be required.***

Please answer **all** questions unless directed. If any section is not applicable please mark N/A.

DETAILS OF INTERESTED PARTIES – *see Page 9 for guidance notes*	
1	Applicant(s)
	Full Name(s):
	Address(es): Post Code:
	Telephone(s): Email(s):
	The applicant(s) are also: The existing and proposed licence holder(s) Yes/No The person(s) managing the HMO Yes/No The person(s) having control of the HMO Yes/No The Freeholder of the property Yes/No
2	The Proposed Licence Holder(s) (if not the applicant)
	Name(s):
	Address(es): Post Code:
	Telephone(s): Email(s):
	The Proposed Licence Holder is also: The person(s) managing the HMO Yes/No The person having control of this HMO Yes/No
3	The person(s) managing the HMO (if not the applicant or proposed licence holder)
	Name(s):
	Address(es): Post Code:
	Telephone(s): Email(s):
	The manager is also: The person(s) having control of the HMO Yes/No
4	The person(s) having control of the HMO (if not the applicant, proposed licence holder or persons managing the HMO)
	Name(s):
	Address(es): Post Code:
	Telephone(s): Email(s):

5	Freeholder(s) of the property (if not the proposed applicant)
	Name(s):
	Address(es): Post Code:
	Telephone(s): Email(s):
6	Mortgagee(s) of the property (eg the bank or building society)
	Name(s):
	Address(es): Post Code
	Telephone(s): Email(s):
7	Any other person agreeing to be bound by the terms of the licence
	Name(s):
	Address(es): Post Code
	Telephone(s): Email(s):
8	Any other person known to the applicant having an estate or legal interest in the HMO that is subject to the application
	Name(s):
	Address(es): Post Code:
	Telephone(s): Email(s):
	Nature of interest: Please note that you may be asked to provide appropriate certification

9	Test of fitness and compliance with management conditions (please tick appropriate box). If you answer YES to any of the following questions in this section, please give details including dates in section 10 below. Continue on a separate sheet where necessary. This requires completion by all proposed licence holders and managers. **Please note: The Council may carry out necessary legal checks on applicants.**	
(a)	Are there any unspent convictions that may be relevant to the fitness of the proposed licence holder to hold a licence, or the proposed manager's fitness to manage the HMO, and, in particular, any such conviction 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(a)?	Put X in the appropriate box Licence Holder ☐ Yes ☐ No Manager ☐ Yes ☐ No
(b)	Has there been any finding by a court or tribunal against the proposed licence holder or the manager 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?	Put X in the appropriate box Licence Holder ☐ Yes ☐ No Manager ☐ Yes ☐ No
(c)	Has there been any contravention on the part of the proposed licence holder or the manager of any provision of any enactment relating to housing, public health, environmental health or landlord and tenant law which led to civil or criminal proceedings resulting in a judgement being made against you?	Put X in the appropriate box Licence Holder ☐ Yes ☐ No Manager ☐ Yes ☐ No
(d)	Do you have any information about any HMO or house the proposed licence holder or manager owns or manages or has owned or managed which has been the subject of: (i) a Control Order under Section 379 of the Housing Act 1985 in the five years preceding the date of the application; or (ii) any appropriate enforcement as detailed in Section 5 of the Housing Act 2004?	Put X in the appropriate box Licence Holder ☐ Yes ☐ No Manager ☐ Yes ☐ No
(e)	Do you have any information about any HMO or house the proposed licence holder or the manager owns or manages or has owned or managed 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 licensee breaching the conditions of his licence?	Put X in the appropriate box Licence Holder ☐ Yes ☐ No Manager ☐ Yes ☐ No

(f)	Do you have any information about any HMO or house the proposed licence holder or the manager owns or manages or has owned or managed that has been the subject of an Interim Management Order or Final Management Order under the Housing Act 2004?	Put X in the appropriate box Licence Holder ☐ Yes ☐ No Manager ☐ Yes ☐ No
(g)	Has any local authority carried out works to premises of which you have been the owner or manager in the past 5 years, following failure to comply with a formal notice?	Put X in the appropriate box Licence Holder ☐ Yes ☐ No Manager ☐ Yes ☐ No
(h)	Has the proposed licence holder or the manager been declared bankrupt within the last 5 years?	Put X in the appropriate box Licence Holder ☐ Yes ☐ No Manager ☐ Yes ☐ No
(i)	Has the proposed licence holder or the manager ever had any application for an HMO licence refused or revoked; or had a Management Order imposed, by this or by any other local authority under the Housing Act 2004?	Put X in the appropriate box Licence Holder ☐ Yes ☐ No Manager ☐ Yes ☐ No
If the answer to any of the questions in 9 above is Yes, full details will be required in section 10 below		
10	Please give details of any matters that had a **Yes** answer to them in question 9 above for the Licence Holder. If none please detail none.	

	Licence Holder I declare that to the best of my knowledge and belief all the information in this application is true. Signature _____ Print Full Name _____ Position (if acting on behalf of a company):_____ Date _____ NB A signed declaration will need completing by all licence holders and managers. Further copies can be taken of this form as necessary.
	2nd Licence Holder/Manager (delete as appropriate). Please give details of any matters that had a **Yes** answer to question 9 above. If none please detail none.
	2nd Licence Holder/Manager (delete as appropriate) I declare that to the best of my knowledge and belief all the information in this application is true. Signature _____ Print Full Name _____ Position (if acting on behalf of a company):_____Date _____

11	**Other persons who need to be informed**
	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 (the lender) • Any owner of the property to which the application relates (if that is not you) ie 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 he will be bound by any condition or 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 is an application made 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 the application on the following persons listed below who are the only persons known to me/us that are required to be informed that I/we have made this application. Signature(s)_____ Date: _____ Print Full Name(s):

Details of all relevant persons or organisations:

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

Continue on separate sheet if necessary

I/We declare that to the best of my/knowledge either:

(a) none of the information described in paragraph 2(c) to (g) of the Housing Act 2004 and previously submitted to the authority, or any other information submitted to the property as part of the previous application process has materially changed since that licence was granted: or

(b) the only material change/s to the information described in paragraph (a) above is/are as follows: [NB include description of all material changes to the property since the date of the original application for the HMO licence]

Where changes include the re-location of facilities and changes to room sizes an updated plan will be required.

Continue on a separate sheet if necessary

I/We understand and accept that if I/We withhold information or provide false or misleading information this may result in my application being rejected.

Please note that it is a criminal offence to make a false statement in an application for an HMO licence or fail to comply with any condition of the licence.

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 knowingly 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 I/we are reckless as to whether it is false or misleading. I/We declare that the house in respect of which a licence is sought under Part 2 of the Housing Act 2004 is already subject to a licence held by me/us under that Part at the time this applications if made.

To be completed by all applicants

Signature: Date:

Print Full Name:

Position (if acting on behalf of a company):

Signature: Date:

Print Full Name:

Position (if acting on behalf of a company):

Enclosures		**Tick items enclosed**
A	Annual maintenance record for automatic fire detection system	☐
B	Gas Safe registered commissioning and annual gas safety inspection certificates	☐
C	Electrical safety certificate	☐

Data Protection Act 1998 – Your Personal Data

Calderdale MBC use the personal information provided in this form to discharge it's duties under Part 2 of the Housing Act 2004. This may involve personal information being disclosed to the Police, Fire Service, Central Government and other Council Departments involved in the processing of the application. All of the information given to help us discharge our duties under Part 1 and Part 2 of the Housing Act 2004 is likely to be made public and parts of it (with the exception of details of any convictions) will also be kept in a public register. We have a data protection officer who can be contacted in the Chief Executives Directorate.

GUIDANCE NOTES

Applicant
This may be the property owner, the proposed licence holder, the proposed property manager, the person having control of the property or the person managing the property or somebody acting on their behalf who has completed the application for whatever reason.

Proposed licence holder
The most appropriate person to be responsible for the property and to hold the licence. The proposed Licence Holder means a person entitled to apply for, or has been awarded, a licence in respect of the HMO. The proposed Licence Holder needs to be the person who can authorise, organize and pay for essential repairs. They must also be available for tenants to contact in case of problems that may arise with respect to the property, and they must have the means to resolve them. The proposed Licence Holder will often be the landlord, but it could be a proposed Manager to whom the rent is paid, and who has authority from the owner to effectively manage the property.

Overall, it is the person in control of the property. A proposed Licence Holder may appoint an agent to control the property and to hold the licence if they are not considered to be a fit and proper person. This proposed Licence Holder should also be able to authorise and pay for works or repairs, as they will be liable for any breaches of the licence. Organisations that are landlords must nominate an appropriate person to be the proposed Licence Holder. This person will be responsible for ensuring that there are no breaches of the licence

Person managing the property
This is not necessarily the same as the Managing Agent or the Manager. The person managing means the person who is an owner or lessee (tenant) of the premises or who receives the rent for the property or other payments for it from persons who are in occupation as tenants or licensees of parts of the premises. This applies whether the person receives the rent directly or through an agent or trustee. Where the rents or other payments are received through someone who is an agent or trustee not only does it include the owner (or lessee) but it also includes the agent or trustee.

Person having control of the property
This means the person who receives the rack rent of the property or who would be in a position to receive it if the premises were let at a rack rent. Rack rent is defined as the rent which is not less than two thirds of the full net rental value of the premises. The person having control includes not only the person who receives the rent in this way on his own account but also someone who receives it as agent or trustee for another or someone else.

Where the property is owned by a company or similar body a responsible person of that company must be named as the licence holder.