

# Licensing of Houses in Multiple Occupation Mandatory and Additional Licensing Application Form Housing Act 2004 Part 2 and 3



Licensing of houses in multiple occupation ensures that certain types of rented property meet necessary standards to ensure a house is safe for the occupants, also that the landlord is competent, qualified and the most appropriate person to manage it. The houses must have adequate fire precautions and sufficient kitchen and bathroom amenities for the number of occupants. The Council will take into account any criminal convictions that the landlord may have and may refuse to grant a licence if the landlord is considered not to a be a 'fit and proper' person.

Please answer all questions carefully, and sign the declaration at the back of the form. If you have more than one property in multiple occupation you will need to complete a separate application form for each property. If you find there is insufficient space to supply your answers to a question, please use a continuation sheet and attach it to the application marking the sheet with the section number to which the information relates.

Complete the form carefully and legibly using black or blue ink and refer to the guidance notes to assist you in completing it.

The following checklist provides details of the documentation that <u>must</u> be provided with this completed application form. (Please tick).

- Appropriate application fee.
- Clear passport style photo of proposed licence holder
- Landlords Gas Safety Record
- Domestic Electrical Installation Condition Report
- Energy Performance Certificate (new licence applications only)

### The following documentation must be provided if available:-

- Fire alarm Installation/Inspection and servicing report.
- Emergency Lighting Periodic inspection and testing certificate.
- Fire Safety Risk Assessment.
- Building Regulations Completion Certificate.
- Planning Approval (for any conversion or change of use to HMO).
- PAT Test for portable electrical equipment.

For office use only Date received Fee amount Reference

For advice or assistance about this application, property standards, inspections, advice of a technical nature, or whether a property needs a Licence, please contact:-

HMO Licensing Shared Regulatory Services Room 116 County Hall Atlantic Wharf Cardiff CF10 4UW

#### Tel: 0300 1236696

Email: HMOLicensing@Cardiff.gov.uk Website : http://www.srs.wales/en/Housing/HMO-Licensing/HMO-Licensing.aspx

# 1. Applications Details

1a.	Address of property to be	licensed		
			Postcode	
1b.	Type of licence		Additional H	
1c.	Type of application	New	Previously licensed	Change of owner
	2. Proposed licence (person, business			e will be on the licence
2a.		Fi	st Name(s)	ompany name)
				ode
	Date of Birth			
2b.	Status of the proposed li	cence holder.		
	Individual or sole trader Charity or Trust	Other	Company	
2c.	If company, partnership,	charity or Trust, pl	ease give details:-	
	Business/organisation na			me)
	Registration No. (if application			
2d.	trust).	partners (if it is a pa	artnership), and all th	ne trustees (if it is a charity or
	Name and address of co	mpany secretary (if	applicable)	
			Postcode	
	Names and addresses of			
				porised: Head of

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## 2. Proposed licence holder details continued

Names and addresses of directors/partners/trustees (Contd).
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2.	

3. \_\_\_\_\_

## 3. Contact details in relation to this application

Complete this section only if someone other than the proposed licence holder should be contacted about this application and/or access to the property to be licensed.

3a.	Please provide contact details of t	Please provide contact details of the person to contact about this application.				
	Name					
	Address	Address				
		Postcode				
	Home Tel. No	Work Tel. No				
	Mobile Tel. No	Email address				
	What is the relationship to the pro-	oposed licence holder?				
3b.	be licensed if different from above	the person to contact in order to gain access to the property to e.				
	Address					
	Postcode					
	Home Tel. No	Work Tel. No				
	Mobile Tel. No	Email address				
	What is the relation to the propos	sed licence holder?				
4	4. Ownership and control of	f the property to be licensed				
4a.	Is the proposed licence holder the o	owner of the property?				
4b.	Does the proposed licence holder have control of the property? (i.e. is legally entitled to receive the rental income from the property).					
4c.	the property? Including: Let - Act	nave the powers necessary to manage t to and evict tenants cess to all parts of the premises. Ithorise any necessary expenditure.				
4d.		erest in the property (e.g. as freeholder, If Yes, please give details in Section 4e.				

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# 4. Ownership and control of the property to be licensed continued

4e.	Please provide details about the owner(s) of the property ( <b>including your mortgage provider</b> ), anybody else who has a legal interest in the property and/or anybody who has agreed to be bound by the conditions of the licence (if it is granted). Please continue on a separate sheet if necessary.
1.	Nature of interest in the property
	Surname First Name(s)
	Address (if an organisation, give the registered office or other official address)
	Postcode
	Daytime Tel. No Mobile Phone No
	Email address
2.	Nature of interest in the property Surname First Name(s) Address (if an organisation, give the registered office or other official address)
	Postcode
	Daytime Tel. No Mobile Phone No
	Email address
3.	Nature of interest in the property
	Surname First Name(s)
	Address (if an organisation, give the registered office or other official address)
	Postcode
	Daytime Tel. No Mobile Phone No
	Email address

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5	5. Proposed manager of the property
5a.	Will the proposed licence holder be the manager of the property? If yes, go to Section 6.
	If no, please provide details about the manager.
	Surname First Name(s)
	Business Name
	Address (if an organisation, give the registered office or other official address)
	Postcode
	Daytime Tel. No Mobile Tel. No
	Email address
6	6. Fit and Proper Person Test
6a.	Has any person named in Parts 2, 3, 4 $\&$ 5 and/or any person associated with any of them :-
	<ol> <li>Committed any offence involving fraud, or other dishonesty (including benefit fraud), violence, drugs, or any offence listed in Schedule 3 to the Sexual Offences Act 2003 (subject to the Rehabilitation of Offenders Act 1974)?</li> </ol>
	2. Practised unlawful discrimination on grounds of sex, colour, race, ethnic or national origins or disability in, or in connection with, any business?
	3. Contravened any legislation relating to housing, public health, environmental health or landlord and tenant law?
	4. Been refused a licence under Part 2 or 3 of the Housing Act 2004?
	5. Had a licence revoked for breach of any conditions unders Parts 2 or 3 of the Housing Act 2004?
	6. Contravened any Code of Practice relating to the management of HMOs?
	<ol><li>Been subject to a Control Order under the Housing Act 1985 (in the past 5 years)?</li></ol>
	8. Been subject to a Management Order under the Housing Act 2004?
Plea	ase see guidance on completing this application for further information.

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## 6. Fit and Proper Person Test continued

- 9. Failed to comply with a Housing Notice (requiring works etc.) served by a local authority?
- 10. Been subject to complaints from tenants or other sources, regarding serious or repeated breaches of the conditions of a licence under the Housing Act 2004.
- 11. Been declared bankrupt?

6b. If yes, please provide details of the person(s) involved together with full details.

Name	Offence	Date	Sentence	Court

Full details (including the address of the property concerned if applicable):

## 7. Rent Smart Wales

7a. Is the proposed licence holder and/or the manager:-

- 1. a registered Landlord with Rent Smart Wales?
- 2. the holder of a Landlord Licence with Rent Smart Wales?
- 3. the holder of an Agents Licence with Rent Smart Wales?

If yes, please provide details:-

Name of person	Type of Registration/Licence	Registration Licence No.

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## 8. Occupancy/Tenant Information

8a.	How many separate households live in the property? Refer to guidance for definition of household.				
	At time of application	_Proposed maximum			
	How many occupants live in the property?				
	Total No. at time of application	Proposed maximum			
	No of adults.	No. of children			
8b.	Is there a resident landlord?				
	How many people are there in the landlord's	household?			
	Which parts of the property does the landlord's household occupy?				
8c.	Provide details of any catering arrangements	for occupants of the property. (eg. B&B, full board,			
	self catering.				

# 9. Details of property to be licensed

9. Have there been any material changes to the property since your last application? If no, please go to Section 15 of this application.

If this is a new application, or changes have been made, please continue to answer all questions.

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9. C	Details of pro	operty to be	licensed conti	nued		
9a.	Type of proper	ty (HMO or hou	se)			
	House in multi	ple occupation		Flat in multiple	occupation	
	House convert	ed into and com	nprising only self con	tained flats		
	A purpose buil	t block of flats	Fla	t in single occupa	tion	
	Other (please specify)					
9b.	Type of buildin	ng				
	Detached hou	se	Semi-detached hou	se -	Terraced house	
	End terrace he	ouse	Mixed reside	ential and comme	rcial	
	Back to back h	nouse	=	ucture (dwelling w ster or around a co	vhich shares a par ourtyard)	ty
	Other (please	specify) _				
9c.	When was the	building origina	lly built?			
	Before 1919	1919-1945	1946-1964	1965-1980	After 1980	I
9d.	How many sto	preys (include gr	ound floor, basemer	nts, attic conversio	on and mezzanine	s).
	1	2	3 4	5	6	7
9e. 9f.		any commercia	Il use e.g. shop on gr	ound floor, shop,	restaurant, office	
	Purpose built	with its present	design			
	Converted fro	m a previous re	sidential dwelling			
	Converted fro	m a non-resider	ntial structure			
	If converted,	approximately of	late of conversion			
	building regu	lation approval	give evidence of pla of the conversion? Y n your application.	01		
9g.	•		provements or repair If yes, provide detai		ior to	
	Means of esc	аре	Insulation	,	Amenities	
	Security	Other (please spec	cify)			

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## 10. Accommodation details

10a. Give details of the number of letting units in property. Please see guidance for further information.

Unit details	Total No.
Separate letting units in property (room or units)	
Self contained letting units (flat or bedsits)	
Non-self contained units (flats or bedsits)	
Units with dormitories	

10b. Give details of the number of rooms and facilities available in the property?

Rooms/Facilities in property	Total no. in property	Use exclusive to one letting unit	Use shared between letting units
Bedrooms (exclude bedsits)			
Bedsits (i.e. combined living/bedroom)			
Living/dining rooms (exclude kitchen dining			
rooms and bedsits)			
Kitchens (include kitchen dining rooms)			
Sinks (exclude wash hand basins)			
Shower/bathrooms			
Toilets in shower/bathrooms			
Separate toilets with wash hand basins (exclude			
external toilets)			
Separate toilets without wash hnd basins			
(exclude external toilets)			
Wash hand basins (include all wash hand basins)			

10c. Do all baths, showers, sinks and wash hand basins supply cold and constant hot water?

- 10d. Are all kitchens equipped with the following:-
  - a sink with draining board.
  - a means of cooking food.
  - electrical sockets.
  - worktops for food preparation.
  - storage cupboards.

- refrigerator and freezer (or freezer compartment).

- refuse storage facilities.

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### 11. Heating and Energy Efficiency

11a.	What type of heating does the prop	erty have? (Please tick all that apply).				
	Gas central heating	Electrical central heating/night storage heaters				
	Fixed gas heaters/fires	Fixed electrical heaters/fire				
	Solid fuel fires	Other				
	If other, please provide details.					
-						
11b.	Do all the rooms in the property have	e a source of heating? (eg. Radiator or fire)				
	If no, please provide details					
11c.						
	ventilation?					
	If no, please provide details.					
11d.	Are windows double glazed?					
11e.	Is the roof space insulated?					
	If all or some, please provide details	including the thickness of insulation in mm.				
11f.	Are cavity walls insulated?					
11g.	Are hot water tanks lagged?					
11h.	Is there an Energy Performance Cert	ificate for the property?				

## 12. Gas and Electricity

12a. Does the property have a gas supply?

**Gas installations** - You **must** supply with this application, a copy of the current Gas Safety Record(s) covering all gas appliances in the property. The Record must be within date and show that appliances are in a satisfactory condition. (You are required to have all appliances etc. checked annually by a Gas Safe registered engineer).

12b. Electrical installations - You must supply with this application, a copy of a current and satisfactory Domestic Electrical Installation Condition Report for the property, completed by a competent electrical engineer. The certificate must be within date (max 5 years) and certificates with code 1 or code 2 defects will not be accepted as satisfactory.

### 12c. Electrical appliances

Are any portable electrical appliances provided for use by the occupants? (e.g) kettle, refrigerator, vacuum cleaner). Are any of these appliances more than 12 months old?

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# 13. Fire precautions

13a.	. Has a fire safety risk assessment been undertal	ken?	
	You may be required to submit a copy of the fin	re risk assessment with this	application if available.
13b.	<ul> <li>Are smoke and/or heat alarms (or detectors) p</li> </ul>	rovided in the property?	
	If yes, please indicate type, number and location	on of alarms or detectors.	
	Battery operated	Mains electricity— stand alc	one
	Mains electricity—interlinked	Mains electricity—panel con	itrolled
	How many alarms or detectors?		
	Please provide the location of each smoke alar	m eg. Ground floor hall, firs	t floor kitchen.
13c.	. Please indicate if the following equipment is pr	ovided in the property?	
	Fire extinguishers Fire blankets in	each kitchen	Fire doors
	Emergency lighting in common areas	None of the above	
13d.	. Please indicate if all the fire doors have the foll	owing:-	
	Self closing devices Intumes	cent strips	
	Cold smoke seals None of	the above	
13e.	e. Provide details of the fire escape routes from t clear.	he property and how you er	nsure they are kept
13f.	Provide details of any fire safety information of property.	r training provided to the oc	ccupiers of the
13g.	. Do all furniture and soft furnishings provided a the property comply with The Furniture and Furnishing (Fire) (Safety) Regulations 1988 (as a		
13h.	. Is the fire precautions equipment serviced and person at regular intervals?	inspected by a competent	
	Please provide the following details about insp certificates with this application.	ections. You may be require	ed to submit inspection
	Type of equipment (eg. Emergency lighting, fir	e alarm system, fire extingu	iishers)
	Name of inspector/company		
	Date of last inspection		

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### 14. Management of property to be licensed

14a.	Are occupants given a tenancy agreement (or other written statement of terms of occupancy)? You may be required to submit a copy of this document with your application.
14b.	Does the written statement of terms include any clauses relating to antisocial behaviour?
14c.	Does the written statement of terms include guidelines on procedures for tenants to report necessary repairs and make complaints about the property?
14d.	Is a deposit required at the start of a new tenancy?
14e.	Are the terms of the tenancy deposit clearly set out in writing?
14f.	Is the proposed licence holder or manager a member of any government authorised scheme that protects tenants' deposits. If yes, provide details of scheme provider and landlord reference no.
14g.	Are tenants given a rent book?
14h.	Are tenants given receipts for rent payments?

14i. Provide details of any procedures/arrangements you have in place to:-Vet prospective tenants (e.g. use of a vetting service or accreditation scheme, take up references etc).

Ensure the property is clean, safe and fit to live in, before each new tenancy.

Agree an inventory with each tenant, detailing the furniture and appliances supplied, including the condition of individual items.

Review the general condition of the property (internal, external, garden, etc) sufficiently regularly to ensure it is maintained in good and safe repair.

Deal with repairs and complaints which have been reported within a reasonable time period.

Cover the cost of major emergency repair work or improvements to the property.

Receive and respond to complaints of antisocial behaviour involving or affecting the tenants and/or their children or visitors.

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### 15. Other properties licensable under the Housing Act 2004

15a. Does the proposed licence holder and/or manager own or manage other properties which require a licence under the Housing Act 2004? If no, please go to question no. 17.

If yes, provide the following information:-

15b. Number of properties in this authority area.

Have details about these properties been provided in a previous Licence applications?

Reference No. of previous application or licence.

### 15c. Please provide details about each property:- (Please continue on a separate sheet if necessary)

Address	ls property licensed?	Ref. No.

### **16.** Notifying people about the licence application

You must let certain people know in writing that you have made this application or give them a copy of it. A form is provided at the back of this application form that you can use for this purpose. The guidance notes list the people you should inform.

- 16a. Does anybody (other than you) own the property (e.g. as freeholder, head lessor, joint owner?
- 16b. Is there a mortgage on the property?
- 16c. Does the property have any tenant or leaseholder with more than 3 years remaining on the tenancy or lease?
- 16d. Is the proposed licence holder somebody other than you?
- 16e. Is the proposed manager somebody other than you?
- 16f. Has anybody else agreed to be bound by the conditions of the Licence, if it is granted?

You must tell each of these people (or organisations) the following information. A form is provided at the back of this application form which may assist you with the process.

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### 16. Notifying people about the licence application continued

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

### 16g. Provide details of those people you have notified about the licence application.

Address	Interest in property or application (eg. Freeholder, leaseholder, mortgage provider, tenant, proposed licence holder or manager	Date notified
	Address	application (eg. Freeholder, leaseholder, mortgage provider, tenant, proposed licence

### 17. Additional details

17a. Please provide any additional information which is required or relevant to your application.

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### 18. Declarations

I/we declare that the information contained in this application is correct to the best of my/our knowledge. I/we understand that I 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 know is false or misleading or am/are reckless as to whether it is false or misleading.

I/we declare that I/we have notified the people listed in Section 17 above about this application and that these are the only people known to me/us that are required to be informed that I have made this application.

I/we declare that any gas appliances, electrical appliances and furniture provided for the use of tenants in the property are in good safe working order and comply with all relevant safety legislation.

I/we declare that the smoke and heat detectors/alarms installed in the house as described in this form are in good safe working order and comply with all the relevant safety information.

I/we declare that adequate financial resources are available to maintain the property ensuring the health and safety of the tenants and fulfil all other statutory obligations.

I/we understand that the Council may need to carry out investigations to assess whether I/we am/are a "fit and proper" person for the purposes of Part 2 of the Housing Act 2004. I hereby authorise the Council to make such enquiries and share information as it sees fit. Such enquiries may include Criminal Records Bureau checks, liaison with the Police, Fire Service and other Local Authorities.

### Proposed licence holder

Full name	Capacity
Signature	_ Date
Proposed manager	
Full name	_Capacity
Signature	_ Date

### **Data Processing Notice**

In order to comply with Section 232, Housing Act 2004, the Local Authority must establish and maintain a register of all licences granted by them. The register must contain prescribed particulars and the contents of the register must be available to members of the public for inspection. Copies of the register, or extracts from it, must be supplied to a person requesting such and may be subject to payment of a reasonable fee.

A compact version of the register (without the licence holder's and manager's name and address) is published on the Shared Regulatory Services website.

For further information about how the Council uses your personal data, including your rights as a data subject, please see Vale of Glamorgan Council Privacy Notice ( link – <u>https://www.valeofglamorgan.gov.uk/en/our council/Website-Privacy-Notice.aspx</u>

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### Notification of Application for a Mandatory/Additional HMO Licence The Licensing of (HMOs and Other Houses) Applications, Standards Publication of Designations and Keeping of Registers) Regulations 2006.

The above regulations require that I inform you that a licensing application under Part II of the Housing Act 2004 has been, or will be made in respect of:

Property to be licensed \_\_\_\_

Proposed Licence holder	Name
	Address
	Tel. No.
	Email
Person completing application form (if	Name
different from proposed licence holder).	Address
	Tel. No.
	Email
Local Housing Authority Applied to:-	HMO Licensing
	Shared Regulatory Services
	Room 116 County Hall
	Atlantic Wharf
	Cardiff
	CF10 4UW
Date application made (to be made).	
Signature	
Date	

If you would like further information on the licensing of houses in multiple occupation in Cardiff, please contact the Housing Enforcement Team at the above address or email us at HMOLicensing@cardiff.gov.uk, or visit our website at http://www.srs.wales/en/Housing/HMO-Licensing/HMO-Licensing.aspx

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