



# 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 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 **must** 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](mailto: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                      Mandatory HMO       Additional HMO
- 1c. Type of application                  New                   Previously licensed                   Change of owner

## 2. Proposed licence holder details (person, business or organisation whose name will be on the licence)

- 2a. Name of proposed licence holder (if company, please give full company name)  
Surname \_\_\_\_\_ First Name(s) \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ Postcode \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_  
Home Tel. No. \_\_\_\_\_ Work Tel. No. \_\_\_\_\_  
Mobile Tel. No. \_\_\_\_\_ Email address \_\_\_\_\_
- 2b. Status of the proposed licence holder.  
Individual or sole trader                       Company                       Partnership   
Charity or Trust                       Other \_\_\_\_\_
- 2c. If company, partnership, charity or Trust, please give details:-  
Business/organisation name (if registered, use the registered name) \_\_\_\_\_  
\_\_\_\_\_  
Registration No. (if applicable) \_\_\_\_\_
- 2d. Provide details about all, company directors and the secretary (if the proposed licence holder is a company), all partners (if it is a partnership), and all the trustees (if it is a charity or trust).  
Name and address of company secretary (if applicable) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ Postcode \_\_\_\_\_  
Names and addresses of directors/partners/trustees (if applicable).  
1. \_\_\_\_\_  
\_\_\_\_\_

## 2. Proposed licence holder details continued

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

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 the person to contact about this application.

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Home Tel. No. \_\_\_\_\_ Work Tel. No. \_\_\_\_\_

Mobile Tel. No. \_\_\_\_\_ Email address \_\_\_\_\_

What is the relationship to the proposed licence holder? \_\_\_\_\_

3b. Please provide contact details of the person to contact in order to gain access to the property to be licensed if different from above.

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Home Tel. No. \_\_\_\_\_ Work Tel. No. \_\_\_\_\_

Mobile Tel. No. \_\_\_\_\_ Email address \_\_\_\_\_

What is the relation to the proposed licence holder? \_\_\_\_\_

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

4a. Is the proposed licence holder the owner of the property? Yes/No

4b. Does the proposed licence holder have control of the property?  
(i.e. is legally entitled to receive the rental income from the property). Yes/No

4c. Does the proposed licence holder have the powers necessary to manage the property? Including:-

- Let to and evict tenants	Yes/No
- Access to all parts of the premises.	Yes/No
- Authorise any necessary expenditure.	Yes/No

4d. Does anybody else have a legal interest in the property (e.g. as freeholder, leaseholder, mortgage provider)? If Yes, please give details in Section 4e. Yes/No

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

4e. Please provide details about the owner(s) of the property (**including your mortgage provider**), 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 \_\_\_\_\_

## 5. Proposed manager of the property

5a. Will the proposed licence holder be the manager of the property? Yes/No  
 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. 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 :-
1. 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)? Yes/No
  2. Practised unlawful discrimination on grounds of sex, colour, race, ethnic or national origins or disability in, or in connection with, any business? Yes/No
  3. Contravened any legislation relating to housing, public health, environmental health or landlord and tenant law? Yes/No
  4. Been refused a licence under Part 2 or 3 of the Housing Act 2004? Yes/No
  5. Had a licence revoked for breach of any conditions under Parts 2 or 3 of the Housing Act 2004? Yes/No
  6. Contravened any Code of Practice relating to the management of HMOs? Yes/No
  7. Been subject to a Control Order under the Housing Act 1985 (in the past 5 years)? Yes/No
  8. Been subject to a Management Order under the Housing Act 2004? Yes/No

**Please see guidance on completing this application for further information.**

HMO Licence application	Issue: 8	Aug 2021	Process Owner: Team Manager Neighbourhood Services Team 1	Authorised: Head of Service, SRS	5
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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? Yes/No
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. Yes/No
11. Been declared bankrupt? Yes/No

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):

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## 7. Rent Smart Wales

- 7a. Is the proposed licence holder and/or the manager:-
1. a registered Landlord with Rent Smart Wales? Yes/No
2. the holder of a Landlord Licence with Rent Smart Wales? Yes/No
3. the holder of an Agents Licence with Rent Smart Wales? Yes/No

If yes, please provide details:-

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

## 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? Yes/No

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? Yes/No  
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.

## 9. Details of property to be licensed continued

9a. Type of property (HMO or house)

House in multiple occupation  Flat in multiple occupation

House converted into and comprising only self contained flats

A purpose built block of flats  Flat in single occupation

Other (please specify) \_\_\_\_\_

9b. Type of building

Detached house  Semi-detached house  Terraced house

End terrace house  Mixed residential and commercial

Back to back house  Grouped structure (dwelling which shares a party wall in a cluster or around a courtyard)

Other (please specify) \_\_\_\_\_

9c. When was the building originally built?

Before 1919  1919-1945  1946-1964  1965-1980  After 1980

9d. How many storeys (include ground floor, basements, attic conversion and mezzanines).

1  2  3  4  5  6  7

9e. Give details of any commercial use e.g. shop on ground floor, shop, restaurant, office.

\_\_\_\_\_

\_\_\_\_\_

9f. Is the property to be licensed:-

Purpose built with its present design

Converted from a previous residential dwelling

Converted from a non-residential structure

If converted, approximately date of conversion \_\_\_\_\_

Do you have documents that give evidence of planning permission and/or building regulation approval of the conversion? You may be required to submit these documents with your application. Yes/No

9g. Have you completed any improvements or repairs on the house prior to submitting your application? If yes, provide details:- Yes/No

Means of escape  Insulation  Amenities

Security  Other (please specify) \_\_\_\_\_



## 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? Yes/No

10d. Are all kitchens equipped with the following:-

- a sink with draining board. Yes/No
- a means of cooking food. Yes/No
- electrical sockets. Yes/No
- worktops for food preparation. Yes/No
- storage cupboards. Yes/No
- refrigerator and freezer (or freezer compartment). Yes/No
- refuse storage facilities. Yes/No

## 11. Heating and Energy Efficiency

- 11a. What type of heating does the property 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 a source of heating? (eg. Radiator or fire)      Yes/No
- If no, please provide details. \_\_\_\_\_
- 
- 11c. Do all bathrooms and kitchens have a means of natural or mechanical ventilation?      Yes/No
- If no, please provide details. \_\_\_\_\_
- 
- 11d. Are windows double glazed?      All/some/none
- 11e. Is the roof space insulated?      All/some/none/na
- If all or some, please provide details including the thickness of insulation in mm.
- 
- 11f. Are cavity walls insulated?      All/some/none/na
- 11g. Are hot water tanks lagged?      All/some/none/na
- 11h. Is there an Energy Performance Certificate for the property?      Yes/No

## 12. Gas and Electricity

- 12a. Does the property have a gas supply?      Yes/No
- 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?      Yes/No  
(e.g) kettle, refrigerator, vacuum cleaner).
- Are any of these appliances more than 12 months old?      Yes/No

## 13. Fire precautions

13a. Has a fire safety risk assessment been undertaken? Yes/No

You may be required to submit a copy of the fire risk assessment with this application if available.

13b. Are smoke and/or heat alarms (or detectors) provided in the property? Yes/No

If yes, please indicate type, number and location of alarms or detectors.

Battery operated

Mains electricity— stand alone

Mains electricity—interlinked

Mains electricity—panel controlled

How many alarms or detectors? \_\_\_\_\_

Please provide the location of each smoke alarm eg. Ground floor hall, first floor kitchen.

13c. Please indicate if the following equipment is provided 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 following:-

Self closing devices

Intumescent strips

Cold smoke seals

None of the above

13e. Provide details of the fire escape routes from the property and how you ensure they are kept clear.

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13f. Provide details of any fire safety information or training provided to the occupiers of the property.

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13g. Do all furniture and soft furnishings provided at the property comply with The Furniture and Furnishing (Fire) (Safety) Regulations 1988 (as amended)? Yes/No/Don't know/None provided

13h. Is the fire precautions equipment serviced and inspected by a competent person at regular intervals? Yes/No

Please provide the following details about inspections. You may be required to submit inspection certificates with this application.

Type of equipment (eg. Emergency lighting, fire alarm system, fire extinguishers)\_\_\_\_\_

Name of inspector/company \_\_\_\_\_

Date of last inspection \_\_\_\_\_ Certificate No. \_\_\_\_\_

## 14. Management of property to be licensed

- 14a. Are occupants given a tenancy agreement (or other written statement of terms of occupancy)? Yes/No  
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? Yes/No
- 14c. Does the written statement of terms include guidelines on procedures for tenants to report necessary repairs and make complaints about the property? Yes/No
- 14d. Is a deposit required at the start of a new tenancy? Yes/No
- 14e. Are the terms of the tenancy deposit clearly set out in writing? Yes/No
- 14f. Is the proposed licence holder or manager a member of any government authorised scheme that protects tenants' deposits. Yes/No  
If yes, provide details of scheme provider and landlord reference no.  
\_\_\_\_\_
- 14g. Are tenants given a rent book? Yes/No
- 14h. Are tenants given receipts for rent payments? Yes/No
- 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.  
\_\_\_\_\_

## 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? Yes/No  
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? Yes/No

Reference No. of previous application or licence. \_\_\_\_\_

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

Address	Is 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)? Yes/No
- 16b. Is there a mortgage on the property? Yes/No
- 16c. Does the property have any tenant or leaseholder with more than 3 years remaining on the tenancy or lease? Yes/No
- 16d. Is the proposed licence holder somebody other than you? Yes/No
- 16e. Is the proposed manager somebody other than you? Yes/No
- 16f. Has anybody else agreed to be bound by the conditions of the Licence, if it is granted? Yes/No

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.

## 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.

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

## 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 – [https://www.valeofglamorgan.gov.uk/en/our\\_council/Website-Privacy-Notice.aspx](https://www.valeofglamorgan.gov.uk/en/our_council/Website-Privacy-Notice.aspx)

HMO Licence application	Issue: 8	Aug 2021	Process Owner: Team Manager Neighbourhood Services Team 1	Authorised: Head of Service, SRS	15
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HMO Licence application	Issue: 8	Aug 2021	Process Owner: Team Manager Neighbourhood Services Team 1	Authorised: Head of Service, SRS	16
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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 \_\_\_\_\_

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

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](mailto:HMOLicensing@cardiff.gov.uk), or visit our website at <http://www.srs.wales/en/Housing/HMO-Licensing/HMO-Licensing.aspx>

HMO Licence application	Issue: 8	Aug 2021	Process Owner: Team Manager Neighbourhood Services Team 1	Authorised: Head of Service, SRS	17
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