

Housing Act 2004 – Selective Licence

Application Form for an Individual Property Licence or Block Licence

Prior to submitting this form please ensure you have enclosed a clear copy of:

Proof of ID for the proposed licence holder and proposed manager (if applicable)	
Energy Performance Certificate (EPC) (if applicable)	
A valid, in date satisfactory Gas Safety Record (if applicable)	
Correct Application Fee – We will contact you for payment arrangements	
Relevant Persons Appendix – Spreadsheet (For Block Licence Only)	
Company Letterhead with Company Details – See Page 3 (For Block Licence Only)	

Documents to support your application – Block Licence only (if applicable):

Plans for each floor of the property	
Written Fire Safety Risk Assessment	
A valid, in date satisfactory Electrical Installation Condition Report or Electrical Installation Certificate	
Emergency Escape Lighting Test Certificate	
Fire Alarm Test Certificate (where there is an electrical fire alarm control panel for the property)	
Building regulations completion certificate and planning consents	
If accredited, evidence of accreditation (DASH Accreditation, Unipol or ANUK)	

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

- The proposed licence holders and proposed managers' name, address and contact details
- The name, address and contact details for any other person with an interest in the property, such as other owners, 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 condition and safety of the property
- Details in relation to how the property is managed

At the end of the form, you will be required to agree with some statements / declarations.



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Individual Property Licence Application Fee(s)	Accredited (DASH or Unipol)	Non-Accredited
Total Licence Fee (online)	£670	£890
First Instalment (Part A Fee)	£485	£520
Second Instalment (Part B Fee)	£185	£370

Block Licence Application Fee(s)	Accredited (DASH, Unipol or ANUK)	Non-Accredited
Block Base Fee(s)	£2,025	£2,720
First Instalment (Part A Fee)	£1,195	£1,195
Second Instalment (Part B Fee)	£830	£1,525
Standard Fee per Dwelling	£385	£425
First Instalment (Part A Fee)	£255	£260
Second Instalment (Part B Fee)	£130	£165

Individual Property Licence Paper application fee	Comments
£35	NCC to print and post application to the applicant
£65	Applied to completed application received to cover the extra manual cost of processing.

**A Licensing Support Officer will contact you for first instalment (Part A) payment and additional paper application fee to be paid over the phone. All major Credit/Debit card accepted.
For Block Licence Part A fee will be invoiced to the applicant upon receiving completed application**

Documentation(s) Required

Proof of acceptable ID for the proposed licence holder and proposed manager	You must provide a copy from list A or B on Page 3 and 4. (Not required for Limited Company)
An Energy Performance Certificate (EPC) For general information on EPCs, visit https://www.gov.uk/buy-sell-your-home/energy-performance-certificates	This is required unless you have applied for an exemption. There are limited circumstances to register an exemption. More information can be found on https://prsregister.beis.gov.uk/NdsBeisUi/used-service-before You will have to detail your exemption reason on the form.
A valid, in date satisfactory Gas Safety Certificate (if there are gas appliances in the property or block	A satisfactory Gas Safety Certificate must meet all of the following:



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provided by the landlord)	- In date; Gas Certificate are issued for 12 months - For the correct address - Clear copy of ALL pages - The engineer has considered the installation as 'satisfactory' - No codes present indicating danger, warning issued or installation NOT safe to use.
More information on Gas Safety Certificate, visit https://www.gassaferegister.co.uk/	
Relevant Persons Appendix (Block Licence Only)	Complete Relevant Persons Appendix spreadsheet (found on Selective Licence webpage), providing details for each units within the block.
Company details on letter headed paper (Block Licence Only)	To set up supplier for invoicing. Letter headed document to include address, telephone number, email for remittance, bank details, VAT registration number and company registration number.

The following documents are requested, if applicable and can be used to support your application

Plans for each floor of the property.

Satisfactory Electrical Installation Condition Report or Electrical Installation Certificate.

Emergency Escape Lighting Test Certificate.

Fire Alarm Test Certificate - Where there is an electrical fire alarm control panel for the property.

Written Fire Safety Risk Assessment.

Building regulations completion certificate and planning consents.

Evidence of Accreditation (DASH Services, Unipol and ANUK accepted only).

Proof of Identification accepted copies (To choose from List A or B)

List A

Driving Licence (Full UK and provisional licence accepted)

A passport showing the holder, or a person named in the passport as the child of the holder, is a British citizen or a citizen of the UK and Colonies having the right of abode in the UK.

A passport or national identity card showing the holder, or a person named in the passport as the child of the holder, is a national of a European Economic Area country or Switzerland.

A Registration Certificate or Document Certifying Permanent Residence issued by the Home Office to a national of a European Economic Area country or Switzerland.

A Permanent Residence Card issued by the Home Office to the family member of a national European Economic Area country or Switzerland.

A current Biometric Immigration Document (Biometric Residence Permit) issued by the Home Office to the holder indicating that the person named is allowed to stay indefinitely in the UK, or has no time limit on their stay in the UK.

A current passport endorsed to show that the holder is exempt from immigration control, is allowed to stay indefinitely in the UK, has the right of abode in the UK, or has no time limit on their stay in the UK.

A current Immigration Status Document issued by the Home Office to the holder with an endorsement indicating that the named person is allowed to stay indefinitely in the UK or has no time limit on their stay in the UK, together with an official document giving the person's permanent National Insurance number and their name issued by a Government agency or a previous employer.

A full birth or adoption certificate issued in the UK which includes the name(s) of at least one of the holder's parents or adoptive parents, together with an official document giving the person's permanent National Insurance number and their name issued by a Government agency or a previous employer.

A birth or adoption certificate issued in the Channel Islands, the Isle of Man, or Ireland, together with an official document giving the person's permanent National Insurance number and their name issued by a Government agency or a previous employer.

A certificate of registration or naturalisation as a British citizen, together with an official document giving the person's permanent National Insurance number and their name issued by a Government agency or a previous employer.



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Proof of Identification accepted copied List B

A current passport endorsed to show that the holder is allowed to stay in the UK.

A current Biometric Immigration Document (Biometric Residence Permit) issued by the Home Office to the holder which indicates that the named person can currently stay in the UK.

A current Residence Card (including an Accession Residence Card or a Derivative Residence Card) issued by the Home Office to a non-European Economic Area national who is a family member of a national of a European Economic Area country or Switzerland or who has a derivative right of residence.

A current Immigration Status Document containing a photograph issued by the Home Office to the holder with a valid endorsement indicating that the named person may stay in the UK, together with an official document giving the person's permanent National Insurance number and their name issued by a Government agency or a previous employer.

A Certificate of Application issued by the Home Office under regulation 17(3) or 18A (2) of the Immigration (European Economic Area) Regulations 2006, to a family member of a national of a European Economic Area country or Switzerland, together with a Positive Verification Notice from the Home Office Employer Checking Service.

An Application Registration Card issued by the Home Office, together with a Positive Verification Notice from the Home Office Employer Checking Service.

A Positive Verification Notice issued by the Home Office Employer Checking Service, which indicates that the named person may stay in the UK.

Form Completion – General Guidelines

Complete this form in **black** or **blue** ink only; write clearly within the spaces provided and complete in conjunction with the guidance notes. 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 or for block licence. For further information, please see the guidance document '**Selective Licensing Guidance**'.

The application form will allow you to input details for ONE nominated proposed licence holder and proposed manager. Should you wish to nominate additional proposed licence holder and proposed manager please contact the Selective Licensing Department for an additional application form.

Please ensure you include the corresponding question number with any information provided on additional separate sheets.

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

Additional Fees: NOTE: If we have to contact you more than once because there are issues with any of the requirements or attachments then it is likely that you will be charged £40 for this and/ or your licence may be refused due to issues with the management arrangements.

Block Licence Conditions

The Council accepts that under Part 3 Housing Act 2004 it is possible for it to grant a Block Licence, which covers more than one separate dwelling where the following conditions are met:

- each of the dwellings are separate dwellings (usually self-contained flats), within the same building; and
- each of the dwellings are occupied under non "exempt tenancies"; and
- the entire building which contains the separate dwellings must be under common control and management



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In the event that a Block Licence is granted, and there is then a change in circumstances which results in there being more or fewer dwellings in the building that met the conditions described above, this would result in the granted licence no longer reflecting the 'house' now present. In such circumstances, the existing Licence would need to be revoked and a new application made that reflects the 'house' now defined by the dwellings let in accordance with the conditions stated above.

For Individual Property Licence application:

- Complete Application
- Sign and date declaration
- Forward completed form (along with copies of requested documents/certificates) either by post or e-mail

For Block Licence application:

- Complete application
- Sign and date declaration
- Complete Excel spreadsheet Appendix 1 – Relevant Persons
- Forward completed form (along with copies of requested documents/certificates and spreadsheet) either by post or e-mail

Please return completed forms to selective.licensing@nottinghamcity.gov.uk or post to:

Selective Licensing Team
(c/o) Loxley House
Station Street
Nottingham
NG2 3NG

For more information:

E-mail: selective.licensing@nottinghamcity.gov.uk

Section 1 – Property Details
Section 2 – Occupant Details (not required for block licence as form part of Appendix)
Section 3 – Applicant Details (Persons completing the form)
Section 4 – Proposed Licence Holder 1 details
Section 5 – Additional Proposed Licence Holder details (to be requested)
Section 6 – Proposed Manager 1 details
Section 7 – Additional Proposed Manager details (to be requested)
Section 8 – Management Arrangement
Section 9 – Relevant Persons
Section 10 – Property Details
Section 11 – Unit Amenities (not required for block licence as form part of Appendix)
Appendix – Relevant Persons spreadsheet (for block licence applicant)
Declaration – End of application form.



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Are you applying for: (tick appropriate option)

An Individual Property Licence	<input type="checkbox"/>	Yes – Go to Section 1 – The Property
Block Licence *	<input type="checkbox"/>	Yes – Complete all sections

For Block Licence application - Does the block meet the following conditions: (tick appropriate option)

- each of the units are separate dwellings (usually self-contained flats), within the same building
- each of the dwellings are occupied under non "exempt tenancies"
- the entire building which contains the separate dwellings is under common control and managements

Yes Continue with the application
 No Require to apply for individual property licence for each unit

Total number of units in the block
 Total number of units to be licenced (Provide unit details in relevant persons appendix)

Section 1 - The Property

1.1 Please provide the address for which this application is being made for

House number / Building name/ Block Name: _____

Address line 1: _____

Address line 2: _____	County: _____
Town/City: _____	Postcode: _____

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

A house	<input type="checkbox"/>
A flat	<input type="checkbox"/>
A house converted into and comprising only of self-contained flats	<input type="checkbox"/>
A purpose built block of flats (block licence)	<input type="checkbox"/>
Converted block of flats (block licence)	<input type="checkbox"/>

1.3 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)	<input type="checkbox"/>
Ground floor	<input type="checkbox"/>
First floor	<input type="checkbox"/>
Second floor	<input type="checkbox"/>
Third floor	<input type="checkbox"/>
Floors above the third floor	<input type="checkbox"/>

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

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

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

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

2.3 Please enter the maximum number of people you would like the property to be licenced for?

2.4 Please enter the maximum number of households you would like the property to be licenced for?

2.5 Are any of the occupants that live here an actual owner of the property? (tick as appropriate) Yes No

2.6 If yes to question 2.5, how many occupants are part of the owner's household?

Section 3 - Applicant Details (Person completing the form)

Title: Surname:

Forename: Middle name(s) (if any):

3.1 Applicant's Address

House number / Building name: Town / City:

Address line 1: County:

Address line 2: Postcode:

3.2 Applicant's Contact Details

Home number: Mobile number:

Work number: Email address:

3.3 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

Other (please specify below)

None of the above

Please specify



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Section 4 – Proposed Licence Holder

The licence holder may be an individual, a company, charity or partnership. You can also have multiple licence holders, for example a husband and wife (contact Selective Licensing Team for separate application to add joint/multiple proposed licence holder)

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 licenced. They must have the power to:

1. Let to and evict tenants
2. Access all parts of the premises to the same extent as the owner (if a different person)
3. 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 or updates and to request additional information.

Please be mindful that the information including the address of the proposed licence holder and proposed manager will be published on the public register

4.1 Is the applicant also the proposed licence holder? (Tick as appropriate)

Yes Go to Section 4.8 – Page 12 No Continue below Section 4.2

4.2 Which of the following is the Proposed Licence Holder (Tick as appropriate)

- | | | |
|---------------|--------------------------|---|
| An Individual | <input type="checkbox"/> | Complete section 4.3 only and continue from section 4.7 |
| A Company | <input type="checkbox"/> | Complete section 4.4 only and continue from section 4.7 |
| A Charity | <input type="checkbox"/> | Complete section 4.5 only and continue section from 4.7 |
| A Partnership | <input type="checkbox"/> | Complete section 4.6 only and continue section from 4.7 |

Section 4.3 – Individual Proposed Licence Holder Licence Holder's Details

Title:	Surname:
Forename:	Middle name(s) (if any):

Licence Holder's Address

House number / Building name:	Town / City:
Address line 1:	County:
Address line 2:	Postcode:

Licence Holder's Contact Details

Home telephone number:	Work telephone number:
Mobile telephone number:	Email:

Go to Section 4.7 – Proposed Licence Holder Interest



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Section 4.4 – Limited Company as Proposed Licence Holder

Full name of Registered Company:

Companies House numbers are 8 digits long. If the number you have is shorter than 8 digits it probably should have leading zeros.

Company number:

Trading name (if different):

Company's Trading Address

House number / Building name:

Town / City:

Address Line 1:

County:

Address Line 2:

Postcode:

Company's Registered Office Address (if different from trading address)

House number / Building name:

Town / City:

Address line 1:

County:

Address Line 2:

Postcode:

Company's Contact Details

Telephone number:

Website:

Email address:

Go to Section 4.7 – Proposed Licence Holder Interest

Section 4.5 – A Charitable Organisation as Proposed Licence Holder

Charity's Details

Full name of Charity:

Companies House numbers are 8 digits long, if the number you have is shorter than 8 digits it probably should have leading zeros. Ensure the number is entered without any spaces before or after the number

Charity number:

Trading name and address (if different):

Charity's Registered Office Address

House number / Building name:

Town / City:

Address line 1:

County:

Address line 2:

Postcode:



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Charity's Contact Details

Telephone number:

Website:

Email address:

Go to Section 4.7 – Proposed Licence Holder Interest

Section 4.6 - Partnership details

Partnership's Details including Limited Liability Partnership as Proposed Licence Holder

Is this a Limited Liability Partnership (LLP)?
(tick appropriate option)

Yes

No

Note: This is a legally registered partnership and information of which can be found on Companies House Website

Full name of Partnership:

Companies House numbers are 8 digits long, if the number you have is shorter than 8 digits it probably should have leading zeros. Ensure the number is entered without any spaces before or after the number.

Partnership number:
(only for LLP Registered Partnership)

Partnership's Registered Office Address

House number / Building name:

Town / City:

Address line 1:

County:

Address line 2:

Postcode:

If the correspondence address is different to the above, please provide the alternative address

Partnership's Correspondence Address

House number / Building name:

Town / City:

Address line 1:

County:

Address line 2:

Postcode:

Partnership's Contact Details

Telephone number:

Email address:

Website:

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Individuals in the partnership (if not Limited Liability Partnership)

How many individuals make up the partnership?	Partner(s)
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Partner 1 Details

Title:	Surname:
Forename:	Middle name(s) (if any):

Partner 1 Address

House number / Building name:	Town / City:
Address line 1:	County:
Address line 2:	Postcode:

Partner 1 Contact Details

Home number:	Work number:
Email Address:	Mobile number:
Involvement/Role in Partnership:	

Partner 2 Details

Title:	Surname:
Forename:	Middle name(s) (if any):

Partner 2 Address

House number / Building name:	Town / City:
Address line 1:	County:
Address line 2:	Postcode:

Partner 2 Contact Details

Home number:	Work number:
Email Address:	Mobile number:
Involvement/Role in Partnership:	

Note: If there are additional partners, please include details on a separate sheet.

Continue with Section 4.7 – Licence Holder Property Interest



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Section 4.7 Does the proposed licence holder have any of the following interests in the property? (tick all that apply)

Owner / Freeholder	<input type="checkbox"/>
Leaseholder	<input type="checkbox"/>
A person having control of the HMO or house	<input type="checkbox"/>
Other	<input type="checkbox"/>
None of the above	<input type="checkbox"/>

Enter other interest in the property:

Note: A person having control of a premise is generally someone who receives the rent of the premise, 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

4.8 Is the proposed licence holder accredited with Dash or Unipol? (Tick all that apply)

Dash Accredited? (tick as appropriate)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If Yes, provide Dash accreditation number:	<input type="text"/>	
Unipol/ANUK (tick if applicable)	<input type="checkbox"/>	

4.9 Training

Has the proposed licence holder undertaken any relevant, documented training in relation to tenant and property management in the last 3 years? (tick as appropriate)

Yes	<input type="checkbox"/>	Please include copies of any training certificates with the application
No	<input type="checkbox"/>	Note: If the proposed licence holder has not taken appropriate and relevant documented training it will be a condition of the licence to undertake relevant training. Details of providers will be listed on the licence document if you are granted a licence.



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4.10 Fit and Proper Declaration (Proposed Licence Holder 1)

Please answer the questions below in relation to unspent convictions. There are two parts to this; One in relation to the licence holder and anybody that the licence holder is 'associated' with. In short, this is anybody that the licence holder knows, friends, family and business relations etc. You must answer these questions in order for us to make a decision as to whether the licence holder is a Fit and Proper person.

For partnerships please answer the questions below for all individuals within the partnership.

4.11 Does the proposed licence holder named above or any associate of the proposed licence holder named above have any unspent 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?

Yes

No

4.12 Does the proposed licence holder named above or any associate of the proposed licence holder named above have any other unspent convictions that may be relevant to any associate of the proposed licence holder fitness to hold a licence and / or manage the HMO or house?

Yes

No

4.13 Has any court or tribunal found against the proposed licence holder named above or any associate of the proposed licence holder named above that he has 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?

Yes

No

4.14 Has the proposed licence holder named above or any associate of the proposed licence holder named above ever contravened any 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?

Yes

No



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4.15 Does the proposed licence holder named above or any associate of the proposed licence holder named above own or manage, or 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.

Yes

No

4.16 Does the proposed licence holder named above or any associate of the proposed licence holder named above own or manage, or 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?

Yes

No

4.17 Does the proposed licence holder named above or any associate of the proposed licence holder named above own or manage, or have they 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?

Yes

No

4.18 Has the proposed licence holder named above or any associate of the proposed licence holder named above acted otherwise than in accordance with any applicable code of practice approved under section 233 of the Housing Act 2004?

Yes

No

If you have answered YES to any of the questions 4.11 to 4.18 for Proposed Licence Holder and/or Associate please provide details below (attach separate sheet if necessary):

- Question reference (e.g. 4.12)
- Proposed Licence Holder or associate(s)?
- If associate, what is the relationship of the offender to the Proposed Licence Holder
- Details of the offence
- Date of the conviction
- Date heard
- Police Force/Council



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Section 5 - Do you wish to apply for a joint licence holder? (Tick appropriate option)

Yes Continue below and contact selective licence to request section 5/7 – additional licence holder
No Continue to section 6

6.1 Is the Proposed Manager the same as the Proposed Licence Holder from Section 4 and/or Section 5 (additional joint proposed Licence Holder)?

Yes Go to Section 8 – Management Arrangement on page 23
No Go to Section 6.2

Proposed Manager 1 (New Details)

6.2 Which of the following is the Proposed Manager 1? (tick appropriate option)

An Individual Complete section 6.3 only and continue from section 6.7
A Company Complete section 6.4 only and continue from section 6.7
A Charity Complete section 6.5 only and continue from section 6.7
A Partnership Complete section 6.6 only and continue from section 6.7

Go to Section 6.7 – Proposed Manager 1 Interest

Section 6.3 – An Individual Proposed Manager's 1 Details

Title:	Surname:
Forename:	Middle name(s) (if any):

Proposed Manager's 1 Address

House number / Building name:	Town / City:
Address line 1:	County:
Address line 2:	Postcode:

Proposed Manager's 1 Contact Details

Home number:	Work number:
Work number:	Email Address:

Section 6.4 – Limited Company as Proposed Manager 1

6.4 Company's Details

Full name of company:	
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Companies House numbers are 8 digits long, if the number you have is shorter than 8 digits it probably should have leading zeros. Ensure the number is entered without any spaces before or after the number

Company number:	
Trading name and address (if different):	

Company's Registered Office Address



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House number / Building name:	Town / City:
Address line 1:	County:
Address line 2:	Postcode:

Company's Contact Details

Telephone number:	Website:
Email address:	

Go to Section 6.7 – Proposed Manager 1 Interest

Section 6.5 – A Charity Organisation as Proposed Manager 1 Charity's Details

Full name of Charity:	
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Companies House numbers are 8 digits long, if the number you have is shorter than 8 digits it probably should have leading zeros. Ensure the number is entered without any spaces before or after the number.

Charity number:	
Trading name and address (if different):	

Charity's Registered Office Address

House number / Building name:	Town / City:
Address line 1:	County:
Address line 2:	Postcode:

Charity's Contact Details

Telephone number:	Website:
Email address:	

Section 6.6 - Partnership details including Limited Liability Partnership as Proposed Manager Partnership's Details

Is this an Limited Liability Partnership (LLP)? (tick appropriate option)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Note: This is a legally registered partnership and information on which can be found on Companies House

Full name of Partnership:	
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Companies House numbers are 8 digits long, if the number you have is shorter than 8 digits it probably should have leading zeros. Ensure the number is entered without any spaces before or after the number.

Partnership number: (only for LLP Registered Partnership)	
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Partnership's Registered Office Address

House number / Building name:	Town / City:
Address line 1:	County:
Address line 2:	Postcode:

If the correspondence address is different to the above, please provide the alternative address

House number / Building name:	Town / City:
Address line 1:	County:
Address line 2:	Postcode:

Partnership's Contact Details

Partnership's telephone number:	Website:
Email address:	

Individuals in the partnership (if not Limited Liability Partnership)

How many individuals make up the partnership Partner(s)

Partner 1 Details

Title:	Surname:
Forename:	Middle name(s) (if any):

Partner 1 Address

House number / Building name:	Town / City:
Address line 1:	County:
Address line 2:	Postcode:

Partner 1 Contact Details

Home telephone number:	Mobile number:
Work telephone number:	Email address:
Involvement / role in partnership:	

Partner 2 Details

Title:	Surname:
Forename:	Middle name(s) (if any):

Partner 2 Address

House number / Building name:	Town / City:
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Address line 1:

County:

Address line 2:

Postcode:

Partner 2 Contact Details

Home number:

Mobile number:

Work number:

Email address:

Involvement / role in partnership:

**Note: If there are additional partners, please include details on a separate sheet
Continue with Section 6.7 below – Proposed Manager 1 Property Interest**

6.7 Does the proposed manager have any of the following interests in the property? (tick all that applies)

Owner / Freeholder

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Leaseholder

A person having control of the HMO or house

Other

None of the above

Enter 'Other' interest in the property:

Note: 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

6.8 Is the Proposed Manager accredited with Unipol/ANUK? (Tick all that apply)

Unipol / ANUK

<input type="checkbox"/>
<input type="checkbox"/>

Not Accredited

Fit and Proper Declaration for Proposed Manager 1

Please answer the questions below in relation to unspent convictions. There are two parts to this; one in relation to the proposed manager and then anybody that the proposed manager is 'associated' with. In short, this is anybody that the proposed manager knows, friends, family and business relations etc. You must answer these questions in order for us to assist us in making a decision on whether the proposed manager is a Fit and Proper person. Tick each answers as appropriate. For partnerships please answer the questions below for all individuals within the partnership



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6.11 Does the proposed manager named above or any associate of the proposed manager have any unspent 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?

Yes

No

6.12 Does the proposed manager named above or any associate of the proposed manager have any other unspent convictions that may be relevant to any associate of the proposed licence holder fitness to hold a licence and / or manage the HMO or house?

Yes

No

6.13 Has any court or tribunal found against the proposed manager named above or any associate of the proposed manager named above that he has 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?

Yes

No

6.14 Has the proposed manager named above or any associate of the proposed ever contravened any 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?

Yes

No

6.15 Does the proposed manager named above or any associate of the proposed manager own or manage, or 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.

Yes

No

6.16 Does the proposed manager named above or any associate of the proposed manager own or manage, or 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?

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Yes

No

6.17 Does the proposed manager named above or any associate of the proposed manager own or manage, or have they 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?

Yes

No

6.18 Has the proposed manager named above or any associate of the proposed manager acted otherwise than in accordance with any applicable code of practice approved under section 233 of the Housing Act 2004?

Yes

No

If you have answered YES to any of the questions 6.11 to 6.18 for Proposed Manager 1 and/or Associate please provide details below (use separate sheet if necessary):

- Question reference (e.g. 6.17)
- Proposed Manager or associate?
- If associate please state the relationship of the offender to the Proposed Manager
- Details of the offence
- Date of the conviction
- Date Heard
- Police Force/Council

Section 7 - Do you wish to apply for joint Proposed Manager 2?

Yes

Continue application - Contact Selective Licence Team to request Section 7 - Additional LMA

No

Continue with Section 8 – Management Arrangement

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Section 8 - Management Arrangements

8.1 Who has the authority to repair and maintain the property? (tick as appropriate)

Licence Holder 1	Manager 1	Other (provide details)
<input type="checkbox"/>	<input type="checkbox"/>	

8.2 Please give details of the named person's authority to repair and maintain the property:

8.3 Are there any financial limitations or restrictions in place for this person? (tick as appropriate)

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
-----	--------------------------	----	--------------------------

8.4 If Yes to Question 8.3, at which point (financially) do they need to gain approval for expenditure?

8.5 From whom do they need to gain approval to exceed this amount?

8.6 What is this person's relationship to the property
e.g. Freeholder, Leaseholder etc.

8.7 Can this amount be exceeded in an emergency
e.g. broken boiler, burst water pipe etc (tick as appropriate)

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
-----	--------------------------	----	--------------------------

8.8 Is any proposed licence holder declared an undischarged bankrupt? (tick as appropriate)

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
-----	--------------------------	----	--------------------------

If you have answered Yes to Question 8.8, please provide details of bankruptcy below:

Details of bankruptcy:

Date of bankruptcy:

8.9 Does the proposed licence holder have any outstanding County Court Judgements (CCJs) against them or any company they are associated with? (tick as appropriate)

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
-----	--------------------------	----	--------------------------

If you have answered Yes to Question 8.9, please provide details of CCJ's below:

Details of the CCJ:

Date of the CCJ:

8.10 Is any proposed manager declared an undischarged bankrupt? (tick as appropriate)

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
-----	--------------------------	----	--------------------------

If you have answered Yes to Question 8.10, please provide details of bankruptcy below:

Details of bankruptcy:



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Date of bankruptcy:

--

8.11 Does the proposed manager have any outstanding County Court Judgements (CCJs) against them or any company they are associated with? (tick as appropriate)

Yes

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No

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If you have answered Yes to Question 8.9, please provide details of CCJ's below:

Details of the CCJ:

--

Date of the CCJ:

--

Section 9 – Relevant Persons (Individual Property Licence Only) Block Licence Applicant to complete Relevant Persons Appendix - Spreadsheet

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:

1. Any mortgagee of the property (i.e. mortgage company) to be licenced
2. 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
3. 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)
4. The proposed licence holder (if that is not you)
5. The proposed managing agent (if any) (if that is not you)
6. Any person who has agreed that they will be bound by any conditions in a licence if it is granted

You must tell each of these persons:

1. Your name, address telephone number and e-mail address or fax number (If any)
2. 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)
3. 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
4. The address of the property to which the application relates
5. The name and address of the local housing authority to which the application will be made and the date the application will be submitted



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Mortgagees

9.1 Do you have a mortgage on the property (tick appropriate response)

Yes

No

**If you have answered Yes, please provide Mortgage details below
If you have answered No, continue with Section 9.2 – Relevant Persons**

Mortgage Providers Name
(if applicable) :

Mortgage Providers Address

Building Name / Number:

Town:

Number and Street Name:

County:

Email address (optional):

Postcode:

Date notice served to mortgage provider:

Any Freeholders, Leaseholders or any other person who has agreed that they will be bound by any conditions in a licence if it is granted that have not already been entered on this form.

9.2 Do you want to add another Relevant Person (tick as appropriate)

Yes

No

**If Yes, provide details below
If No, go to 9.3**

Note: There may be other persons involved with the property, who have agreed to be responsible for the licence conditions, subject to being granted.

Full name / Company name:

Company number:

Town / County:

Building Name/Number:

County:

Address line 1:

Postcode:

Address Line 2:

Email:

Interest in the property:

Date notice served to Relevant Person:

9.3 Does any person with an estate or interest in the property, or any person associated with those persons, have a banning order under section 16 of the Housing and Planning Act 2016, in force against them? (tick as appropriate)

Yes

Answer questions below and continue with Section 10 – Property Details

No

Continue with Section 10 – Property Details

Name of the banned person



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Relationship of the banned person to the property

Date of the banning order

Local Housing Authority who applied for the order

Note: If there are additional relevant persons, please include details on a separate sheet

Section 10 – Property Details

10.1 When was the property built? (Tick appropriate response)

Before 1919	<input type="checkbox"/>	1965 > 1979	<input type="checkbox"/>
1919 > 1944	<input type="checkbox"/>	After 1979	<input type="checkbox"/>
1945 > 1964	<input type="checkbox"/>		

10.2 Please select the description that best represents this property (Tick as appropriate)

Detached	<input type="checkbox"/>
Semi-detached	<input type="checkbox"/>
Terraced	<input type="checkbox"/>
End of Terrace	<input type="checkbox"/>
Purpose built block of flats	<input type="checkbox"/>
Mixed residential and commercial	<input type="checkbox"/>
House converted into self-contained flats	<input type="checkbox"/>

10.3 Is the building a listed building? (Tick appropriate response)

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
-----	--------------------------	----	--------------------------

Note: Buildings of special architectural or historic interest are 'listed', and are graded I, II* and II according to their importance.

10.4 Are there any people aged less than 5 years, over 65 years or with a disability living within the property at present? (tick appropriate response)

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
-----	--------------------------	----	--------------------------

10.5 How often is the property inspected? (tick appropriate response)

At least every 3 months	<input type="checkbox"/>	Between 3-6 months	<input type="checkbox"/>	Between 6-12 months	<input type="checkbox"/>	Longer than 12 months	<input type="checkbox"/>
Never	<input type="checkbox"/>						

10.6 Is there current landlord building insurance for this property? (tick appropriate response)

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
-----	--------------------------	----	--------------------------

****Please include a copy of the current landlord insurance certificate with this application**
If you do not have appropriate building insurance in place this will be added as a condition**



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10.7 Are all deposits protected in a registered scheme? (tick appropriate response) Yes No No deposit taken

Tenancy deposits are required to be registered with a tenancy deposit scheme. More information can be found on the government website. www.gov.uk/tenancy-deposit-protection

10.8 Are all the amenities that are supplied within the property maintained in good, clean repair? (tick appropriate response) Yes No

If you have answered No to question 10.8, please state which amenities are not and the reason why?

10.9 How many bedrooms does the property have? Bedrooms

Safety of property and installation (tick appropriate response)

10.10 Do any rooms have solid fuel appliances? e.g. coal fire, wood burner, fire grate Yes No

Yes – Continue with question 10.11
No – Continue with question 10.12

10.11 Do all rooms with solid fuel appliances have carbon monoxide alarms present? Yes No

Carbon monoxide alarms should be present in any room with a solid fuel appliance. Please refer to The Smoke and Carbon Monoxide Alarm (England) Regulations 2015

10.12 Does the property contain gas appliances not provided by the tenant i.e. boilers, water heaters etc.. Yes No

If Yes – Go to question 10.13 – Gas Appliances Safety Requirement
If No – Go to question 10.14 – Electrical Installation Condition Report (EICR)

10.13 Do the gas appliances comply with any safety requirements in any enactment? Yes No

What is the expiry date of the gas certificate?

****Please include a copy of any relevant gas certificates with this application****

10.14 If you have a 'satisfactory' Electrical Installation Condition Report (EICR) or an Electrical Installation Certificate please enter the expiry date of the condition report or certificate (Optional)

****Please include a copy of a 'satisfactory' EICR or an Electrical Installation Certificate****

10.15 Do you have Portable Appliance Test (PAT) certificates for the portable electrical appliances you provide in the property? (select appropriate response)

Yes No No Portable Appliance provided

****Licence Condition****



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10.16 If Yes to question 10.15, are all portable appliances supplied by you safe and maintained in good working order? Yes No

10.17 What type of windows does this property have? (select appropriate response) Single Glazed Double Glazed Part Single/ Double Glazed

10.18 What is the Energy Performance Certificate (EPC) rating for the property? (tick appropriate response)

A	B	C	D	E	F	G	Exempt
---	---	---	---	---	---	---	--------

Please include a copy of the EPC with the application form – If exempt please provide evidence.

10.21 Fire Safety

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

- 1 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)
- 2 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)
- 3 A sprinkler or misting system (A sprinkler or mister is also activated alongside the alarm)
- 4 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)
- 5 Battery operated smoke alarms (Alarms powered only by batteries; no back up power or connection or mains wire)
- 6 None of the above

10.22 Is a contractor employed to inspect and maintain the fire alarm system (if applicable – select appropriate response) Yes No

10.23 If yes, please provide the name of this person / company:

10.24 What is the expiry date of the fire certificate? (only required if you have selected option 1 above)

Please include a copy of the current fire certificate with this application (if applicable)

10.25 Where are the battery operated smoke alarms fitted? (if applicable) (only required if you have selected option 5 for question 10.21)

Within each living space

On each floor

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10.26 Are all exit doors openable from the inside without the use of a key?
(select appropriate response) Yes No

Note: The door can be opened from the inside with a thumb turn lock, not requiring the use of a key to unlock. This allows occupants to escape in case of an emergency or fire without having to find a key.

10.27 Are there any bedrooms that are 'inner rooms'?
(select appropriate response) Yes No

Note: Inner rooms are rooms which are accessed through another room

10.28 Do these 'inner rooms' have an escape window? Yes No

10.29 Does all furniture provided to tenants within the property meet the safety requirements contained in any enactment? Yes No N/A

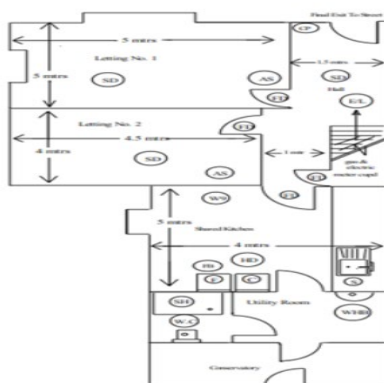
Note: The furniture should meet the relevant fire safety regulations

Section 11 - Unit Amenities (optional)

Name of unit / bedroom (e.g. Bedroom 1, Bedroom 2 etc..)	Number of people living in this unit	Floor area (in sq metres)

Provide additional properties on a separate sheet if necessary

Please attach a sketch plan if you have one, with measurements, showing the location and size of each room in the property. Below is an example showing the type of sketch and detail required. Please use the abbreviations listed below to mark details on the plan. Please provide a separate sketch of each floor level of the property. Please add additional sheets if you require further space. If you already have plans of the property you may submit these separately.



EXAMPLE GROUND FLOOR PLAN

KEY TO SYMBOLS TO BE USED ON PLAN

- (FD) FIRE DOOR
- (EL) EMERGENCY LIGHTING
- (SD) SMOKE DETECTOR
- (HD) HEAT DETECTOR
- (AS) ALARM SOUNDER
- (CP) CALL POINT
- (FB) FIRE BLANKET
- (W9) WATER EXTINGUISHER
- (AAF) FOAM EXTINGUISHER
- (SH) SHOWER
- (WC) WATER CLOSET
- (C) COOKER
- (S) SINK
- (F) FRIDGE
- (B) BATH
- (WHB) WASH HAND BASIN
- (FAP) FIRE ALARM PANEL



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DECLARATION 1 - Statutory declaration for release of information

To be completed by Proposed Licence Holder 1

(Company representative to sign if Proposed Licence Holder 1 is company/partnership)

All information provided will be treated in confidence and in accordance with current data protection legislation. It will only be used to progress your application.

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

I, the proposed licence holder 1, hereby authorise any statutory body holding information about me, which falls within the categories above, to provide this information on request by the Council

Full Name (please print):	Company Position (if applicable):
Signature:	Date:

DECLARATION 2 – To be completed by applicant and proposed Licence Holder 1

1. I confirm that I am 18 years or over
2. I declare that the information contained in this application is correct to the best of my knowledge
3. I have taken measures to ensure that I have gained the appropriate information in order to answer the questions within this application
4. 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 misleading and which I know is false or misleading or am reckless as to whether it is false or misleading
5. I declare that I have served notice of this application to the persons listed in the relevant persons section who are the only persons known to me that are required to be informed that I have made this application
6. 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 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.
7. I/We declare that I/We have served a notice of this application to the persons above who are the only persons known to me/us that are required to be informed that I/We have made this application.

AGREE TO ALL STATEMENTS ABOVE
(please tick to progress)

Note: Application will not be accepted if declaration is not ticked.



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Applicant	Proposed licence holder 1 (if not the same person as the applicant)
Full Name (Please Print):	Full Name (Please print):
	Position:
Signature:	Signature:
Date:	Date:

For further information on the Housing Act 2004, please visit www.legislation.gov.uk

IMPORTANT

Prior to submitting this application please ensure that this form is fully completed, ensure that all declarations are made and the relevant parts are signed. In the event that the form submitted incomplete the application may not be processed and returned to you, resulting in the property being unlicensed.

If we have to contact you more than once because there are issues with any of the requirements or attachments then it is likely that you will be charged £30 for this and/ or your licence may be refused due to issues with the management arrangements.

Methods of communication

The relevant documentation either granting or refusing of the Landlord Application can be issued to you in electronic form, if you are willing to receive the documentation via email please provide your email address in the box below (optional):

Email address for the service of documents:

I can confirm that I have provided an email address and I accept 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 (tick if applicable)

I agree to receiving text message notifications (tick if applicable)

I understand that by providing an email address 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 Part 2 and 3 of the Housing Act 2004 transmitted by electronic means (via email) in accordance with s247 of the Act. Where I am indicating 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 (tick if applicable)



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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 (Optional).

Please tick to confirm you would like to receive this information

Please tick to confirm the licence holder would like to receive this information

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, Unipol and ANUK), 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 <http://www.nottinghamcity.gov.uk/privacy-statement>

The Data Protection Officer is Naomi Matthews. You can contact the data protection officer at the above address or data.protectionofficer@nottinghamcity.gov.uk

