



Cyngor **Abertawe**
Swansea Council

Houses in Multiple Occupation

Application for a New Licence

from 15th February 2021

This form is to be used for making an application for a new HMO licence under Section 63, Housing Act 2004. The Council's HMO Licensing Policy 2020 applies to this application and any subsequent HMO Licence.

If you are making an application to renew an existing HMO Licence please use the Application for Renewal of a Licence form.

A fee must accompany this application (see guidance note 9).

Please read the Guidance Notes on pages 17 - 19 carefully before completing this form. Incomplete or late submissions may result in this form being returned to you and the term of your licence being reduced.

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

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

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

THIS FORM IS ALSO AVAILABLE IN WELSH

1.4

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.

(a) Nature of interest in the property:

First name:

Last name:

Address:

Postcode:

Contact Details:

Home Tel. No:

Work Tel. No:

Mobile Tel. No:

Email:

(b) Nature of interest in the property:

First name:

Last name:

Address:

Postcode:

Contact Details:

Home Tel. No:

Work Tel. No:

Mobile Tel. No:

Email:

1.5 PROPOSED MANAGER OF THE PROPERTY

Will the proposed licence holder be the manager of the property?

Yes / No

If yes, go to Section 1.6.

If no, please provide details about the manager.

First name:

Last name:

Business name:

Address (if an organisation, give the registered office or other official address):

Contact Details:

Home Tel. No:

Work Tel. No:

Mobile Tel. No:

Email:

1.6 If the proposed licence holder is NOT the owner of the property, the owner and proposed licence holder must sign the following consent.

(a) I, as the owner of the property, hereby give my consent to the person named below being the licence holder:

Name (print):

Signature:

Date:

(b) I consent to being named as the proposed licence holder of the above property:

Name (print):

Signature:

Date:

2.2 Has the proposed licence holder applied, or are they required to apply, for a similar licence for a property in another local authority area? Please state name of local authority and address of properties.

2.3 Please provide addresses of all other properties within the Swansea Council area for which the proposed licence holder has obtained/ intends obtaining a licence.

2.4 Does the proposed licence holder or manager own or have they ever owned a property for which a local authority has refused to grant a similar licence or revoked a similar licence? Please state the name of local authority and address of properties.

2.5 Does the proposed licence holder or manager own or have they ever owned a property which has been the subject of an interim or final management order under the Housing Act 2004? Please state name of local authority and address of properties.

2.6 Has the proposed licence holder or the managing agent ever been declared bankrupt? Please give details.

2.7 MANAGEMENT OF THE PROPERTY TO BE LICENSED

- (a) 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.

- (b) Does the written statement of terms include any clauses relating to antisocial behaviour? **Yes / No**

- (c) Does the written statement of terms include guidelines on procedures for tenants to report necessary repairs and make complaints about the property? **Yes / No**

- (d) Is a deposit required at the start of a new tenancy? **Yes / No**

- (e) Are the terms of the tenancy deposit clearly set out in writing? **Yes / No**

- (f) 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.

- (g) Are tenants given a rent book? **Yes / No**

- (h) Are tenants given receipts for rent payments? **Yes / No**

- (i) 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.

2.7 MANAGEMENT OF THE PROPERTY TO BE LICENSED continued

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.

2.8 DETAILS OF THE EMERGENCY KEYHOLDER, OTHER THAN THE LICENCE APPLICANT

Title: Mr Mrs Miss Ms Other:

First name:

Last name:

Address:

Postcode: Email:

Daytime Tel. No: Mobile Tel. No:

2.9 RENT SMART WALES

(See guidance note 8 for details on Rent Smart Wales)

What is the Rent Smart Wales Registration number for the landlord of the property?

Name:

Number (starting RN)

If the landlord is letting and/or managing the property, what is their Rent Smart Wales Landlord licence number?

Name:

Number (starting LR)

If anyone, who is not the owner of the property is letting and/or managing the property, what is their Rent Smart Wales Agent licence number?

Name:

Number (starting LR)

2.10 I, as manager for the property, declare that I agree with the information given in Part 2 of this application as it relates to me and my management of the property and understand that I must comply with the HMO Management Regulations applying to the property. (see guidance note 11)

Name (print):

Company represented:

Signature: Date:

PART 3 The Property

3.1 Please indicate the type of HMO for which the application is made:

- House in multiple occupation
- Flat in multiple occupation
- A house converted into and comprising only of self-contained flats

3.2 Was the property used as an HMO prior to 25th February 2016? Yes / No

If no please provide Planning Permission reference number for Change of Use to HMO

3.3 Is the property:

Detached Semi-detached Terrace End Terrace

3.4 What age is the property?

Pre - 1919 1919 - 1945 1946 - 1964 1965 - 1980 Post 1980

3.5 How many storeys does the HMO have?

(include habitable basements and attic rooms, but not cellars)

1 2 3 4 5 6 7 8 9 10 Other State

3.6 Please indicate number of:

Bedrooms	
Living rooms	
Bathrooms/shower rooms with a toilet and wash-hand basin	
Bathrooms/shower rooms without a toilet and wash-hand basin	
Separate toilet with a wash-hand basin	
Sinks with drainer	
Kitchens	

If the property has a number of separate letting units please use the Additional Information sheet at the back of this form to provide the details for each individual letting unit.

3.7 How many separate letting units are there at the property? (see guidance note 7).

3.13 What fire safety training do you provide to occupiers?

3.14 Is all furniture compliant with the Furniture and Furnishings (Fire Safety) Regulations 1988 (as amended)? Yes No

3.15 Are carbon monoxide detectors provided in rooms used as living accommodation which contain appliances that burn gas, LPG or solid fuel? Please provide details of number and location. Yes No

3.16 GAS AND ELECTRICITY 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).

Does the property have an electrical supply? Yes / No

Electrical Installations

You must supply with this application, a copy of a current and satisfactory 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.

3.17 HEATING AND ENERGY EFFICIENCY

(a) What type of heating does the property have? (Please tick all that apply).

- | | | | |
|-------------------------|--------------------------|--------------------------------------------------|--------------------------|
| Gas central heating | <input type="checkbox"/> | Electrical central heating/night storage heaters | <input type="checkbox"/> |
| Fixed gas heaters/fires | <input type="checkbox"/> | Fixed electrical heaters/fire | <input type="checkbox"/> |
| Solid fuel fires | <input type="checkbox"/> | Other | <input type="checkbox"/> |

If other, please provide details.

(b) Is there an Energy Performance Certificate for the property? Yes / No

NB You must submit an Energy Performance Certificate with this application.

3.18 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.

- (a) Does anybody (other than you) own the property e.g. as freeholder, head lessor, joint owner? **Yes / No**
- (b) Is there a mortgage on the property? **Yes / No**
- (c) Does the property have any tenant or leaseholder with more than 3 years remaining on the tenancy or lease? **Yes / No**
- (d) Is the proposed licence holder somebody other than you? **Yes / No**
- (e) Is the proposed manager somebody other than you? **Yes / No**
- (f) 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.

- 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.

(g) 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

3.20 DECLARATIONS

I/we declare that the information contained in this application is correct to the best of my/our knowledge. I/we understand that 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 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 3.18 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:

Signature:

Date:

Proposed manager

Full name:

Signature:

Date:

Notification of Application for a Mandatory/Additional HMO licence

The Licensing and Management of Houses in Multiple Occupation and Other Houses (Miscellaneous Provisions) (Wales) Regulations 2006

The above regulations require that I inform you that a licensing application under Part 2 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 different from proposed licence holder)

Name:

Address:

Tel No:

Email:

Local Housing Authority Applied to:

Swansea Council, Civic Centre, Oystermouth Road, Swansea, SA1 3SN

Date application made (to be made):

Signature:

Date:

If you would like further information on the licensing of houses in multiple occupation in Swansea, please contact the HMO Team at the address above or email hph@swansea.gov.uk or visit our website www.swansea.gov.uk/hmolicensing



Houses in Multiple Occupation

Application Form Guidance Notes

Notes to be read while completing the application form

- (1) These notes should be read before completing the application form.
- (2) If you are the person filling in this application form, then you are the **applicant**. As the applicant you are required to complete every part of the application form and sign the declaration on page 15 of the form, confirming that the information you have provided is correct to the best of your knowledge.
- (3) The **proposed licence holder** is the person whose name will be on the licence (if issued). The proposed licence holder must be the person who is the most appropriate person to hold the licence for the property. This is likely to be the person who receives the rent for the property. (i.e. the income from the property).
 - Not all sections of the form will be relevant to all applicants. Simply insert 'N/A' against those that are not relevant to your application.
 - Where something is relevant but not yet in place at your property, please state your intentions in that respect.
 - The legislation provides that the Local Authority must be satisfied that the proposed licence holder is the most appropriate person to be so. Ordinarily, this Authority would expect that person to be either the property owner or a competent manager and justification will be required where this is not the case.
 - The **manager** will also be named on the licence (if issued). The Authority cannot issue a licence unless it is satisfied that satisfactory management arrangements are in place for the property.
- If a company, rather than an individual, is either the owner, or proposed manager, then full details should be provided, including the name of the company secretary and/or directors where applicable the correspondence address and registered office. Please use Section 3.19 Additional Details to give this information.
- (4) In respect of the **Fit and Proper Persons** declarations the provisions of the Rehabilitation of Offenders Act 1974 (as reformed by the Legal Aid, Sentencing & Punishment of Offenders Act 2012) apply as below for those aged 18 or over on the date of conviction.

Disposal	Rehabilitation Period
More than 30 months to 48 months imprisonment	7 years from end of sentence (including time on licence)
More than 6 months to 30 months imprisonment	4 years from end of sentence (including time on licence)
6 months or less imprisonment	2 years from end of sentence (including time on licence)
Probation Order	12 months from the date of the Order
Community Order	12 months from the date of the Order*
Fine	1 year from date of conviction
Conditional Discharge Order	Last day on which Order has effect
Compensation	Once compensation is paid in full
Absolute Discharge	No rehabilitation period

* Or 2 years from the date of conviction if order does not specify last date it takes effect.

(5) The plan you are required to include will assist officers in processing your application. It can be hand-drawn, but needs to accurately represent the full layout of the property. This should include all doors and exits, the presence of any fire precautions and indicate the use of all rooms.

(6) Please use Section 3.19 Additional Details to give any other information you wish to provide or for continuation of answers, which should be referenced accordingly.

(7) Definitions

For the purpose of this application, the Housing Act 2004 provides the following definitions:

Single household - Persons are not to be regarded as forming a single household unless they are all members of the same family. For this purpose, a person is a member of the same family as another person if:

- (a) they are married or living together as husband and wife (or an equivalent relationship for same sex couples);
- (b) one is a relative of the other;
- (c) one of them is a relative of one member of a couple and the other is a relative of the other member of the couple.

Letting Unit - is for example an individual room in a shared house or one self-contained flat.

(8) **Rent Smart Wales** is the licensing authority for landlord registration and agent and landlord licensing under Part 1, Housing (Wales) Act 2014 that was introduced on 23rd November 2015. See www.rentsmart.gov.wales for further information and details on how to register and apply for a licence. This is separate from and in addition to HMO licensing.

(9) Fees

The licence fee payable depends on the maximum number of occupiers who will be living at the property. Details are on the enclosed sheet.

(10) Declaration

You must let certain persons know in writing that you have made this application or give them a copy of it. Those persons are:

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

You must tell each of these persons:

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

You must sign the Declaration on page 15 to confirm that you have done this.

(11) 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 Local Authority's website www.swansea.gov.uk/hmos

Swansea Council is the data controller for the person information you provide in this application. We are collecting this information as part of our obligation under the Housing Act 2004. Your information will be used to help us fulfil our legal obligation and will not be used for any other purpose. We will not share your data with third parties unless we are required or permitted to do so by law. This would include regulatory bodies such as HM Revenue and Customs or the Police, for the purpose of detecting and preventing fraud or for any other purpose permitted by law.

Data protection law describes the legal basis for our processing your data as necessary for compliance with a legal obligation. For further information about how Swansea Council uses your personal data, including your rights as a data subject, please see our corporate privacy notice on our website www.swansea.gov.uk/privacynotice

(12) Checklist

Please ensure you have enclosed the following with this application.

Fee	<input type="checkbox"/>
Gas Safety Record	<input type="checkbox"/>

Electrical Installation Condition Report	<input type="checkbox"/>
Energy Performance Certificate	<input type="checkbox"/>

(13) Licence Fee and Submitting your Application

The best way to submit your application is to scan and e-mail it, along with relevant certificates to hph@swansea.gov.uk. If you cannot do that please post your application to The HMO Team, Directorate of Place, Swansea Council, Civic Centre, Oystermouth Road, Swansea, SA1 3SN.

We will contact you about paying the fee once the application has been checked. Please see separate sheet for fee structure or check online www.swansea.gov.uk/hmolicensing

(14) Further Information

Further information is available on our website www.swansea.gov.uk/hmos. You can also e-mail hph@swansea.gov.uk or telephone (01792) 635600.

(15) Final Note

The licensing provisions relating to HMOs increase and formalise the obligations for the persons responsible for such properties. You should take time to look through the application form ahead of completing it and consider how these obligations will be met.

Swansea Council's HMO Licensing Policy 2020 includes details on licence conditions, when a licence will be granted, enforcement options and details of our Additional HMO Licensing areas. You can read the Policy on our website www.swansea.gov.uk/hmolicensing

Ultimately, the named persons will be accountable for meeting the conditions included with any licence granted.

Layout Plan

Please provide a layout plan of the property. This need not be to scale and can be hand drawn, but should indicate the use of all rooms and the presence of all fire precaution equipment.