For office use only:	
Civica Ref	
Date received	

Bolton Council

Licensing Application Form

This application form should be completed if you are applying for a mandatory house in multiple occupation licence under Part 2 of the Housing Act 2004.

All communication and completed forms should be sent to:

Bolton Council
Housing Standards
Castle Hill Centre, Castleton Street, Bolton, BL2 2JW

Tel: 01204 338912
Email: housingstandards@bolton.gov.uk

Guidance notes

It is essential that the information which you or your manager / agent provide on the forms can be easily read. Use only black or blue ink to complete this form. Please write only in the boxes provided. If additional information is supplied on a separate sheet(s) please make sure that they are securely attached to the application form.

You must answer all applicable questions on the form and be aware that your answers will be used by the Council to determine whether or not to grant a licence with or without additional conditions, or to refuse to grant a licence. If a question is not relevant, please write "not applicable" in the box. If you fail to complete the form correctly or fail to attach the required certification and documents this will delay the processing of your application and could incur additional fees.

Note: The Council is legally required to hold and make available a public register which contains details about the property and persons managing it.

What is mandatory HMO (Houses in Multiple Occupation) licensing?

From 6th April 2006, The Housing Act 2004 introduced mandatory licensing of high risk HMOs. With effect from 1st October 2018, The Licensing of Houses in Multiple Occupation (Prescribed Description) (England) Order 2018, replaces the Licensing of Houses in Multiple Occupation (Prescribed Descriptions) (England) Order 2006 (S.I. 2006/371) ("the 2006 Order").

The effect of this is that from 1st October 2018 mandatory licensing will apply to all properties occupied by five or more persons, forming two or more households, who share an amenity such as a kitchen, toilet, bathroom or lounge. Buildings consisting of entirely self-contained flats or purpose built flats are exempt from licensing. However, if facilities are not fully contained, whether they are shared or not, such properties may require a licence if they fulfil the mandatory licensing criteria. In addition, premises fulfilling mandatory licensing criteria, with commercial properties at ground floor level also require a licence.

Who needs to be the licence holder?

The licence holder will be legally responsible for the operation of the property to be licensed.

The proposed licence holder should normally be the "person having control" of the property (the person legally entitled to receive the rental income from the property), usually the owner of the property. However, there may be a good reason why this should not be the case (e.g. if the owner is ill or lives abroad). The local authority has a duty to award the licence to the most appropriate person.

The application form

Part 1 - General details
Part 2 - Details of proposed licence holder
Part 3 - Manager details (only complete this section if applicable)
Part 4 - Notification of relevant persons
Part 5 - Details of property to be licensed
Part 6 - Declarations
Part 7 - Application checklist

Part 1 – General Details

1.1

Address of property to be licensed

Property address	
Postcode	

1.2

Name and address of the person(s) who owns the property.

Title		**Owner's full name**		
Owner's address				
Postcode			**Owner's telephone**	

If more than one owner please provide details (use additional sheet if more owners)

Title		**Owner's full name**		
Owner's address				
Postcode			**Owner's telephone**	

1.3

Name and address of freeholder

Name	
Address	
Postcode	

Part 2 – Details of proposed licence holder

2.1

Name and address of a proposed licence holder. The address provided for an individual should be their permanent residence address and two original proofs of address must be provided, one of which must be photographic identification. Examples would include: current photo driving licence, passport, recent bank or building society statement, recent tax correspondence or recent utility bill.

Title		**Full name**	
Address			
Postcode			
Date of birth			
Home telephone No.			
Work telephone No.			
Mobile telephone No.			
Email address			

2.2

If the proposed licence holder is a company, partnership, charity or trust, please indicate which and complete the following.
If not, please go to 2.6

Company		**Partnership**		**Charity**		**Trust**	
Company / partnership / charity / trust address							
Post Code							
Registered Office address (if different than above)							

Telephone number	
Mobile number	
Email address	
Companies House registration number	

2.3

Please provide contact details of all directors/ partners/ trustees – please use separate sheet if more than two. Pre-printed information about the organisation is acceptable, validated by the signature of the appropriate officer.

Title		**Title**	
Company position		**Company position**	
Last name		**Last name**	
First name		**First name**	
Address		**Address**	
Postcode		**Postcode**	
Telephone No.		**Telephone No.**	
E-mail address		**E-mail address**	
Date of birth		**Date of birth**	

2.4

Please provide details of the Company Secretary (if nominated)

Title	
Name	
Company Secretary Address	
Postcode	
Telephone	

E-mail address	

2.5

Only complete this box if the licence holder is NOT a limited company **Please provide an address where all official correspondence should be sent. All partners / trustees should sign their agreement to this address. This will be the address used on the public register**			
Name			
Address			
Postcode			
Telephone			
E-mail address			
I, hereby give agreement to the above address being used for all official correspondence and on the public register.			
Name (Please print)		**Date**	
Signature			
Name (Please print)		**Date**	
Signature			
Name (Please print)		**Date**	
Signature			

2.6

Has the proposed licence holder applied to be a licence holder in respect of any other properties situated in Bolton or any other local authority area? Please provide details below, and use extra sheets of paper if necessary.

Yes		**No**	

Type of licence (e.g. Mandatory, selective etc)	Address of property	Issuing Council

2.7

Is the proposed licence holder a member of an accreditation scheme, landlords association or other relevant professional body?			
Yes		**No**	
Details (e.g. scheme name)			
Membership No.			

2.8

Addresses of other properties owned or managed by the proposed licence holder within Bolton. Please state zero if not applicable.

2.9

Have you an anti-social behaviour/nuisance clause in your tenancy agreement? If so please enclose copy with your application.			
Yes		**No**	

2.10

Fit and Proper Person Declaration – Proposed Licence Holder

The Local Authority must have regard amongst other things to the following matters in relation to any person who will be the licence holder:

(a) details of any unspent convictions that may be relevant to the proposed licence holder's fitness to hold a licence, or the proposed manager's fitness to manage the HMO or house, and, in particular any such conviction in respect of any offence involving fraud or other dishonesty, or violence or drugs or any offence listed in Schedule 3 to the sexual Offenders Act 2003 (offences attracting notification requirements);

(b) details of any finding by a court or tribunal against the proposed licence holder or manager 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;

(c) details of any contravention on the part of the proposed licence holder or manager of any provision of any enactment relating to housing, public health, environmental health or landlord and tenant law which led to civil or criminal proceedings resulting in a judgement being made against them.

(d) Information about any HMO or house that the proposed licence holder or manager owns or manages or has owned or managed which has been the subject of:

(i) a control order under section 379 of the Housing act 1985 in the five years preceding the date of the application; or
(ii) any appropriate enforcement action described in section 5(2) of the Housing Act 2004.

(e) information about any HMO or house the proposed licence holder or manager owns or manages or has owned or managed for which a local housing authority has refused to grant a licence under Part 2 or 3 of the Housing Act 2004, or has revoked a licence in consequence of the licence holder breaching the conditions of their licence; and

(f) information about any HMO or house the proposed licence holder or manager owns or manages or has owned or managed that has been the subject of an interim or final management order under the Housing Act 2004.

Do any of the above apply?	**Yes**	**No**

If Yes, please provide full details below including dates (continue on separate page if required)

2.11

STATUTORY DECLARATION FOR RELEASE OF INFORMATION

To be completed by the proposed licence holder:

All information provided will be treated in confidence and in accordance with the Data Protection Act & General Data Protection Regulations. 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 Criminal Records Bureau, Police, Fire & Rescue Service, Office of Fair Trading, other local authorities and other relevant departments within this Council, for example Council Tax, Revenues and Benefits and Debtors. Please sign and date the declaration below in order for us to progress your application.			
Name (Please print)		**Date**	
Signature			

Part 3 – Manager Details

Only complete this section if a manager/agent is appointed

3.1

Has an agent or individual been employed or appointed to manage the property? (If no go to part 4)

Yes		**No**	

3.2

Name and address of person managing the property

Title		**Full name**	
Address			
Postcode			
Date of birth			
Home telephone No.			
Work telephone No.			
Mobile telephone No.			
Fax No			
Email address			

3.3

If the manager is a company, partnership, charity or trust, please indicate which and complete the following.

Company		**Partnership**		**Charity**		**Trust**	
Company / partnership/ charity / trust name and address							

Post Code	
Registered Office address (if different than above)	
Telephone number	
Fax number	
Email address	

3.4

Please provide contact details of all directors/ partners/ trustees – please use separate sheet if more than two. Pre-printed information about the organisation is acceptable, validated by the signature of the appropriate officer.

Title		**Title**	
Company position		**Company position**	
Last name		**Last name**	
First name		**First name**	
Address		**Address**	
Postcode		**Postcode**	
Telephone No.		**Telephone No.**	
E-mail address		**E-mail address**	
Date of birth		**Date of birth**	

3.5

Only complete this box if the manager/agent is NOT a limited company **Please provide an address where all official correspondence should be sent. All partners / trustees should sign their agreement to this address. This will be the address used on the public register**	
Name	

Address	
Postcode	
Telephone	
E-mail address	

I, hereby give agreement to the above address being used for all official correspondence and on the public register.			
Name (Please print)		**Date**	
Signature			
Name (Please print)		**Date**	
Signature			
Name (Please print)		**Date**	
Signature			

3.6

Is the proposed manager a member of an accreditation scheme, landlords association or other relevant professional body?			
Yes		**No**	
Details (e.g. scheme name)			
Membership No.			

3.7

Fit and Proper Person – Proposed Manager/Agent

The Local Authority must have regard amongst other things to the following matters in relation to any person who will be the manager/agent:

(a) details of any unspent convictions that may be relevant to the proposed licence holder's fitness to hold a licence, or the proposed manager's fitness to manage the HMO or house, and, in particular any such conviction in respect of any offence involving fraud or other dishonesty, or violence or drugs or any offence listed in Schedule 3 to the sexual Offenders Act 2003 (offences attracting notification requirements);

(b) details of any finding by a court or tribunal against the proposed licence holder or manager 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;

(c) details of any contravention on the part of the proposed licence holder or manager of any provision of any enactment relating to housing, public health, environmental health or landlord and tenant law which led to civil or criminal proceedings resulting in a judgement being made against them.

(d) Information about any HMO or house that the proposed licence holder or manager owns or manages or has owned or managed which has been the subject of:

(i) a control order under section 379 of the Housing act 1985 in the five years preceding the date of the application; or
(ii) any appropriate enforcement action described in section 5(2) of the Housing Act 2004.

(e) information about any HMO or house the proposed licence holder or manager owns or manages or has owned or managed for which a local housing authority has refused to grant a licence under Part 2 or 3 of the Housing Act 2004, or has revoked a licence in consequence of the licence holder breaching the conditions of their licence; and

(f) information about any HMO or house the proposed licence holder or manager owns or manages or has owned or managed that has been the subject of an interim or final management order under the Housing Act 2004.

Do any of the above apply?	**Yes**	**No**

If Yes, please provide full details below including dates (continue on separate page if required)

3.8

STATUTORY DECLARATION FOR RELEASE OF INFORMATION

To be completed by the proposed manager/agent:

All information provided will be treated in confidence and in accordance with the Data Protection Act & General Data Protection Regulations. 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 Criminal Records Bureau, Police, Fire & Rescue Service, Office of Fair Trading, other local authorities and other relevant departments within this Council, for example Council Tax, Revenues and Benefits and Debtors. Please sign and date the declaration below in order for us to progress your application.			
Name (Please print)		**Date**	
Signature			

Part 4 – Notification of relevant persons

4.1

You must let certain persons know that you are making this application.

The persons who need to know about it are:-

- **Any mortgagee**
- **Any owner of the property to which the application relates (if that is not yourself) 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 a flat) who is known to you, other than a statutory tenant or other tenant whose lease or tenancy is for less than 3 years (including a periodic tenancy)**
- **The proposed licence holder (if that is not you)**
- **The proposed managing agent (if any) (if that is not you)**
- **Any person who has agreed that he/she will be bound by any condition(s) in a licence if it is granted.**

You must tell each of these persons:-

- **Your name, address, telephone number, fax number and e-mail address (if any)**
- **The name, address, telephone number, fax number and e-mail address (if any) of the proposed licence holder (if it will not be you)**
- **The address of the property to be licensed**
- **The type of licence applied for e.g. mandatory, selective etc.**
- **The name and address of the local authority to which the application will be made.**
- **The date the licence application will be submitted**

Please provide details of all persons notified of licence application. (e.g. tenants, mortgage company including account number, etc.). Please use additional sheet if required. The Council will send copies of the draft and final licence to all interested parties.

4.2

Full names of all tenants (include on separate sheet if required)	

Interest in the property or the application	Tenants
Date notification given	

Full name	
Address	
Post code	
Interest in the property or the application	
Date notification given	

Full name	
Address	
Post code	
Interest in the property or the application	
Date notification given	

Full name	
Address	
Post code	
Interest in the property or the application	
Date notification given	

Part 5 – Details of property to be licensed

5.1

Description of property

Detached	Semi - detached	Terraced	End - terrace	Mixed residential/ commercial	Other (please specify)

5.2

When was the property originally built and approximate date of conversion?

Pre 1919	1919-1945	1945-1964	1965-1980	Post 1980
If converted, approximate date of conversion				
Date:				

5.3

How many storeys/floors are there in the property? (Include occupied basement and attics)

One	Two	Three	Four	Five	Other

5.4

Is any part of the building used for commercial activity? If yes, state location.

Yes		No	
Location (e.g. ground floor)			

5.5

Details of Occupation

Number of occupants at date of application	
Proposed maximum number of occupants	
Proposed maximum number of households	

5.6

Is any accommodation used by the owner(s) family or family of person(s) managing the premises? If yes, indicate no of persons and whether accommodation separate from rest of property.

Yes		**No**	
Number of family persons accommodated			
Separate from rest of property?	**Yes**		**No**

5.7

Number of rooms

Number of individual letting units	
Number of kitchens	
Number of kitchen/diners	
Number of living or dining rooms	

5.8

Do you provide any meals?	**Yes**		**No**	
If yes, state which	**Breakfast**	**Evening meal**		**Breakfast & evening meal**

5.9

Are all the bath/shower rooms provided with heating?	**Yes**		**No**	
If yes, how is this provided?				

5.10

Are all habitable rooms provided with permanently fixed heating facilities?	**Yes**		**No**	
If yes, how is this provided?				

5.11

What type of heating is installed in the property?	
Gas central heating	
Electric central heating	
Fixed gas fires	
Fixed electric fires	
Solid fuel fires	
Other (Please State):	

5.12

Space standards (As detailed in Bolton HMO guidance document)

Are all single bedrooms at least 6.51m^2 or 10.22m^2 if no communal space?	**Yes**		**No**	
Does the kitchen meet the minimum room size for the number of people?	**Yes**		**No**	
Do all other rooms meet the minimum room sizes for the number of people?	**Yes**		**No**	
If no, how is it deficient?				

5.13

Number of facilities

Please complete the following table indicating the number of facilities and whether they are shared or for sole use. Children of any age, including babies, must be included in the number of people.

	Number of facilities	**Number of people sharing facilities**
Number of Kitchens		
Cooker with 4 hobs and grill		
Sink with drainer		
Fridge without freezer		
Fridge freezer		

Microwave oven		

5.14

Provision of personal washing facilities and sanitary accommodation

Please complete the following table indicating the number of facilities and whether they are shared or for sole use. Children of any age, including babies, must be included in the number of people.

Description of room e.g. shower room, toilet room etc.	**Number of facilities**					**Number of people sharing facility**
	Bath with shower	**Bath**	**Shower**	**Toilet**	**Wash hand basin**	

5.15

Fire Precautions

Is the property fitted with a fire detection system in accordance with BS 5839?	**Yes**		**No**	

What type of fire detection system is fitted? (Tick all that apply)	**Yes**
Grade A system covering whole property (including control panel and call points)	
Grade A system covering common parts only (including control panel and call points)	
Grade D system covering whole property	
Grade D system covering common parts	
Domestic battery smoke alarms (not interlinked)	

5.16

Is there emergency lighting in the common parts?	**Yes**		**No**	

5.17

Do all bedrooms lead directly onto the hallway/escape route?	**Yes**		**No**	

5.18

Is the escape route protected by fire doors as described in the guidance document?	**Yes**		**No**	

5.19

Is the escape route kept clear of flammable material and other obstructions?	**Yes**		**No**	

5.20

Are all ceilings in good condition?	**Yes**		**No**	

5.21

Do all walls separating units of accommodation and hallways provide a minimum of 30 minutes fire resistance?	**Yes**		**No**	

5.22

Do you have a contractor to maintain and inspect your fire alarm and emergency lighting system?	**Yes**		**No**	
If yes, please state who:				

5.23

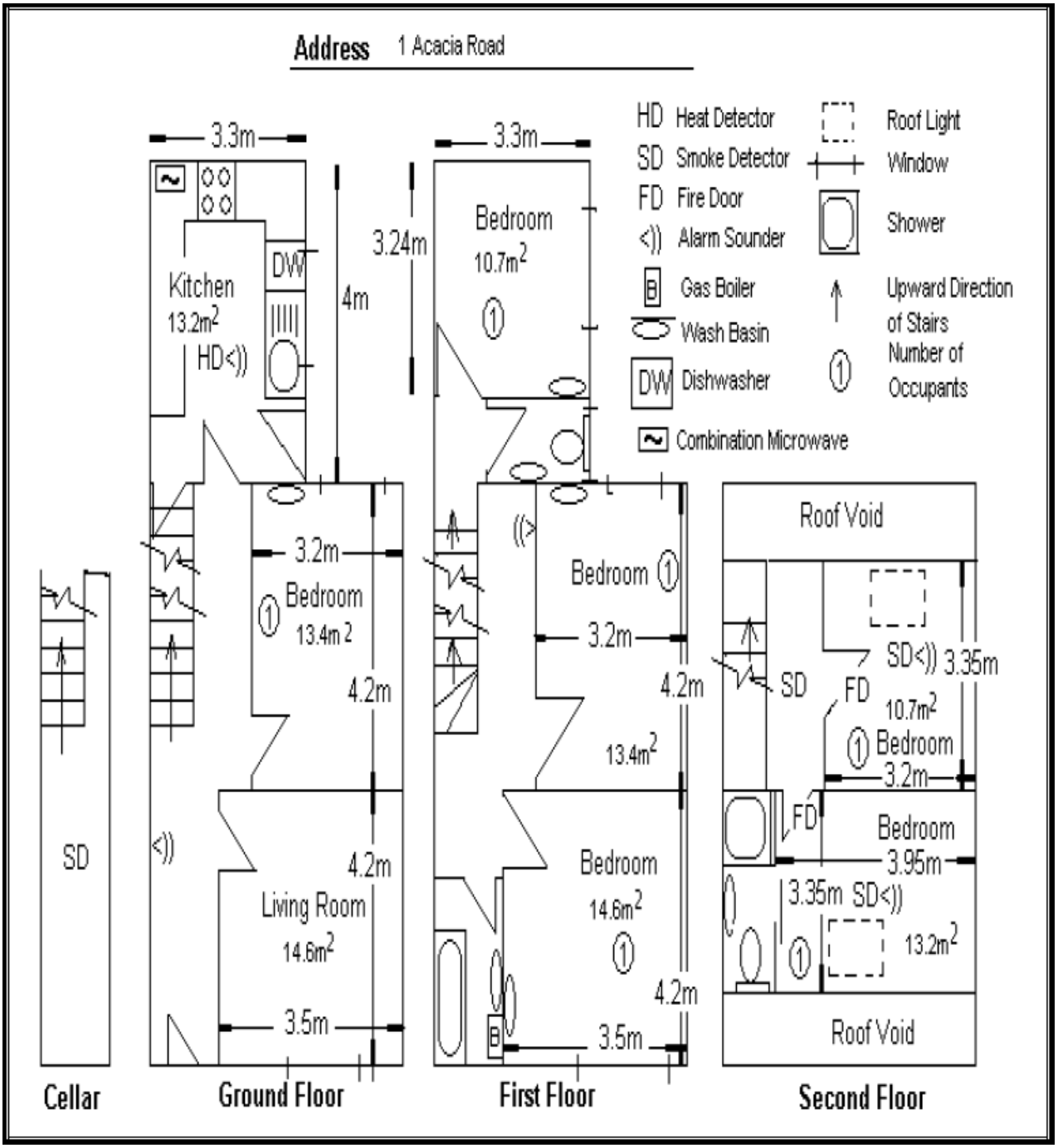
Is there a logbook of inspection/testing?	**Yes**		**No**	

5.24

Are fire blankets provided to all kitchen areas?	**Yes**		**No**	
Are multi risk type fire extinguishers sited on the hallways on every floor level?	**Yes**		**No**	
Is a multi-risk fire extinguisher provided in every communal kitchen?	**Yes**		**No**	

5.25

You must provide a floor plan otherwise your application will be returned to you as being incomplete. The floor plan should indicate all rooms communal areas, stairways etc and how they relate to each other. The floor plan must clearly indicate the use of **each room** and its approximate **dimensions**. See the notes below on taking measurements. The plan should indicate location of fire doors, details of the fire alarm system and any other fire precautions. Ensuite measurements to be included but should be separate from the overall bedroom measurement. See example below.



NOTE: Any area of the room in which the ceiling height is less than 1.5m cannot be counted towards the minimum room size.

5.26

Dimensions of rooms (including bedrooms, kitchens, dining/lounges)

Floor level (e.g. ground floor)	Room number	Description of room (e.g. bedroom)	Dimension (e.g. 2.5m x 3.3m)	Total floor area (e.g. 12.5 m^2)

Part 6 – Declarations

6.1

Please note that it is a criminal offence to knowingly supply information that is false or misleading for the purpose of obtaining a licence. Evidence of any statement made in this application may be required at a later date. If we subsequently discover something, that is relevant and which you should have disclosed, or which has been incorrectly stated or described, then your licence may be revoked or other action taken.

NOTE: It is an offence to operate a licensable property without a licence. There is an unlimited fine for this offence on conviction in the Magistrates' court or you may be issued with a civil penalty of up to £30,000. Furthermore an unlicensed property may become subject to an Interim Management Order. This has the effect of the Local Authority taking control of the property. Such an order can last for a maximum of 12 months and may be replaced by a Final Management Order which can last for up to 5 years.

Section 21 of the Housing Act 1988 is not available for the eviction of tenants in an unlicensed property.

In addition to the above sanctions the Residential Property Tribunal may also make a rent repayment order requiring you to repay any rents due during the period for which the property was unlicensed.

6.2

FINANCIAL STATUS

A licence holder must have appropriate finance available to ensure the proper management and maintenance of the property.

Where a manager is employed financial arrangements must be made which would enable them to carry out works deemed necessary for the proper management of the property.

Please confirm, by signing below, that adequate arrangements have been made to ensure that finance is available to achieve compliance with the conditions required by the licence and approved standards.

6.3

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 functions under Parts 1 to 4 of the Housing Act 2004 that is false or misleading or I/we are reckless as to whether it is false or misleading.

I/we declare that I/we have read the statement above and completed all parts of this application to the best of my/our knowledge and ability, and it is valid as of the date overleaf.

6.4

Each person listed must sign this form in confirmation of statements 6.1, 6.2 and 6.3. Please print names.

Licence holder name		**Date**	
Signature			

Property owner		**Date**	
Signature			

Manager name (if any)		**Date**	
Signature			

Name (Any other party)		**Date**	
Signature			

(In the case of partnerships or trustees, all partners or trustees must sign. In the case of a limited company, the form must be signed by a Director or Company Secretary or other authorised officer, in which case we will require proof of authority.)

Part 7 – Application checklist

When returning your application you should ensure that the application form is fully completed and is accompanied by the following items.

PAYMENT: On receipt of a valid of your application you will then be invoiced for the appropriate fee, which must be paid before the licence is issued. **Payment by cash or cheque is not accepted and should not be sent with your application**.

	Required Items	Enclosed (tick box)	Verified (office use)	Originals seen (dates seen)
1	Original Annual Gas Safety Certificate (CP12) Note: only required where a gas supply is present			
2	Original Electrical Installation Condition Report (latest copy)			
3	Portable appliance testing (PAT) certificate only for appliances provided by the landlord			
4	Copy of anti-social behaviour clause from tenancy agreement			N/A
5	One form of photographic ID and proof of address (provide in person)	N/A	N/A	
6	Copy of automatic fire alarm design, installation and commissioning certificate as required by BS5839 (if a new installation)			
7	Copy of annual automatic fire alarm servicing certificate.			
8	Copy of emergency lighting certificate			
9	Copy of fire extinguisher certificate			
10	Scale floor plan of property with measurements, showing the location and size of each room in the property. Please provide a separate plan of each floor level of the property.			N/A
11	Fire Risk Assessment Report			