

Application to license a house in multiple occupation (HMO)



Please use the accompanying notes when completing this form.

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

If you are completing a paper copy of this form please use 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.

Before making an application you will need to make sure you have the following documentation:

For office use only
Date received
Date passed to officer
Reference number
Fees received

A current gas safety certificate (if there is gas in the property)	~
A current electrical installation condition report	/
A current test certificate for the automatic fire detection system (if there is one)	V
A current test certificate for the emergency escape lighting system (if there is one)	V
An energy performance certificate (EPC)	V
A written fire risk assessment carried out by a competent person (if you have one. If you do not currently have one you will be required to produce one within 6 months of your licence being issued)	/
A floor plan, showing the room sizes, the fire protection measures and the kitchen, toilet and bathroom facilities (see section 13)	
A blank copy of a tenancy agreement for the property that is given to tenants	V
The appropriate fee (see separate fee sheet)	V

Section 1:

1a.	Type of application (please tick appropriate box): ☐ New licence ☐ Renewal of licence		
	If renewal: existing licence number: Expiry date:		
	Planning permission may be required before using the property as an HMO - check with the Planning Service by emailing planning.dm@spelthorne.gov.uk or by calling 01784 451499		
1b.	HMO to be licensed: Property number or name		
	Street		
	Town		
	County Postcode		
Se	tion 2:		
Apı	licant details:		
2a.	First name		
2b.	Surname		
2c.	. email		
2d.	. Main telephone number		
2e.	. Other telephone number		
2f.	Are you: Applying as an individual (fill in your address below, 2g) OR Applying as a business or organisation, including as a sole trader (go to 2h)		
2g.	Your address (if applying as an individual): Property number or name		
	Street		
	Town		
	County Postcode		
	Country (go to section 3)		
	licant business (if applying as a business or organisation) Is your business registered in the UK with Companies House? Yes No		
2i.	Is your business registered outside the UK? □ Yes □ No		

2j.	Business name (if your business	s is registered, use its regis	stered name):
2k.	Legal status (select one): Private limited company Public limited company		☐ Sole trader
2 I.	Your position in the business:		
2m	. Home country (where headquar	ters of your business is lo	cated):
2n.	Business address: Property number or name		
	Street		
	Town		
	County		Postcode
	Country		_
2o.	email		
2p.	Main telephone number		
org	mplete Section 3 if you are an inc panisation. Please note the details ister.		-
Pro ope	ction 3: posed licence holder: Each individuality peration of the HMO to be licensed et to and evict tenants;		0 , 1
	access all parts of the premises to	the same extent as the ov	wner; and
• 6	authorise any expenditure necess others		
(the of t the tha	e proposed licence holder should e person legally entitled to receiv the property. However, there may owner is ill or lives abroad). The n freeholder. The local authority son.	e the rental income from to be a good reason why thing 'person having control' m	the property), usually the owner is should not be the case (eg if nay be the leaseholder rather
3a.	Are you the proposed licence ho Yes (go to section 5) No	older?	
Pro	vide the following additional det		
		ails about yourself.	
3b.	Your interest in the property (eg	,	

	☐ Yes (go to section 3e) ☐ No (fill in details below)				
	Property number or name				
	Street				
	Town				
	County	Postcode			
	Country				
3e.	email				
3f.	Main telephone number				
Pro	ction 4: posed licence holder: businesses and organisa ister)	ations (this address will appear on the			
4a.	Legal status of the proposed licence holder:				
	☐ Individual or sole trader (go to section 5)				
	Company (fill in details below)				
	Partnership (fill in details below)				
	☐ Charity or trust (fill in details below)☐ Other	(fill in details below)			
		(dotallo 201011)			
	npany, partnership, charity or trust Business/organisation name (if your business	s is registered, use its registered name):			
4c.	Registration number (if applicable):				
4d.	Business/organisation address Property number or name				
	Street				
	Town				
	County	Postcode			
	Country				
4e.	email				

4g.	Please provide details of all Company Directors and the Secretary (if the proposed licence holder is a company), all Partners (if it is a partnership), and all Trustees (if it is a charity or trust). Continue on a separate sheet if required.			
	ction 5:			
Ow	nership and control of the property (HMO) to be licensed.			
5a.	Is the proposed licence holder the owner of the property? I Yes I No			
5b.	Does anybody else have a legal interest in the property (eg as freeholder, leaseholder, mortgage provider)? Yes No			
5c.	Has anybody else agreed to be bound by the conditions of the licence, if it is granted? ☐ Yes (fill in details below) ☐ No (go to section 6)			
pro	vide details about the owner(s) of the property, anyone else who has a legal interest in the perty and/or anybody who has agreed to be bound by the conditions of the licence (if it is nted). Please continue on a separate sheet if necessary.			
5d.	Interest in the property (eg owner, leaseholder, mortgage provider)			
5e.	First name			
5f.	Family name			
5g.	Organisation (if applicable)			
5h.	Address (if an organisation, provide the registered office address or other official address) Property number or name			
	Street			
	Town			
	County Postcode			
	Country			
5i.	email			
5j.	Main telephone number			
	www.spelthorne.gov.uk/hmo eh.residential@spelthorne.gov.uk 01784 446251 5			

Section 6:

Proposed manager of the HMO.

ba.	will the proposed licence holder be	•	
	Yes (go to section 7) No (fill in	details below)	
	vide details about the manager.		
6b.	First name		
6c.	Surname		
6d.	Organisation (if applicable)		
6e.		the registered office address or other official address	
		Postcode	
	Country		
6f.	email		
6g.	. Main telephone number		
Det	Type of HMO (select one): Flat in multiple occupation House	☐ House converted into self contained flats☐ Other	
7b.	. How many storeys does the whole building have? (Including ground floor, below ground and above ground.)		
7c.	. How many storeys does the HMO have? (Include the ground floor, basements, attics and mezzanines)		
7d.	Which levels are these HMOs locate ground level.)	ed on? (Give the levels the HMO is on, in relation to	
7e.	What type of building is it? Detached house Terrace house Back-to-back house Mixed use block Town house	☐ Semi-detached house ☐ End terrace house ☐ Residential block ☐ Grouped structure ☐ Other	

7f.	Are any parts of the building used for non-residential purposes? ☐ Yes (fill in details below) ☐ No (go to section 7g) Describe which parts and how they are used (eg ground floor used for storage)			
7g.	When was the building ☐ Before 1919 ☐ 1965 to 1980	originally built?: 1919 to 1945 After 1980	□ 1946 to	o 1964
7h.	h. Was the HMO to be licensed:☐ Purpose built with its present design			
	☐ Converted from a pre	evious residential d	welling, date of conv	version
	☐ Converted from a no	n-residential structu	ıre, date of conversi	on
Occ	Section 8: Occupation of the HMO to be licensed. Ba. Give the number of households and occupants in the property (A household consists of family members or a cohabiting couple. A group of four friends counts as four separate households. Include any children, and the landlord and family, if applicable):			
		At the time of application	Proposed maximum	
	Separate households	арриовичен		
	Occupants			
	b. If any of the current occupants are children, please state the current age of each child: c. Is there a resident landlord? I Yes (fill in details below) No (go to section 8d)			
8d.		, 		erty (eg B&B, full board,
Acc	ction 9: commodation details. Number of separate let contracts or to separate			its let on separate tenancy

	oms and facilities in the proper number of each of the followin	-	perty:	
		Total in property	Use exclusive to one letting unit	Use shared betweer letting units
Bedrooms (e	xclude bedsits)			
Bedsits (com	bined living/bedrooms)			
•	rooms (exclude kitchen- and bedsits)			
Kitchens (inc	lude kitchen-dining rooms)			
Sinks (exclud	le wash hand basins)			
Shower/bath	irooms			
Toilets in sho	wer/bathrooms			
Separate toil	ets with wash hand basins ernal toilets)			
_	ets without wash hand de external toilets)			
Wash hand b basins)	asins (include all wash hand			
9d. Do all bat cold wate ☐ Yes ☐		nand basins	have a constant su	upply of hot and
cold wate	r? No		have a constant su	
cold wate Yes 4 9e . Are all kite	r?		have a constant su	upply of hot and Number of
cold wate Yes Real kite	r? No chens equipped with the followith draining board			
cold wate Yes Yes Ge. Are all kite a sink w dishwas	r? No chens equipped with the followith draining board		□ Yes □ No	
cold wate Yes Yes 9e. Are all kite a sink w dishwas gas/elec	r? No chens equipped with the followith draining board her		☐ Yes ☐ No ☐ Yes ☐ No	
cold wate Yes Yes 9e. Are all kite a sink w dishwas gas/elec	r? No chens equipped with the follow ith draining board her tric cooker ation microwave		☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No	
cold wate Yes Yes a sink w dishwas gas/elec combina electrica	r? No chens equipped with the follow ith draining board her tric cooker ation microwave		☐ Yes ☐ No	
cold wate Yes Yes a sink w dishwas gas/elec combina electrica worktop	r? No chens equipped with the followith draining board her tric cooker ation microwave I sockets		☐ Yes ☐ No	
cold wate Yes Yes a Yes a sink w dishwas gas/elec combina electrica worktop storage	r? No chens equipped with the followith draining board her tric cooker stion microwave I sockets s for food preparation		☐ Yes ☐ No	
cold wate Yes Yes a Yes a sink w dishwas gas/elec combina electrica worktop storage combine	r? No chens equipped with the followith draining board her tric cooker ution microwave I sockets s for food preparation cupboards		☐ Yes ☐ No	
cold wate Yes Yes 9e. Are all kite a sink w dishwas gas/elec combina electrica worktop storage combine	r? No chens equipped with the followith draining board her tric cooker ation microwave I sockets s for food preparation cupboards ed fridge/freezer		☐ Yes ☐ No	

• self contained letting units (exclusive use of kitchen, bath/shower and toilet) _____

9b. Of these, the number which are:

Section 10:

Heating and energy efficiency

10a.	☐ Fixed gas heaters/fires		Electrical central heating / night storage heaters	
10b.	Do all the roo	ms in the property	have a source of he	eat (eg radiator or fire)?
10c.	c. Do all bathrooms and kitchens have a means of natural or mechanical ventilation? ☐ Yes ☐ No			
	gy efficiency Are the windo	ows double glazed? Some	☐ None	
10e.	Is the roof spa	ace insulated? Some	☐ None	□ N/A
10f.	Provide detail Include the th	s ickness of insulatio	n in mm.	
10g.	Are cavity wa	lls insulated? □ Some	☐ None	□ N/A
10h.	Are hot water □ All	tanks lagged?	☐ None	□ N/A
10i.	 i. Is there an Energy Performance Certificate for the property? Yes No (a survey will need to be carried out before the application is returned) You will be required to submit an Energy Performance Certificate with this application. 			
	tion 11: and electricity	,		
11a.	a. Does the property have a gas supply? ☐ Yes ☐ No			
The	Provide the following details about the last inspection of the gas installation and appliances. The inspection should have been completed within the last 12 months by a Gas Safe Registered Engineer. You are required to submit the Gas Safe Certificate with this application.			
11b.	Name of insp	ector/company		
11c.	Engineer regis	stration number		
11d.	Date of last in	spection/	_/	
116	Cartificate nu	mhar		

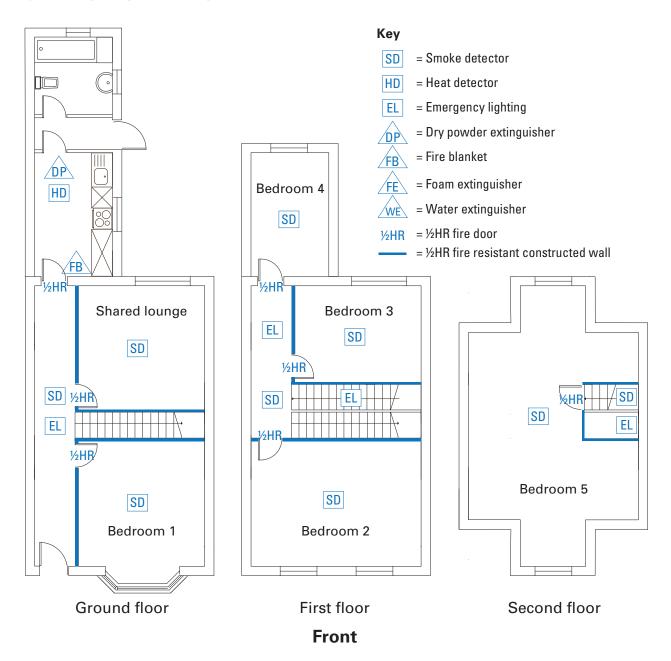
Elect	ectrical installation and fixed appliances			
	f. Have the electrical installation and fixed electrical five years?Yes No	appliances been tested within the last		
appl	Provide the following details about the last inspection of the electrical installation and fixed appliances. You are required to submit the Electrical Installation Condition Report and certificate with this application.			
11g.	1g. Name of inspector/company			
11h.	1h. Date of last inspection / /			
11i.	i. Certificate number			
Port	rtable electrical appliances			
-	1j. Are there any portable electrical appliances provided for use by the occupants (eg kettle, refrigerator, vacuum cleaner)?Yes No			
	ection 12: e precautions			
12a.	e risk assessment a. Has a fire safety risk assessment been undertaken Yes, please provide a copy with the application No, this will need to be undertaken within 6 mo			
	noke and heat alarms b. Are smoke and/or heat alarms (or detectors) provi 'Yes ' No	ded in the property?		
	☐ Mains electricity - interlinked ☐ Mains e	lectricity - standalone lectricity - panel controlled		
	d. How many altogether?			
12e.	2e . Give the location of each smoke alarm (eg ground floor hall, first floor kitchen):			
Othe	her fire equipment and precautions			
12f.		operty? ire blankets in every kitchen ire doors		

ızg.	Do all the life doors have the lo	
	☐ Self closing devices☐ Cold smoke seals☐	☐ Intumescent strips☐ None of the above
	Cold silloke seals	I Notice of the above
12h.	Provide details of the fire escap kept clear:	e routes from the property and how you ensure they are
12i.	Provide details of any fire safety property:	y information or training provided to the occupiers of the
12j.		ings provided at the property comply with The Furniture Regulations 1988 (as amended)?
Maiı	ntenance and inspections	
12k.	Is the fire precautions equipment regular intervals? Yes No	nt serviced and inspected by a competent person at
	vide the following details about ificates with this application.	nspections. You will be required to submit inspection
12I.	Type of equipment (emergency	lighting, fire alarm system, fire extinguishers.)
12m	. Name of inspector/company	
ı∠n.	Date of last inspection/	/
12o.	Certificate number	

Section 13:

Layout plans

Layout plans for each storey of the building, showing the location and dimensions of all rooms within the property is required with your application. Please see guidance for full requirements of your plan. Layout plan example:



Room	Dimensions	Floor area
Shared lounge, ground floor rear right	4 x 4m	16m²
Shared kitchen, ground floor back addition	4 x 2.5m	10m²
Shared bathroom, ground floor back addition	2.5 x 2.5m	6.25m ²
Bedroom 1, ground floor front right	4 x 4m	16m²
Bedroom 2, first floor front	4 x 5.5m	22m²
Bedroom 3, first floor rear right	4 x 3m	12m²
Bedroom 4, first floor back addition	4 x 2.5m	10m²
Bedroom 5, second floor	5.5 x 6m	33m²

Section 14:

Management of HMO to be licensed

14a.	Are occupants given a tenancy agreement (or other written statement of terms of occupancy)? Yes No You will be required to submit a copy of this document with your application.
	You will be required to submit a copy of this document with your application.
14b.	Does the written statement of terms include any clauses relating to antisocial behaviour? Yes □ No
14c.	Does the written statement of terms include guidelines on procedures for tenants to report necessary repairs and make complaints about the property? ☐ Yes ☐ No
Depo 14d.	osit Is a deposit required at the start of a new tenancy? Is a Ves In No (go to section 14g)
14e.	Are the terms of the tenancy deposit clearly set out in writing? I Yes I No
14f.	Is the proposed licence holder or manager a member of any government authorised scheme that protects tenants' deposits? ☐ Yes, scheme provider and landlord reference number ☐ No
	and receipts Are tenants given a rent book? Yes INO
14h.	Are tenants given receipts for rent payments? ☐ Yes ☐ No
Outl	ine any procedures/arrangements you have to:
14i.	Vet prospective tenants (eg use of a vetting service or accreditation scheme, take up references, etc)
14j.	Ensure the property is clean, safe and fit to live in, before each new tenancy

14k.	Agree an inventory with each tenant, detailing the furniture and appliances supplied, including the condition of individual items				
14l.	Review the general condition of the property (internal, external, garden etc) sufficiently regularly to ensure it is maintained in good and safe repair				
14m.	Deal with repairs and complaints which have been reported within a reasonable time				
14n.	Cover the cost of major emergency repair work or improvements to the property				
140.	Receive and respond to complaints of antisocial behaviour involving or affecting the tenants and/or their children or visitors.				
Fit a	tion 15: nd proper person test the proposed licence holder, the manager and/or any person associated with either of them:				
	Committed any offence involving fraud or other dishonesty (including benefit fraud), violence, drugs, or any offence listed in Schedule 3 to the Sexual Offences Act 2003 (subjec to the Rehabilitation of Offenders Act 1974)?				
	Practised unlawful discrimination on grounds of sex, colour, race, ethnic or national origins or disability in, or in connection with, any business?				

15c.	Contravened any legislation relating to housing, public health, environmental health or landlord and tenant law? Yes No
15d.	Been refused a licence under Part 2 or 3 of the Housing Act 2004? ☐ Yes ☐ No
15e.	Had a licence revoked for breach of any conditions under Parts 2 or 3 of the Housing Act 2004? ☐ Yes ☐ No
15f.	Contravened any Code of Practice relating to the management of HMOs? Yes No
15g.	Been subject to a Control Order under the Housing Act 1985 (in the past five years)? Yes No
15h.	Been subject to a Management Order under the Housing Act 2004? Yes No
15i.	Failed to comply with a Housing Notice (requiring works etc.) served by a local authority? \square Yes \square No
15j.	Been subject to complaints from tenants or other sources, regarding serious or repeated breaches of the conditions of a licence under the Housing Act 2004? Yes INO
	tion 16: reditation and qualifications
16a .	Has the proposed licence holder and/or the manager become accredited with a landlords' accreditation scheme? ☐ Yes (fill in details below) ☐ No
	Name of person involved
	Organisation/scheme
	Continue on a separate sheet if required.
16b.	Is the proposed licence holder and/or the manager a member of a professional landlords' association? ☐ Yes (fill in details below) ☐ No
	Name of person involved
	Organisation/scheme Membership number
	Continue on a separate sheet if required.

16c.	s the proposed licence holder and/or the manager a member of a professional body elevant to the ownership and management of residential property? Yes (fill in details below)		
	Name of person involvedOrganisation/scheme		
	Membership number		
	Continue on a separate sheet if required.		
16d.	Have the proposed licence holder and/or the manager any relevant qualifications or undertaken any training courses relevant to the ownership and management of residential property? ☐ Yes (fill in details below) ☐ No		
	Name of person involved		
	Provider/awarding body		
	Course qualification		
	Date of course/award		
	Continue on a separate sheet if required.		
	tion 17: er properties licensed under the Housing Act		
17a.	Does the proposed licence holder and/or manager own or manage other properties which require a licence under the Housing Act 2004? ☐ Yes (fill in details below) ☐ No		
	Total number of properties?		
	tion 18: fying people about the licence application		
You	must let certain people know in writing that you have made this application.		

The people who need to know about it are:

- any owner of the property to which the application relates (if that is not you) ie the freeholder and any leaseholders who are known to you
- any mortgage provider for the property to be licensed
- 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 he will be bound by any conditions in a licence if it is granted

18a.	Does anybody (other than you) own the property (eg as freeholder, leaseholder, joint owner)? I Yes (provide details below of notifying these people about the licence application) I No			
	Name of person notified			
	Address			
	Interest in the property or application (eg freeholder)			
	Continue on a separate sheet if required.			
I8b.	Is there a mortgage on the property? I Yes (provide details below of notifying these people about the licence application) No			
	Name of person notified			
	Address			
	Interest in the property or application (eg freeholder)			
	Continue on a separate sheet if required.			
18c.	Does the property have any tenant or leaseholder with more than three years remaining on the tenancy or lease? Yes (provide details below of notifying these people about the licence application) No			
	Name of person notified			
	Address			
	Interest in the property or application (eg freeholder)			
	Continue on a separate sheet if required.			
18d.	Is the proposed licence holder somebody other than you? Yes (provide details below of notifying these people about the licence application) No			
	Name of person notifiedAddress			
	Interest in the property or application (eg freeholder) Date notified			
	Continue on a separate sheet if required.			

18e.	. Is the proposed manager somebody other than you? — Yes (provide details below of notifying these people about the licence application) — No			
	Name of person notified			
	AddressInterest in the property or application (eg freeholder)			
	Date notified			
	Continue on a separate sheet if required.			
18f.	Has anybody else agreed to be bound by the conditions of the licence, if it is granted? Yes (provide details below of notifying these people about the licence application) No			
	Name of person notified			
	Address			
	Interest in the property or application (eg freeholder)			
	Continue on a separate sheet if required.			
yothe withithe	must tell each of these people (or organisations): ur name, address, telephone number and email address or fax number (if any) e name, address, telephone number and email address of the proposed licence holder (if it ll not be you) s is an application for an HMO licence under Part 2 of the Housing Act 2004 e address of the property to which the application relates e name and address of Spelthorne Borough Council to which the application will be made e date the application will be submitted			
	ction 19: litional details			
	vide any additional information which is required or relevant to your application. Continue a separate sheet if required.			

Section 20:

Declaration

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.

Please note your licence will not be processed unless we have received all the documentation below:

A current gas safety certificate (if there is gas in the property)	V
A current electrical installation condition report	V
A current test certificate for the automatic fire detection system (if there is one)	V
A current test certificate for the emergency escape lighting system (if there is one)	V
An energy performance certificate (EPC)	V
A written fire risk assessment carried out by a competent person (if you have one. If you do not currently have one you will be required to produce one within 6 months of your licence being issued)	/
A floor plan, showing the room sizes, the fire protection measures and the kitchen, toilet and bathroom facilities (see section 13)	/
A blank copy of a tenancy agreement for the property that is given to the tenants	V
The appropriate fee (see separate fee sheet)	V

Extra Information: