



STOCKPORT
METROPOLITAN BOROUGH COUNCIL

**Application
for a Renewal Licence to operate a
House in Multiple Occupation
under the provisions of the
Housing Act 2004**

Stockport Metropolitan Borough Council

**Housing Standards Team
Fred Perry House
Stockport
SK1 3XE**

Tel: 0161 474 4281

**Email:
housing.standards@stockport.gov.uk**

Completing the form

It is essential that the information which you or your manager / agent provide on the forms can be easily read.

- Please use BLACK ink and BLOCK CAPITALS throughout
- Make sure that the proposed licence holder or manager sign all relevant boxes where required and the signatures are contained within the box

Please DO NOT leave any questions or entry unanswered unless it is clearly indicated as optional.

Statutory requirements

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: -

- Any mortgagee of the property
- Any owner of the property to which this application relates (if that is not you) i.e. any freeholder and any head lessees 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 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 or she will be bound by any condition or conditions in a licence if it is granted.

Who can apply for a Licence?

In determining a Licence application Stockport Metropolitan Borough Council has a duty to award the Licence to the most appropriate person. This will normally be the owner or a manager employed by the owner. At the very least, the Council expects the Licence holder to have the power to:

- let and terminate tenancies;
- access all parts of the premises to the same extent as the owner; and
- authorise expenditure up to 25% of the yearly income of the house for emergency repairs.

The Council also requires details of all persons involved in ownership or management of the properties covered by this application.

Licenced Property Address:

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Part 1 – Licence Holder Details

TO BE COMPLETED BY THE OWNER(S) OF THE PROPERTY

1.1 Property Owner's details

Title		Full name		
Address				
Postcode		Tel number		
		Email address		
National Insurance Number		Date of birth		

Please use additional sheets and label 1.1 if there is more than one owner of the property.

1.2 Licence Holder

Do you, as the owner(s) of the property intend to be the proposed licence holder?

Yes (go to 1.4)

No

I _____ am the owner of the property or properties listed in Part 4 of this form and hereby delegate the responsibility of being the licence holder for these properties to the person or company who's details are shown in section 1.3 below.

And I confirm that this person has my authority to:

- let and terminate tenancies;
- access all parts of the premises to the same extent as the owner; and
- authorise expenditure up to 25% of the yearly income of the house for emergency repairs.

Signed (Owner) _____ Date _____

1.3 Proposed licence holder details

Title		Full name	
Address			
Postcode		Tel number	
		Email address	
National Insurance Number		Date of birth	

1.4 Proposed licence holder residential status:

Do you, the proposed licence holder, live within the premises, which are the subject of this licence application:

Yes

No

1.5 Organisation Type of Licence holder (please tick):

Private Individual Company Charity Other

If other, please state.....

1.6 If the licence holder is a company, trust or partnership please provide the following information (move on to section 1.7 if not applicable)

Company's Registration Number	
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Please enter the names and addresses of all directors / partners / trustees. (Please use separate sheet if necessary).

Title	Name	Address

Please enter the name and address of the company secretary

Title		Company Secretary		
Business Address				
Postcode		Tel Number		
Email address		Fax Number		

Please confirm by signature, all directors, partners and trustees of the company:

Name _____ Title _____

Signature _____ Date _____

Name _____ Title _____

Signature _____ Date _____

Name _____ Title _____

Signature _____ Date _____

1.7 Connected Persons

The proposed licence holder must list the details of any other persons who are involved in the management of your property other than those whose details have been entered and specify the nature of their involvement:

Title		Full name		
Address				
Postcode			Tel Number	
			Email address	
Date of birth				

National Insurance No.	
What is this person's involvement in the management of your property?	

Title		Full name	
Address			
Postcode		Tel Number	
		Email address	
Date of birth			
National Insurance No.			
What is this person's involvement in the management of your property?			

Please use additional sheets and label each sheet 1.7 if more than 2 persons are involved

1.8 Fit and Proper Determination (Licence Holder)

In determining a Licence under the Housing Act 2004, Stockport Council is required to decide if the licence holder **and any other persons** involved in the management of the property or properties are "fit and proper persons." It is a requirement of the Act that the proposed licence holder provides the following information:

Have you, or any person who will be involved in the management of the property, an unspent conviction for:

	YES	NO
Fraud or dishonesty?		
Violence?		
Drugs?		
Offences under Schedule 3 of the Sexual Offences Act 2003? (c.42) (Offences attracting notification requirements)		

If yes please give details:

Name of offender	
Date of hearing	
Actual charge	
Penalty imposed	
Any information you wish the Council to consider by way of mitigating circumstances	

Have you, **or any person** who will be involved in the management of the property, been found by a Tribunal or Court to have: Practised unlawful discrimination on the grounds of sex, colour, race, ethnic or national origins or disability in or in connection with the carrying out of any business?

YES

NO

If you have answered yes, please give details:

Name of offender	
Date of hearing	
Actual charge	
Penalty imposed	
Any information you wish the Council to consider by way of mitigating circumstances	

Have you, **or any person** who will be involved in the management of the property, any contravention 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 you?

YES

NO

If you have answered yes please give details:

Name of offender	
Date of hearing	
Actual charge	
Penalty imposed	
Any information you wish the Council to consider by way of mitigating circumstances	

Have you, or any person who will be involved in the management of the property, ever:	YES	NO
Failed to comply with a Housing Act Notice (requiring works etc) served by the Local Authority?		
Had works in default been carried out by the Local Authority on a property?		
Acted in contravention of any relevant approved code of practice (i.e. a code of practice issued by the Government relating to the management of HMOs)?		
Been refused a licence for a HMO?		
Breached the conditions of any Licence?		
Been subject to a Control Order (Housing Act 1985, s379)?		
Been subject to any Management Order?		
Contravened any provisions of housing or landlord and tenant law?		

If you have answered yes please give details:

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Evidence requirement

The proposed licence holder applicant must enclose a Basic Disclosure Report with this application from Disclosure Scotland. Please apply online at www.disclosurescotland.co.uk/basicdisclosureonline/. Basic Disclosure Reports will only be accepted if the issue date is within 3 months of the date of the application form.

Applications should be made online for applicants with a current address in the UK. If the current address is outside the UK then please apply using the paper online form, more details of which are on the main website. Payment details are detailed on the website.

(Your licence application cannot be processed without this document. All information provided will be treated in accordance with the Data Protection Act 1998. This includes data exchange and storage of personal, sensitive information. We reserve the right to approach other authorities such as the Police, Fire & Rescue Service, and Office of Fair Trading etc. for information relating to this application).

1.10 Licence Holders Declaration

I/we declare that the house in respect of which a licence is sought under Part2/Part3 of the housing Act 2004 is subject to a licence under that part at the time this application is made. I/We further declare that to the best of my/our knowledge either: (a) none of the information described in paragraph 2 (c) to (g) of that Act and previously submitted to the authority has materially changed since that licence was granted: or (b) the only material changes to that information are described as follows (include description of all material changes)

.....
.....
.....
Signed _____ Date _____
Signed _____ Date _____
Signed _____ Date _____
Signed _____ Date _____

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.



STOCKPORT

METROPOLITAN BOROUGH COUNCIL

A free interpreting service is available if you need help with this information.
Please telephone Stockport Interpreting Unit on 0161 477 9000.
Email: eds.admin@stockport.gov.uk

যদি এই খবরগুলি সম্পর্কে আপনার কোন সাহায্য দরকার হয় তবে বিনা খরচে আপনার জন্য দোভাষীর ব্যবস্থা করা হতে পারে। মেহেরবানী করে স্টকপোর্ট ইন্টারপ্রিটিং ইউনিটে ফোন করুন টেলিফোন নম্বর, 0161 477 9000.

اگر آپ کو ان معلومات کے بارے میں مدد کی ضرورت ہے تو مفت ترجمانی کی سروس دستیاب ہے۔ براہ مہربانی انٹرپرائزنگ یونٹ کو 0161 477 9000 پر فون کریں۔

如你需要他人為你解釋這份資料的內容，我們可提供免費的傳譯服務，請致電 0161 477 9000 史托波特傳譯部。

تتوفر خدمة ترجمة شفوية مجانية إذا تطلبت مساعدة في فهم هذا المعلومات. نرجو الاتصال إنتربريتنج يونت على رقم الهاتف: 0161 477 9000

خدمات ترجمه رایگان این اطلاعات در صورت نیاز موجود میباشد. لطفا با شماره تلفن 0161477 9000 با واحد ترجمه (اینترپرایزینگ یونیت) ما تماس بگیرید.