

Application for Licence: House in Multiple Occupation (HMO)

Please use the accompanying guidance 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.

Please fill in all sections of the form using **BLOCK CAPITALS** and **black ink**.

Please provide a valid email address for all parties as all relevant documentation will now be sent via email only.

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.

Type of application: New Renewal

Address of property to be licensed:

Postcode:

Description of occupation: (please tick appropriate boxes)

Bedsits with shared facilities Shared House
Mixture of self-contained units and bedsits

Required Fee and supporting documents: (see guidance notes for further information)

The following fee and documents are required in support of your application.

Checklist for submission:

Licence fee £ _____

Please detail how payment has been made:

Cheque (enclosed)

BACS Ref: _____

Credit/Debit Payment Ref: _____

Floor plan

Gas safety certificate

Electrical Periodic Inspection Report

or No Gas Supply to Property

- Portable Appliance testing certificates
- Test reports for the fire detection system
- Copy of the fire risk assessment for the property

Part 11 Signed and dated

Applications submitted without full payment will not be processed.

494 Revised 22.07.20 DSU

Part 1. Applicant Details			
Title:		Name:	
<i>(e.g. Miss/Mrs/Mr/Dr etc.)</i>		<i>(e.g. as detailed on your passport)</i>	
Address:			
Contact Information:			
Telephone:		Email Address:	
Mobile:		Other:	
YOU MUST PROVIDE A TELEPHONE NUMBER AND A VALID EMAIL ADDRESS			

Part 2. Proposed Licence Holder Details			
2.1 Is the proposed licence holder the applicant, as listed in Part 1?	Yes Please complete section 3 below.		No Please go to Part 2
2.2—Details of proposed licence holder/s (if a company, please give full company name). <i>You must provide a telephone number, a correspondence address and a valid email address for <u>each</u> proposed licence holder.</i>			
Please continue on separate sheet if necessary			
Proposed Licence Holder			
Title:		Full Name:	
<i>(e.g. Miss/Mrs/Mr/Dr etc.)</i>		<i>(e.g. as detailed on your passport.)</i>	
Address: (If a company, please give registered company address			

Postcode:			
Correspondence Address: (If different than above)			
Postcode:			
Further Information:			
Telephone:		Email:	
Mobile:		Date of Birth:	
2.3 Is the proposed licence holder a member of any landlords' association, accreditation scheme or professional body?		Yes No	other
If Yes - please specify: <i>(Include your registration number where applicable)</i>			

Part 3. Manager Details				
3.1 Has an agent or individual been employed to manage the property?	Yes		No	
If Yes - Please complete section 3 below.				
If No - Please go to Part 4				
3.2 Details of manager (if a company, please give full company name) <i>You must provide a telephone number, a correspondence address and a valid email address for the manager</i>				
Full Name: (Individual or Company)				
Address: (If a company, please give registered company address)				
Postcode:				
Correspondence Address: (If different than above)				
Postcode:				
Email:				

Mobile:		Date of Birth:	
3.3 Is the manager a member of a regulatory body/accreditation scheme or professional association?		Yes	No
If Yes - please specify: <i>(Include your registration number where applicable)</i>			

Part 4. Ownership and Control of the Property to be Licensed

Is there a freeholder / leaseholder / Mortgage Company or any other party with a financial interest in the property?	Yes	No
--	-----	----

If Yes - please complete section 4 below. | If No - please go to Part 5

4.1 Name of Freeholder/Leaseholder(s). (Continue on an additional sheet if necessary)

Name of Freeholder/Leaseholder 1 (delete as necessary to indicate FH/LH; if a company, please give full company name)

Full Name:			
Telephone:		Email:	

Address: (If a company, please give registered company address and company number)

Postcode:

Name of Freeholder/Leaseholder 2 (delete as necessary to indicate FH/LH; if a company, please give full company name)

Full Name:			
Telephone:		Email:	

Address: (If a company, please give registered company address and company number)

Postcode:

Please continue on a separate sheet if necessary.

4.2 Name of Mortgagee (if applicable or if none, state none)
e.g. bank, building society or other who has a loan secured against the property

Company Name:			
Telephone:		Email:	

Address: (registered address if a business)

Postcode:

Please continue on a separate sheet if necessary.

4.3 Name of any other person who may be bound by a condition of the proposed licence and not referred to in parts 1,2 or 3 of the form (if none, state none)			
Company Name			
Telephone:		Email:	
Address: (registered address if a business)			
Postcode:			

Part 5. Occupier information - see note

Please include all occupiers, including children and babies occupying the property			
5.1 How many individuals currently live in the property?			
5.2 How many households currently live in the property?			
5.3 How many separate lettings are available in the property?			
5.4 Are there any of the people listed in Parts 1, 2, 3 and 4 of the form living in the property? (Please tick appropriate box)		Yes	No
If yes , please state their names:			

Part 6. Amenities – see note

6.1 Please specify how many sole use bath and/or showers are in the property?			
6.2 How many shared baths and/or showers are there in the property?		Baths	Showers
6.3 How many sole-use WCs are there in the property?			
6.4 How many shared WCs are in a separate compartment to the bathroom?			
6.5 How many sole-use wash hand basins are there in the property?			
6.6 How many shared wash hand basins are there in the property?			
6.7 How many sets of shared kitchen facilities are provided in the house?			
6.8 How many lettings have exclusive use of a set of kitchen facilities (please specify)			
6.9 How many sinks are there in the property?			

Part 7. Fire Safety

7.1 Does the property have a system of fire detection?

If yes, does the system include?

a) A fire alarm control panel	Yes		No	
b) Heat detectors in the kitchen	Yes		No	
c) Mains wired smoke detectors in rooms	Yes		No	
d) Battery powered smoke detectors in rooms only	Yes		No	
e) Mains wired smoke detector in common parts	Yes		No	
f) Battery powered smoke detectors in common parts only	Yes		No	
g) Sounders/alarms on all levels	Yes		No	
h) Calls point in the communal areas	Yes		No	
If there is mains wired fire alarm and detection system, has it been tested in accordance with the BS5839 at least quarterly? (Please provide a copy of a current certificate of testing showing compliance to BS55839)	Yes		No	
Does the property have an emergency lighting system?	Yes		No	

7.2 If yes, has the system been tested in accordance with BS5389 at least every 3 years

(If yes, please provide a copy of the most recent periodic inspection and test certificate)

	Yes		No	
--	-----	--	----	--

7.3

Are the doors that open on to the communal areas fire doors capable of 30 minutes fire resistance?	Yes		No	
If yes, are they fitted with self-closers?	Yes		No	
Are they fitted with smoke seals and intumescent strips?	Yes		No	

7.4 Is the following fire safety equipment provided?

a) Fire blankets in all kitchens	Yes		No	
b) Fire blankets in shared kitchens only	Yes		No	
c) Fire extinguishers	Yes		No	
Has the fire safety equipment been serviced for the last 12 months?	Yes		No	

7.5

Are the tenants provided with upholstered furniture	Yes		No	
Does all the upholstered furniture you provided comply with the Furnishings (Fire Safety) Amendment Regulations 1933? Amended	Yes		No	

Part 8. Property Management

Please answer <u>all</u> questions in this section.				
8.1 Is there, displayed in a suitable position within the property, a notice giving the name and telephone number of the manager?	Yes		No	
8.2 Is there a maintenance program in place?	Yes		No	
8.3 Is there a cleaning program in place?	Yes		No	

Part 9. Tenancy Management

Please answer <u>all</u> questions in this section.				
9.1 Are occupants given a tenancy agreement? (or other written statement of terms of occupancy)	Yes		No	
9.2 Does the written statement of terms include any clauses relating to anti-social behavior?	Yes		No	
9.3 Does the written statement of terms include guidelines on procedures for occupants to report necessary repairs and make complaints about the property?	Yes		No	
9.4 Are the occupants given an emergency 24 hour contact telephone number in relation to the property?	Yes		No	
Please provide emergency contact number and name of responsible person				
9.5 Is the deposit for the property being held by a Government authorised scheme that protects tenants' deposits?	Yes		No	
Please provide the name of the deposit scheme:				
9.6 If applicable have you undertaken the necessary immigration checks on the tenants' occupying the property?	Yes		No	
9.7 Have you provided your tenants' with the Government's 'Right to Rent' booklet?	Yes		No	

Part 10. Type of Property

Is the property being licensed:									
A Detached house		A flat		A Back-to-back house		A Residential block			
A Semi-detached house		A Terrace house		A End terrace house		A building with mixed residential & commercial use			
A Grouped structure				Other					
What is the approximate age of the property?									
Pre 1919		1919 to 1945		1946 to 1964		1965 to 1980		Post 1980	
How many storeys does the property comprise? (e.g. Three storey with a commercial unit comprising the ground floor; please include entrance floors even if there is no accommodation).									

Are you a resident Landlord?	Yes (please answer the questions below)		No	
How many occupiers, regardless of their age are in your household?				
Do you share any bathroom or kitchen facilities with the tenants in the property?			Yes	No

Part 11. Room and Occupier Information

You must list all rooms within your property included any occupied by a resident landlord. You must provide accurate room sizes for all rooms.
Please continue on separate sheet if necessary.

Location (To be taken when looking at the property from the front at street level)		Room name	Description e.g. bedsit, living room, kitchen and amenities	Number of occupiers Sharing	Number of Households Using	Size of room in M ²
e.g.	Ground Floor Front Right room	Bedroom 4	Bedsit	2	1	14m ²
e.g.	Ground Floor Rear	Room 1	Kitchen	5	5	10m ²
e.g.	First Floor Middle	Room 2	Bathroom (Bath with overhead shower, WC and WHB)	(Enter total Number of Occupiers using)	(Enter Number of Households using)	7m ²
1						
2						
3						
4						
5						
6						
7						
8						

9						
10						
11						
12						

Part 12. Fit and Proper Persons Check

Please answer all questions in this section.

12.1 Do any of the people named in Parts 1 to 4 of this form have any unspent convictions for, or involving fraud, dishonesty, drugs, violence or sexual offences?	Yes		No	
12.2 Have any of the people named in Parts 1 to 4 of this form been found guilty of practicing any unlawful discrimination on the grounds of sex, colour, race, ethnic or national origin or disability in relation to any business?	Yes		No	
12.3 Have any of the people named in Parts 1 to 4 of this form been found guilty of contraventions of any enactments relating to housing, planning, public health, environmental health or landlord and tenant law?	Yes		No	
12.4 Has any property owned or managed by any of the people named in Parts 1 to 4 of this form been the subject of any enforcement action under the Housing Health and Safety Rating System (Part 1 Housing Act 2004)	Yes		No	
12.5 Have any of the people named in Parts 1 to 4 of this form been refused a licence and or had a licence revoked under Part 2 or 3 of the Housing Act 2004?	Yes		No	
12.6 Have any properties owned or managed by any of the people named in Parts 1 to 4 of this form been the subject of an Interim or Final Management Order under the Housing Act 2004?	Yes		No	
12.7 Relevant issues include:				
<p>12.7.1 Criminal offences involving: Fraud, Dishonesty, Violence, Drugs, Schedule 3 of the Sexual Offences Act 2003</p> <p>12.7.2 Practiced unlawful discrimination on grounds of sex, colour, race ethnic or national origins or disability in connection with a business.</p> <p>12.7.3 Contravened any provision of housing and/or landlord and tenant law. These include but are not limited to:</p> <p>12.7.4</p> <p>12.7.4.1.1.1 A Control Order under the Housing Act 1985</p> <p>12.7.4.1.1.2 Proceedings by a local authority</p> <p>12.7.4.1.1.3 A Management Order under the Housing Act 2004</p> <p>12.7.4.1.1.4 Harassment or illegal eviction</p> <p>12.7.5 Contravened any Approved Code of Practice (AcoP)</p> <p>12.6.5 Any criminal offence or subject to any other proceedings brought by a local authority or other Regulatory Body (for example breaches of the Environmental Protection Act 1990, planning control or compulsory purchase proceedings or fire safety requirement(s))</p>				
12.8 Has any person named in Parts 1,2,3 and/or 4 of this form previously held or do they currently hold a licence for another house in multiple occupation?	Yes		No	

If **yes**, please provide the addresses of these properties and details of the Authorities that issued the licence.

12.9 Has any person named in Parts 1 to 4 of this form ever applied for and been refused a licence for a house in multiple occupation?

Yes

No

If **yes**, please provide details of the local Authority that refused the licence and a brief description as to why:

Part 13. Additional Information

I/we declare that I/we have served a notice of this application on the following persons who are the only persons known to me/us that are required to be informed that I/we have made this application.

Name	Address	Date of service	Description of the persons interest in the property or application

Please continue on separate sheet if necessary.

Note to applicants: It is a criminal offence to knowingly supply information which is false or misleadingly for the purposes of obtaining a licence. Evidence of any statements made in this application with regard to this property maybe required at a later date.

We may approach other departments in the Council or other authorities such as the Police, Fire and Rescue Service, Office of Fair Trading etc. and tenants for additional information and verification. Signing of this application will be taken as your agreement to any such action.

If we subsequently discover something which is relevant and which you should have disclosed, or which has been incorrectly stated or described, your licence may be revoked or further action taken.

Part 14. Declaration

WARNING: IF YOU KNOWINGLY MAKE A FALSE STATEMENT OR FAIL TO COMPLY WITH ANY CONDITION OF THE LICENCE YOU MAY BE LIABLE TO PROSECUTION

Note: Your application will NOT be valid until you complete all the relevant parts of this form, provide all necessary documents and have paid the required fees.

I 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 I/we are reckless as to whether it is false or misleading.

I/We declare that I/we have served a notice of this application on the persons listed in Part 9 who are the only persons known to me/us that are required to be informed that I/we have made this application.

Signature: _____

Date: _____

Full Name: (Block capitals please)

Position (if acting on behalf of a company):

Guidance Notes to be read before completing the application form.

Before submitting an application for a licence for a House in Multiple Occupation (HMO), please ensure that you have read the following guidance notes.

If you require any further advice regarding the HMO Licensing Schemes or the relevant standards, please contact the Residential Enforcement Team on 020 8770 5000 or email environmentalhealth@sutton.gov.uk.

The Residential Enforcement Service offers a supported service for HMOs. Included in this service is a site inspection and a schedule of works required to ensure you meet our fire and amenity standards. We will also guide you through completing the application form and check it is complete prior to submission. The cost of this service is currently £300. For more information regarding this service, please contact 020 8770 5627 or email environmentalhealth@sutton.gov.uk quoting “HMO support service”.

Type of application:

‘New’ – This is the first time an application has been submitted in respect to any given licensable HMO or the previous licence has expired and the renewal application is received after the expiry date (see notes below).

‘Renewal’ – The HMO has a current licence with the Council and the renewal application is submitted before expiry of the previous licence (see notes below).

Notes

If the application is received no later than the expiry date of the previous licence, the renewal fee will be payable.

If the application is received after the expiry date of the previous licence, the “new” application fee will be payable.

Applications that are renewals with no material changes:

If there has been no ‘material’ changes since your previous application, you will only be required to complete Part 1, Part 8A , Part 9, Part 10 and Part 11.

‘Material changes’ include any changes to the following:

- Licence holder details;
- Manager details;
- Ownership and control of the property;
- Addition of any bedrooms, bathrooms, kitchens or any other changes to the internal layout of the property since the previous application.

In these notes, “the Act” means the Housing Act 2004, unless otherwise stated, all references to sections etc. are to sections in the Act.

Type of Licence:

1. Mandatory Licensing scheme (MHMOL)

Part 2 of the Act introduced a mandatory licensing scheme in July 2006. On 1st October 2018 the “prescribed description” of licensable houses in multiple occupation (HMO) changed requiring a HMO to be licenced with the Local Authority if it -

- a. is occupied by 5 or more persons and
- b. is occupied by persons living in 2 or more separate households.

Notes:

- A household is defined as members of the same family and those living as a married couple.
- Loft conversions and commercial premises are included as a storey for both schemes.
- Buildings converted in to self-contained flats do not require a licence unless the individual flat meets the licensing criteria.
- Purpose build blocks with more than 4 flats are exempt from licensing.

Planning permission:

If there are more than 6 people living in your property, you are required to seek planning permission.

If you are not sure whether permission or approval is required for the property for which you are seeking a licence, contact the Council's Development Control Department on 020 8547 5002. Where permission or approval has already been obtained, please enclose a copy with your application.

Please Note: The granting of a licence is not the same as having planning status as a HMO.

Duration of licence:

All licences will be granted for a period of **up to five years**.

Fees & Supporting Documents:

Fees:

The fee charged depends on the number of storeys and the *rooms available for letting. “Rooms available” includes any rooms that are currently vacant but could be occupied.

Applications received without the appropriate fee will not be processed.

Our full fee structure can be found in the table at the end of this guidance document but a brief guide is provided below:

Fee Structure	
New Application	Renewal Application
£250	£210
Notes:	
1. Fee shown is per letting.	
2. Accredited Landlord Membership receives a £100 discount off total licence fee for new applications only.	
3. Registered Charities receive a 50% discount off the total licence fee (new and renewals).	

Payment:

The fee can be paid by BACS payment, credit / debit card or cheque.

BACS payment can be done using the following details:

Bank Name: Lloyds Bank Plc

Sort Code: 30-80-12

Account Title: London Borough of Sutton – Income Account

Account No: 13740960

Reference to be quoted: HMOLIC (Please insert property address here as a reference)

Payment can also be made by credit or debit card.

Go to our website www.sutton.gov.uk

Payment for a New HMO Licence Fee

- ↪ click on the “Pay For” link
- ↪ click on "More in Pay For"
- ↪ select House of Multiple Occupation (HMO)
- ↪ select Miscellaneous Payment ↪
- select **HMO Licences per let NEW**
- and complete transaction.

Payment for a Renewal of HMO Licence Fee

- ↪ click on the “Pay For” link
- ↪ click on "More in Pay For"
- ↪ select House of Multiple Occupation (HMO)
- ↪ select Miscellaneous Payment
- ↪ select **HMO Licences per let RENEWAL** and
- complete transaction.

Civil Penalty Notice

If your property requires a licence under the Mandatory Licensing scheme and the Council finds you to be operating an HMO without a licence or If you have not made a valid application you will incur a Civil Penalty Notice of up £30,000.

Mandatory Supporting Documents:

You are required to provide certain supporting documents with your application. We would strongly advise you to keep a copy of your application and to send legible copies of all documents. Originals will not be returned.

For your application to be complete it must contain the following:

- A fully completed application which is signed and dated by the applicant/s. □ Relevant licence fee.

- Floor plan of the property. This can be as simple as a hand drawn sketch clearly showing the layout of each floor, all rooms, halls, stairs, and windows, doors to rooms and entrances and exits. All rooms are to be clearly labelled.
- A copy of the Gas Safety Certificate issued within the last year.
- A copy of the electrical Periodic Inspection Report issued within the last 5 years.
- A copy of the portable appliance test certificate for all electrical appliances provided by the landlord. This includes kettles, toasters, microwaves, hoovers, fridge freezers, dishwashers, washing machines and tumble driers.
- A copy of the current test report for the fire detection system issued within the last year.*
- A copy of the current test report for the emergency lighting system issued within the last year**.
- A copy of the fire risk assessment***

*This Service has adopted the LACORS fire safety guidance which requires mains powered smoke detection in HMOs. Battery powered alarms will not be accepted.

If your mains powered fire alarm is a Grade A - D system, you must instruct a competent person to inspect and service in line with BS5836: part 6 (2004) or current equivalent every 6 months.

**Most low risk HMOs do not require emergency lighting. Please refer to the LACORS fire safety guidance or contact the Residential Enforcement Team for further guidance.

*** As a licensed HMO, the person managing / in control is required under the Regulatory Reform (Fire Safety) Order 2005 to risk assess fire safety in their properties, to take adequate precautions to reduce that risk and to manage that risk which remains. This should be undertaken by a competent person and reviewed regularly.

Any applications which are incomplete, **will not** be processed. Incomplete applications include missing supporting documents, an outstanding fee and incomplete application forms.

Part 1 – APPLICANT DETAILS

The applicant is the person who is completing the form. This could be on their own or someone else's behalf.

The applicant does not have to be the owner, manager or the proposed license holder. If the applicant is a company or similar body, give the official registered or principal address.

Part 2 – PROPOSED LICENCE HOLDER DETAILS

In Part 2 the applicant must provide details of the person or company who will be the license holder, and therefore bound by the terms of the license. Normally, the proposed license holder will be an individual who has a degree of responsibility for the property, for example, the owner or managing agent. If the applicant is a company or similar body, give the official registered or principal address.

All fields are to be completed and a telephone number must be provided.

Unless the proposed licence holder is a resident landlord, they must provide their correspondence address.

If the address of the proposed licence holder is outside the UK, an alternative address within the UK must be provided. This could be the address of your managing agent (their consent should be obtained).

Part 3 – MANAGER DETAILS

If there is a Manager employed to manage the property on the landlord's behalf, this section should be completed. For example if you employ the services of a letting agent to collect the rent, carry out repairs etc. All fields to be completed and a telephone number must be provided.

If there is no manager for the property, please tick "No" to 3.1 and go to Part 4.

Part 4 – OWNER DETAILS

"Owner" means a person who is for the time being a freeholder or leaseholder of the property, or any person to whom that title would revert if an event occurred, examples of which would be death or expiration of time, which event will be detailed in the terms of the deeds to the property. Where there are multiple owners, including freeholders and leaseholders, details of all owners must be provided.

If there has been any financial borrowing against the property, details must be provided in Part 4.2 of the form. This is because the Council has to check that any company with a charge registered against the HMO has been made aware of the HMO licence application.

If there is no freeholder, leaseholder, Mortgage Company or any other person with a financial interest in the property, please mark as "N/A" and go to Part 5.

Parts 5 – OCCUPIER DETAILS

An '**occupier**' means a person who occupies the property as their main residence; this person can be a tenant, leaseholder, licensee, resident landlord or a person having an estate or interest in the property. Children and babies are also considered to be occupiers, and should each be counted as one individual regardless of their age.

EXAMPLES: A tenant on an assured shorthold tenancy would be an occupier. A lodger with sole use of one room would be an occupier. A person who is given accommodation in connection with their work, for example in the restaurant below, is an occupier, regardless of whether rent is paid.

A '**household**' for the purposes of the Housing Act 2004 comprises:

- A single person; or
- Co-habiting couples (whether or not of the opposite sex); or
- A family. Included in the definition of a single family are parents, grandparents, children (including foster children, step-children and children being cared for), grandchildren, brothers, sisters, uncles, aunts, nephews, nieces or cousins. Half-relatives will be treated as full relatives. Any domestic staffs are also included in the household if they are living in rent-free accommodation provided by the person for whom they are working.

EXAMPLES: Three friends sharing together are considered three households because they are not related to each other. If a couple are sharing with a third person that would constitute two households. If a family rents a property this is a single household.

A '**letting**' is any rented unit of accommodation, this could be a:

- Room/bedsit
- Studio
- Flat
- Floor by floor let
- House
- An empty bedroom

EXAMPLES: A house let on a shared basis to five people would count as five lettings. A property occupied by Mr and Mrs Owner and their three unrelated occupiers would count as four lettings and would be a HMO.

A **'habitable room'** is any room which can be occupied during the day. This includes bedroom, living room and dining room. It does not include bathrooms, WCs and small kitchens.

Part 6 – AMENITIES

Amenities are cooking, bathing and toilet facilities which may be shared by people or households or available for the exclusive use of people or households

Part 7 – FIRE SAFETY

All HMOs must have adequate fire precautions for detection and giving warning of fire and escape from the building.

All upholstered furniture supplied with rented accommodation **MUST** comply with the Furniture and Furnishings (Fire) (Safety) Regulations 1988 (as amended). This means that all cover materials must have passed cigarette and match ignition tests and the filling materials must have passed flammability tests. You should check to see that your furniture has a label permanently attached to the lining or underside giving the appropriate details.

Under the Gas Safety (Installation and Use) Regulations 1998 the landlord must have an annual gas safety check on all gas appliances undertaken by a registered Gas Safe engineer. **A COPY OF THE LATEST GAS SAFETY CERTIFICATE MUST BE SUBMITTED WITH THE APPLICATION FORM.**

Part 8 – PROPERTY MANAGEMENT

Details of the arrangements in place for the management of the property. Standards of management are specified in The Management of HMOs (England) Regulations 2006.

Part 9 – TENANCY MANAGEMENT

Details of how tenancies are managed.

Immigration checks are a legal requirement for all tenancies commencing on or after 1st October 2015 and tenants must be provided with the Governments 'Right to Rent' booklet or you may be liable for a civil penalty fine and/or unable to undertake legal eviction proceedings. For further details please go to: www.gov.uk/check-tenant-right-to-rent-documents

Part 10 – TYPE OF PROPERTY

General details of the type of property and when it was built or converted. If converted, a relevant Building Control completion certificate must be enclosed with the application

Part 11 - Room and Occupier Information

You must complete this section in full for all rooms within the property including kitchens, bathrooms and conservatories etc. Room sizes must be provided in M² and include the location and brief description in the table provided. The number of tenants and households must also be listed against each room. This must also include any rooms occupied / for the exclusive use of a resident landlord. If you have any queries regarding 'households' then please contact us, using the details provided at the start of these guidance notes.

Part 12 - Licence holder test of fitness and compliance with management conditions The local authority must be satisfied that the person applying for an HMO licence is a “fit and proper person” to hold a licence. The same test applies to any person managing the premises and any director or partner in a company or organisation, which owns and/or manages the HMO. The local authority may approach other authorities such as the Police Authority, Fire & Rescue Service and the Office of Fair Trading as to whether the applicant has any relevant convictions. Also, information can be obtained from the Criminal Records Bureau.

If you do have any convictions you are required to declare, these should not be sent with the application form but should be sent under separate confidential cover. Unspent convictions may be convictions for which the rehabilitation period has not been completed, or convictions, which are excluded from the Act (i.e. never spent). Not all convictions would be relevant to a person’s prospective role as an operator of an HMO, for example motoring offences would not be relevant but a conviction for fraud or theft could be since the operator would be in a position of trust. If you are unsure about any matter, please contact us.

Answering yes to any of the questions in this part will not necessarily mean that the council will refuse to issue a licence. However, the council reserves the right to reject any person nominated as the proposed licence holder if they are not considered a fit and proper person. Under such circumstances, somebody who is deemed to be a fit and proper person will have to be nominated to hold the HMO licence.

Part 13 - Additional Information

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 to be licensed;
- 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 he will be bound by any condition or conditions in a licence if that is granted.

You must tell each of these persons:

- Your name, address, telephone number and email address or fax number (if any);
- The name, address, telephone number and email 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 or 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 and the date the application was submitted

Part 14 - DECLARATION

The declaration must be signed and dated by:

- The applicant
- The proposed licence holder (if different to the applicant)
- The manager (if there is a manager).

It is a criminal offence to supply information which is false or misleading for the purpose of obtaining a licence. Evidence of statements made in support of this application may be required at a later date. We may approach other authorities such as police authority, Fire and Rescue Service, Office of Fair Trading etc, and tenants for additional information or verification. Signing the application will be taken as your agreement to any such action. If we subsequently discover something which is relevant and which you should have disclosed, or which has been incorrectly stated, your licence may be cancelled or further action, including legal action, taken against you.

Please return the completed form along with the relevant enclosures, supporting documents and fee to:

Residential Team
 Regulatory Services
Kingston and Sutton Shared Environment Services
 Civic Offices
 St Nicholas Way
 Sutton
 Surrey SM1 1EA

E-mail: environmentalhealth@sutton.gov.uk

If you are uncertain how to answer any of the questions or have any queries about the process or HMOs in general we would encourage you to seek advice and guidance by contacting the Residential Enforcement Team at the above postal or email address or call us on 020 8770 5000.

Application fee	£250 per room available to let*.	A room available to let includes: a. bedsit rooms b. bedrooms in a shared house or flat which is occupied by more than one household (even if there is only one tenancy agreement for all tenants) c. self-contained flats in single household occupation within the HMO d. vacant rooms which could be used as a letting.
Discount for Accredited** licence holder or manager*	£100	On new licence applications only.
Assisted application	Additional £300 per HMO	Added to the above for assistance with measuring rooms, producing plans and completing the application form.
Renewal of licence	£210 per room available to let*.	If no change to property or licence holder or manager details, otherwise fee charged as for new application * See note above.
Licence Variation	No Charge	If there is a change to the licence holder, a new application and appropriate fee will be required.

Revocation of licence / no longer licensable / refuse to licence / numbers of occupants reduced by conditions on licence	No refund	Once application submitted for specified number of lettings, costs have been incurred in processing application, draft and/or full licence
Temporary Exemption from Licensing	No Charge	If you are proposing to reduce the number of occupiers below licensing requirements.
Student Accommodation:- Application fee for large student accommodation developments	£25 per bed space	This fee only applies to licensable large scale purpose built or converted student accommodation where the provider has not signed up to the ANUK/Unipol Code of Practice.

*** Of an approved scheme such as LLAS, NLA, RLA, UKLAP**

**** Accredited under Accreditation scheme; e.g. London Landlords Accreditation Scheme (LLAS). For more information see www.londonlandlords.org.uk/accreditation or phone 020 7974 5893 or e-mail LLAS@camden.gov.uk**

***** If there is a change of licence holder, this will be treated as a new application**