



Licensing of Houses in Multiple Occupation

Mandatory Licensing Application Form

Housing Act 2004



Licensing of houses in multiple occupation ensures that certain types of rented property meet necessary standards to ensure a house is safe for the occupants, also that the landlord is competent, qualified and the most appropriate person to manage it. The houses must have adequate fire precautions and sufficient kitchen and bathroom amenities for the number of occupants. The Council will take into account any criminal convictions that the landlord may have and may refuse to grant a licence if the landlord is considered not to be a 'fit and proper' person.

Please answer all questions carefully, and sign the declaration at the back of the form. If you have more than one property in multiple occupation you will need to complete a separate application form for each property. If you find there is insufficient space to supply your answers to a question, please use a continuation sheet and attach it to the application marking the sheet with the section number to which the information relates.

Complete the form carefully and legibly using black or blue ink and refer to the guidance notes to assist you in completing it.

The following checklist provides details of the documentation that **must** be provided with this completed application form. (Please tick).

- **Appropriate fee.**
- **One passport sized photo of proposed licence holder (35mm x 45mm only)**
- **Landlords Gas Safety Record**
- **Domestic Electrical Installation Condition Report**
- **Energy Performance Certificate.**
-

The following documentation must be provided if available:-

- Fire Safety Risk Assessment.
- Building Regulations Completion Certificate.
- Planning Approval (for any conversion or change of use to HMO).
- PAT Test for portable electrical equipment.
- Annual Fire Alarm servicing certificate

For office use only	
Date received	<input type="text"/>
Fee amount	<input type="text"/>
Reference	<input type="text"/>

For advice or assistance about this application, property standards or whether a property requires a HMO licence please contact:-

Shared Regulatory Services
 C/O Vale of Glamorgan Council
 Civic Offices, 1st Floor
 Holton Road
 Barry
 CF64 4PR

Tel: 0300 123 6696
c1v@valeofglamorgan.gov.uk
www.srs.wales

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1. Application Details

1a. Address of property to be licensed _____

_____ Postcode _____

1b. Type of application New Change of owner/Licence holder

2. Proposed licence holder details (person, business or organisation whose name will be on the licence)

2a. Name of proposed licence holder (if company, please give full company name)
Surname _____ First Name(s) _____
Address _____

_____ Postcode _____

Date of Birth _____ Place of Birth _____

Home Tel. No. _____ Work Tel. No. _____

Mobile Tel. No. _____

Email address _____

2b. Status of the proposed licence holder.

Individual or sole trader Company Partnership

Charity or Trust Other _____

2c. If company, partnership, charity or Trust, please give details:-

Business/organisation name (if registered, use the registered name) _____

Registration No. (if applicable) _____

2d. Provide details about all, company directors and the secretary (if the proposed licence holder is a company), all partners (if it is a partnership), and all the trustees (if it is a charity or trust).

Name and address of company secretary (if applicable) _____
_____ Postcode _____

Names and addresses of directors/partners/trustees (if applicable).

1. _____

2. Proposed licence holder details (Cont'd).

Names and addresses of directors/partners/trustees (Contd).

2. _____

3. _____

3. Contact details in relation to this application

Complete this section only if someone other than the proposed licence holder should be contacted about this application and/or access to the property to be licensed.

3a. Please provide contact details of the person to contact about this application.

Name _____

Address _____
_____ Postcode _____

Home Tel. No. _____ Work Tel. No. _____

Mobile Tel. No. _____ Email address _____

What is the relationship to the proposed licence holder? _____

3b. Please provide contact details of the person to contact in order to gain access to the property to be licensed if different from above.

Name _____

Address _____
_____ Postcode _____

Home Tel. No. _____ Work Tel. No. _____

Mobile Tel. No. _____ Email address _____

What is the relation to the proposed licence holder? _____

4. Ownership and control of the property to be licensed

- | | | |
|-----|--|--------|
| 4a. | Is the proposed licence holder the owner of the property? | Yes/No |
| 4b. | Does the proposed licence holder have control of the property?
(i.e. is legally entitled to receive the rental income from the property). | Yes/No |
| 4c. | Does the proposed licence holder have the powers necessary to manage the property? Including:- | |
| | - Let to and evict tenants | Yes/No |
| | - Access to all parts of the premises. | Yes/No |
| | - Authorise any necessary expenditure. | Yes/No |
| 4d. | Does anybody else have a legal interest in the property (e.g. as freeholder, leaseholder, mortgage provider)? If Yes, please give details in Section 4e. | Yes/No |

4. Ownership and control of the property to be licensed (Cont'd)

4e. Please provide details about the owner(s) of the property (**including your mortgage provider**), anybody else who has a legal interest in the property and/or anybody who has agreed to be bound by the conditions of the licence (if it is granted). Please continue on a separate sheet if necessary.

1. Nature of interest in the property _____

Surname _____ First Name(s) _____

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

_____ Postcode _____

Contact details: Home Tel. No. _____ Work Tel. No. _____

Mobile Tel. No. _____

Email address _____

2. Nature of interest in the property _____

Surname _____ First Name(s) _____

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

_____ Postcode _____

Contact details: Home Tel. No. _____ Work Tel. No. _____

Mobile Tel. No. _____

Email address _____

3. Nature of interest in the property _____

Surname _____ First Name(s) _____

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

_____ Postcode _____

Contact details: Home Tel. No. _____ Work Tel. No. _____

Mobile Tel. No. _____

Email address _____

5. Proposed manager of the property

5a. Will the proposed licence holder be the manager of the property? Yes/No
 If yes, go to Section 6.

If no, please provide details about the manager.

Surname _____ First Name(s) _____

Business Name _____

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

_____ Postcode _____

Contact details

Home Tel. No. _____ Work Tel. No. _____

Mobile Tel. No. _____

Email address _____

6. Fit and Proper Person Test

6a. Has any person named in Parts 2, 3, 4 & 5 and/or any person associated with any of them :-

1. 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 (subject to the Rehabilitation of Offenders Act 1974)?	Yes/No
2. Practised unlawful discrimination on grounds of sex, colour, race, ethnic or national origins or disability in, or in connection with, any business?	Yes/No
3. Contravened any legislation relating to housing, public health, environmental health or landlord and tenant law?	Yes/No
4. Been refused a licence under Part 2 or 3 of the Housing Act 2004?	Yes/No
5. Had a licence revoked for breach of any conditions under Parts 2 or 3 of the Housing Act 2004?	Yes/No
6. Contravened any Code of Practice relating to the management of HMOs?	Yes/No
7. Been subject to a Control Order under the Housing Act 1985 (in the past 5 years)?	Yes/No
8. Been subject to a Management Order under the Housing Act 2004?	Yes/No

Please see guidance notes a back of form for further information.

8. Details of the property to be licensed.

8a. Type of property (HMO or house)

House in multiple occupation Flat in multiple occupation

Other (please specify) _____

8b. Type of Building:

Detached House	<input type="checkbox"/>	Semi Detached House	<input type="checkbox"/>	Terraced House	<input type="checkbox"/>
End Terrace House	<input type="checkbox"/>	Mixed Residential and Commercial	<input type="checkbox"/>	Back-to-Back House	<input type="checkbox"/>
Back-to-Back House	<input type="checkbox"/>	Grouped Structure (dwelling which shares a part wall in a cluster or around a courtyard)			<input type="checkbox"/>

Other (please specify) _____

8c. When was the building originally built?

Before 1919 1919-1945 1946-1964 1965-1980 After 1980

8d. How many storeys (include ground floor, basements, attic conversion and mezzanines).

1 2 3 4 5 6 7

8e. Give details of any commercial use e.g. shop on the ground floor, shop, restaurant, office.

8f. Is the property to be licensed: -

Purpose built with its present design

Converted from a previous residential dwelling

Converted from a non-residential structure

If converted, approximately date of conversion _____

Do you have documents that give evidence of planning permission and/or building regulation approval of the conversion? You may be required to submit these documents with your application. Yes/No

8g. Have you completed any improvements or repairs on the house prior to submitting your application? If yes, provide details:- Yes/No

Means of escape Insulation Amenities

Security Other (please specify) _____

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9. Occupancy/Tenancy Information

9a. How many separate households live in the property? Refer to guidance for definition of household.

At time of application _____ Proposed maximum _____

How many occupants live in the property?

Total No. at time of application _____ Proposed maximum _____

No of adults. _____ No. of children _____

9b. Is there a resident landlord? _____ Yes/No

How many people are there in the landlord's household? _____

Which parts of the property does the landlord's household occupy? _____

9c. Provide details of any catering arrangements for occupants of the property. (eg. B&B, full board, self catering. _____

10. Accommodation details

10a. Give details of the number of letting units in property. Please see guidance for further information.

Unit details	Total No.
Separate letting units in property (rooms or units).	
Self-contained letting units (flats or bedsits).	
Non - self-contained units (flats or bedsits).	
Units with dormitories.	

10b. Give details of the number of rooms and facilities available in the property?

Rooms/Facilities in property	Total no. in property	Use exclusive to one letting unit	Use shared between letting units
Bedrooms (excluding bedsits)			
Bedsits (i.e. combined living/bedroom)			
Living/dining rooms (exclude kitchen dining rooms and bedsits)			
Kitchens (include kitchen dining rooms)			
Sinks (exclude wash hand basins)			
Shower/bath			
Toilets in shower/bathrooms			
Separate toilets with wash hand basins. (exclude external toilets).			
Separate toilets without wash hand basins. (exclude external toilets).			
Wash hand basins. (include all wash hand basins).			

10. Accommodation details (Cont'd)

- 10c. Do all baths, showers, sinks and wash hand basins supply cold and constant hot water? Yes/No
- 10d. Are all kitchens equipped with the following: -
- a sink with a draining board. Yes/No
 - a means of cooking food. Yes/No
 - electrical sockets. Yes/No
 - worktops for food preparation. Yes/No
 - storage cupboards. Yes/No
 - refrigerator and freezer (or freezer compartment). Yes/No
 - refuse storage facilities. Yes/No

11. Heating and Energy Efficiency

11a. What type of heating does the property have? (Please tick all that apply).

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

If other, please provide details. _____

11b. Do all the rooms in the property have a source of heating? (e.g. Radiator or fire) Yes/No

If no, please provide details. _____

11c. Do all bathrooms and kitchens have a means of natural or mechanical ventilation? Yes/No

If no, please provide details. _____

11d. Are windows double glazed? All/some/none

11e. Is the roof space insulated? All/some/none/na

If all or some, please provide details including the thickness of insulation in mm.

11f. Are cavity walls insulated? All/some/none/na

11g. Are hot water tanks lagged? All/some/none/na

11h. Is there an Energy Performance Certificate for the property? Yes/No

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

12. Gas and Electricity

12a. Does the property have a gas supply? Yes/No

Gas installations

You **must** supply with this application, a copy of the current Gas Safety Record(s) covering all gas appliances in the property. The Record must be within date and show that appliances are in a satisfactory condition. (You are required to have all appliances etc. checked annually by a Gas Safe registered engineer).

12b. **Electrical installations**

You **must** supply with this application, a copy of a current and satisfactory Domestic Electrical Installation Condition Report for the property, completed by a competent electrical engineer. The certificate must be within date (max 5 years) and certificates with code 1 or code 2 defects will not be accepted as satisfactory.

12c. **Electrical appliances**

Are any portable electrical appliances provided for use by the occupants? Yes/No
(e.g.) kettle, refrigerator, vacuum cleaner).

Are any of these appliances more than 12 months old? Yes/No

13. Fire precautions

13a. Has a fire safety risk assessment been undertaken? Yes/No

You may be required to submit a copy of the fire risk assessment with this application if available.

13b. Are smoke and/or heat alarms (or detectors) provided in the property? Yes/No

If yes, please indicate type, number and location of alarms or detectors.

Battery operated	<input type="checkbox"/>	Mains electricity— stand alone	<input type="checkbox"/>
Mains electricity—interlinked	<input type="checkbox"/>	Mains electricity—panel controlled	<input type="checkbox"/>

How many alarms or detectors? _____

13c. Please indicate if the following equipment is provided in the property?

Fire Doors	<input type="checkbox"/>	Fire Blankets in each Kitchen		<input type="checkbox"/>
Fire Extinguishers	<input type="checkbox"/>	Emergency Lighting in Common Areas		<input type="checkbox"/>
None of the above	<input type="checkbox"/>			<input type="checkbox"/>

13d. Please indicate if all the fire doors have the following: -

Self-Closing Doors	<input type="checkbox"/>	Intumescent Strips		<input type="checkbox"/>
Cold Smoke Seals	<input type="checkbox"/>	None of the above		<input type="checkbox"/>

13. Fire precautions (Cont'd)

13e. Provide details of the fire escape routes from the property and how you ensure they are kept clear.

13f. Provide details of any fire safety information or training provided to the occupiers of the property.

13g. Do all furniture and soft furnishings provided at the property comply with The Furniture and Furnishing (Fire) (Safety) Regulations 1988 (as amended)? Yes/No/Don't know/None provided

13h. Is the fire precaution equipment serviced and inspected by a competent person at regular intervals? Yes/No

Please provide the following details about inspections. You may be required to submit inspection certificates with this application.

Type of equipment (e.g. Emergency lighting, fire alarm system, fire extinguishers)

Name of inspector/company _____

Date of last inspection _____ Certificate No. _____

14. Management of the property to be licensed

14a. Are occupants given a tenancy agreement (or other written statement of terms of occupancy)? Yes/No

You may be required to submit a copy of this document with your application.

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

14d. Is a deposit required at the start of a new tenancy? Yes/No

14e. Are the terms of the tenancy deposit clearly set out in writing? Yes/No

14f. Is the proposed licence holder or manager a member of any government authorised scheme that protects tenants' deposits. Yes/No

If yes, provide details of scheme provider and landlord reference no.

14g. Are tenants given a rent book? Yes/No

18. Declarations

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.

I/we declare that I/we have notified the people listed in Section 17 above about this application and that these are the only people known to me/us that are required to be informed that I have made this application.

I/we declare that any gas appliances, electrical appliances and furniture provided for the use of tenants in the property are in good safe working order and comply with all relevant safety legislation.

I/we declare that the smoke and heat detectors/alarms installed in the house as described in this form are in good safe working order and comply with all the relevant safety information.

I/we declare that adequate financial resources are available to maintain the property ensuring the health and safety of the tenants and to fulfil all other statutory obligations.

I/we understand that the Council may need to carry out investigations to assess whether I/we am/are a "fit and proper" person for the purposes of Part 2 of the Housing Act 2004. I hereby authorise the Council to make such enquiries and share information as it sees fit. Such enquiries may include Disclosure & Barring Service checks, liaison with the Police, Fire Service and other Local Authorities.

Proposed licence holder

Full name _____ Capacity _____

Signature _____ Date _____

Proposed manager

Full name _____ Capacity _____

Signature _____ Date _____

Notification of Application for a Mandatory HMO Licence

The Licensing of (HMOs and Other Houses) Applications, Standards Publication of Designations and Keeping of Registers) Regulations 2006.

The above regulations require that I inform you that a licensing application under Part II of the Housing Act 2004 has been, or will be made in respect of:

Property to be licensed _____

Proposed Licence holder	Name Address Tel. No. Email
Person completing application form (if different from proposed licence holder).	Name Address Tel. No. Email
Local Housing Authority Applied to:-	Bridgend County Borough Council/ Vale of Glamorgan Council* C/O Shared Regulatory Services Civic Offices, 1st Floor Holton Road Barry Vale of Glamorgan CF31 4WB c1v@valeofglamorgan.gov.uk *Delete as appropriate
Date application made (to be made).	
Signature	
Date	
<p>If you would like further information on the licensing of houses in multiple occupation in Bridgend or the Vale of Glamorgan please contact Shared Regulatory Services at the above address or visit our website—www.srs.wales</p>	

Ethnic monitoring

We are continuously trying to update and improve the nature and quality of services to meet the changing needs of our customers, and to ensure that it can be accessed equally by all residents and communities. Would you therefore please help us by taking a few moments to complete the following information.

Any information you give us will be used in the strictest confidence and solely for compiling statistics. Please tick if you would prefer not to answer the following questions.

Are you? Male Female

Do you consider yourself to be Welsh? Yes No

Please indicate which ethnic group you consider yourself to be part of?

1.	White	British	
		European	
		Irish	
		Any other additional white background (please specify)	
2.	Black	British	
		African	
		Caribbean	
		Any other additional black background (please specify)	
3.	Asian	British	
		Pakistani	
		Indian	
		Bangladeshi	
		Any additional Asian background (please specify).	
4.	Mixed race	White and black Caribbean	
		White and black African	
		White and Asian.	
		Any additional mixed race background (please specify).	
5.	Chinese or other far eastern	British	
		Chinese	
		Vietnamese	
		Japanese	
		Korean	
		Any additional Chinese/Far Eastern background (please specify).	
6.		Any additional ethnic background not already listed?	

Guidance Notes for completing the application form

Part 1

Mandatory licensing

You are legally required to licence your property as a House in Multiple Occupation (HMO) if it has 3 or more storeys and is occupied by 5 or more persons forming 2 or more households.

If you are the new owner of a licensed HMO you may apply for a licence as a change of owner.

If you are unsure about whether or not your property should be licensed, please contact us.

Does your HMO have Planning Permission?

If you require clarification please contact -

Bridgend County Borough Council—Planning@bridgend.gov.uk or telephone 01656 643643.
Vale of Glamorgan Council — Planning@valeofglamorgan.gov.uk or telephone 01446 700111

As the proposed licence holder you are required to complete every part of the application form and sign the declaration at the end of the form confirming that the information you have provided is correct to the best of your knowledge.

If the proposed licence holder is a company, you must provide the address of the registered

Part 2

office and the names of the company secretary and directors.

If the proposed licence holder is a partnership or trust, you must provide the names of all the partners and trustees.

The 'proposed licence holder' is the person whose name will be on the licence (if issued). The proposed licence holder must be the person who is the most appropriate person to hold the licence for the property, and this is likely to be the person who receives the rent for the property.

In some circumstances, the proposed licence holder may wish for another party/person to act as a contact point for their application and for arranging access to inspect their property. If

Part 3

this is the case, it is important that full contact details be provided in this section.

Part 4

A 'freeholder' can be a person (or persons) or a company who is registered as the proprietor of a freehold estate in the land with title absolute.

A 'leaseholder' is somebody who owns a long lease on their property (usually for a term of more than 21 years), which gives them the right to occupation and use of the property for the term of the lease.

A 'person bound by a condition of the licence' could be any person who is involved in the management and/or maintenance of the property. This will also depend on the licence conditions.

Part 5

If the property is not managed by the proposed licence holder, please answer 'No' to the first question and complete the details of the person or organisation responsible for management and include the following details:-

- Name
- Address
- Contact Details

Part 6

Before granting a HMO Licence the Council must be satisfied that the licence holder, manager and any other person involved in managing the HMO are fit and proper. This part of the form therefore aims to collect information on all persons named in parts, 2, 3, 4 & 5 or any other person associated with the property to enable us to determine this. Contraventions and unspent convictions must be declared for the purposes of making this judgement. Answering yes to any of the questions 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.

NB Associated persons may include parents, spouses, siblings, cousins, children, business partners, maintenance workers, etc. The Council will take account of the criminal record of any associated persons and may refuse to grant a licence if it feels that an associated person with relevant criminal convictions is likely to have a significant role in the operation and management of a licensable property. .

Part 7

Rent Smart Wales administers the requirements for landlord registration and agent and landlord licensing under the Housing (Wales) Act 2014. This legislation places legal obligations on landlords with properties in Wales to register as a landlord, and, if they undertake letting and management tasks at their rental properties, obtain a Landlord Licence following suitable training. There are also new legal obligations on agents who undertake letting and management work at rental properties in Wales on behalf of landlords which requires them to obtain an Agents Licence. For further information please visit www.rentsmart.gov.wales or telephone 03000 133344.

Part 8

'Multiple occupation' is where occupants are not all part of the same family.

'Self contained flats' are separate and self contained premises.

'Grouped' is a dwelling which shares a party wall in a cluster or around a courtyard.

Part 9

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, including 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 staff are also included in the household if they are living in rent-free accommodation provided by the person for whom they are working.

Therefore, 3 friends sharing together are considered 3 households because they are not related as family. If a couple are sharing with a third person that would consist of 2 households.

If a family rents a property this is a single household. If that family had an au-pair to look after their children that person would be included in their household.

An 'occupant' is a person who occupies the property as a residence; this person can be either a tenant, leaseholder, licensee 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.

Part 10

A separate 'letting unit' is any rented unit of accommodation let on separate tenancy contracts or to separate households. This could be a:-

- Room/bedsit
- Studio
- Flat
- Floor by floor let etc.
- House

Self contained letting unit is a unit where the occupants have exclusive use of kitchen, bath/shower and toilet facilities. A **non Self contained unit** is a unit where occupants share use of kitchen bath/shower and/or toilet facilities. **Dormitories** are where occupants share use of facilities including sleeping space.

Part 10 (Cont'd)

You must complete the grids detailing the number of each facility within the property and individual lettings.

'Sinks' means kitchen sinks, not wash hand basins.

Part 12

Gas installations

You **must** supply with this application, a copy of the current and satisfactory Gas Safety Record (s) covering all gas appliances in the property. The Record must be within date. (You are required to have all appliances etc. checked annually by a Gas Safe registered engineer).

Electrical installations

You **must** supply with this application, a copy of a current and satisfactory Domestic Electrical Installation Condition Report for the property, completed by a competent electrical engineer. The certificate must be within date (max 5 years) and certificates with code 1 or code 2 defects will not be accepted as satisfactory.

Part 13

All HMOs should have a safe escape route in the event of fire and adequate fire precautions, which may include fire alarms, smoke and heat detectors, emergency lighting, fire extinguishers and fire blankets. These must be well maintained and adequate for the number of residents and the size of the property.

You may be required to submit a copy of the property's Fire Safety Risk Assessment if the property is covered by the Regulatory Reform (Fire Safety) Order 2005. This could include. You may also be required to submit a Fire Safety Risk Assessment if it is deemed appropriate after an officer has visited your property and undertaken a full licensing inspection.

You are required to provide information on the fire safety provisions there are in the property that needs to be licensed. They include fire detection and emergency lighting systems and other fire precautions such as fire doors, a protected means of escape (i.e. staircases, landings etc). Please tick the relevant boxes to indicate what fire safety measures are in the property.

An '**emergency lighting system**' is designed to automatically illuminate the escape route upon failure of the supply to the normal artificial lighting.

'**Fire Safety equipment**' such as extinguishers and fire blankets where provided must be checked periodically and the correct sort of extinguisher must be provided. It is recommended that there should be a multi-purpose AFFF 6 litre foam or 2kg dry powder extinguisher on each floor within the communal escape route.

The **Furnishings (Fire Safety) Amendment Regulations 1993** set levels of fire resistance for domestic upholstered furniture, furnishings and other products containing upholstery. Upholstered furniture must have fire resistant filling material and must pass a cigarette resistance test and permanent covers must pass a match resistance test. Landlords letting residential property will be expected to ensure that any soft furniture complies with these regulations.

Part 13 (Cont'd)

'Upholstered furniture' which is covered by the above regulation include; beds, headboards, mattresses, sofa-beds, nursery furniture, garden furniture which can be used indoors, furniture in new caravans, scatter cushions, seat pads and pillows and loose and stretch covers for furniture. You should be looking for furniture which is properly labelled as meeting the requirements of the regulations.

Part 16

You must complete Part 16 by using the space provided to list the names, addresses and descriptions (e.g. leaseholder, mortgagee etc). Of all persons who need to know that an application for a HMO licence has been made. The people who need to know about it are:-

- 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 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 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 will be bound by any conditions in a licence if it is granted.

Checklist

You must ensure that you submit **all** the required documents listed in checklist on the front of this application form. Failure to submit these documents with the completed form will render the application form invalid and it will not be processed.

- **Appropriate fee (see below)**
- **One passport sized photo (35mm x 45mm only).** If submitting multiple applications, you need only submit one photo.
- **Landlords Gas Safety Record** - A copy of the current Gas Safety Record(s) covering all gas appliances in the property. The Record must be within date and show that appliances are in a satisfactory condition. (You are required to have all appliances etc. checked annually by a Gas Safe registered engineer). .
- **Domestic Electrical Installation Condition Report** — A copy of a current and satisfactory Domestic Electrical Installation Condition Report for the property, completed by a competent electrical engineer. The certificate must be within date (max 5 years) and certificates with code 1 or code 2 defects will not be accepted as satisfactory.
- **Energy Performance Certificate** - Certificate must be dated within 10 years of date of receipt of application.

Fees

Mandatory HMO Licence—£761 The licence will last for a period of up to 5 years, after which it will need to be renewed.

For the Vale -Cheques to be made payable to the relevant local authority (Vale of Glamorgan Council) and submitted with completed form.

For Bridgend- Payment can be made over the telephone by contacting **01656 643112**.

Change of owner— The fee for issuing a Licence to a new owner in respect of a currently licensed HMO varies according to the condition of the property and is determined on receipt of a correct application. Current fees are £50 where our records show that the property is fully up to standard and no inspection is required, and £330 if our records show that the property is not up to standard and an inspection is deemed necessary. You will be advised of the relevant fee following the receipt of your application. If application is approved, the Licence will be

If you need any advice or assistance concerning this application, then please refer to the front page of this application form for contact details.