# House in Multiple Occupation (HMO) Licence Application

**Housing Act 2004, Part 2**

Please use a black pen and make sure every section is completed fully. If a question is not applicable write N/A in the box.

If you need to provide additional information requiring more space than that made available on the form, please state in the relevant box that there is additional information and include it on separate sheets, writing the address of the property and the relevant section on each page.

If there is more than one house or flat in multiple-occupation that needs to be licensed, you will need to complete separate application forms.

<table>
<thead>
<tr>
<th>Type of application (please tick appropriate box)</th>
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<tr>
<td>First time licence</td>
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<th>Address of house to be licensed:</th>
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<th>Postcode:</th>
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**Please note:** a photocopy of this form is acceptable for multiple applications by the same Applicant(s) and the same Manager(s) and made within the same financial year (April-March).

Licence holders are responsible for ensuring the licence conditions are met. They can be any named person or persons that are able to fulfill this responsibility.

If multiple people are named as licence holders then they are equally responsible for compliance with licence conditions.
Please note that Broadland District Council takes your privacy very seriously. Under data protection legislation we lawfully process your personal information as a Public Authority. Any data received as a result of the House in Multiple Occupation Licence Application process will be stored for no longer than is necessary as the procedure progresses and in accordance with the Council’s data protection policy. Upon completion of any works at the property the details will be stored for a maximum of seven years.

You need to know that under data protection law you have the right to request access to, rectification, restriction or objection, to the processing of your personal data, as detailed in our Privacy Policy (on our website Broadland.gov.uk).

You can contact our Data Protection Officer by emailing dpo@broadland.gov.uk or calling 01603 431133. You also have the right to lodge a complaint with the regulator, the Information Commissioner’s Office.
Section A – Applicant(s) and Manager(s) Information

a. **Name & Address of applicant(s) and manager(s)**
   Please complete the following details - draw a line through any rows that do not apply.

<table>
<thead>
<tr>
<th>Interest</th>
<th>Name</th>
<th>Address (including postcode)</th>
<th>Phone / fax (work &amp; Home)</th>
<th>Email</th>
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<tr>
<td>Applicant/s</td>
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<td>Proposed licence holder/s</td>
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<td>Manager/s</td>
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<td>Person/s having control</td>
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<td>Anyone else bound by a licence condition</td>
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b. **If any of the above are a company, partnership, or trust, please indicate their business name and complete the following:**

i. **Company/partnership/trust information including registered address or principal trading address where appropriate:**

Address/es:
ii. Names and addresses of all directors, partners or trustees (please continue on a separate sheet if necessary):

<table>
<thead>
<tr>
<th>Name:</th>
<th>Address:</th>
<th>Tel:</th>
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iii. Name and address of Company Secretary:

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Please confirm the address where you would like the HMO Licence to be posted and confirm with the signature of all directors, partners or trustees:

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<thead>
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<th>Address:</th>
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<table>
<thead>
<tr>
<th>Director / Partner / Trustee name</th>
<th>Position</th>
<th>Signature</th>
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c. **Fit & proper person**

The legislation requires that before a licence is issued the Council must ensure that the person involved in the management of the property is sufficiently competent, is a 'fit and proper person' and that management structures and funding are adequate.

The following information must therefore be supplied in relation to any person that the applicant proposes will be involved in the management of the house:

i. Details of any **unspent convictions** that may be relevant to the proposed licence holder’s fitness to hold a licence, or the proposed manager’s fitness to manage the HMO or house and in particular any such conviction in respect of any offence involving:
   - fraud or other dishonesty, (including benefit fraud);
   - violence or drugs; or
   - any offence listed in Schedule 3 to the Sexual Offences Act 2003, (subject to the Rehabilitation of Offenders Act 1874).

ii. Details of any finding by a court or tribunal against the proposed licence holder or manager that they have practised **unlawful discrimination** in, or in connection with, the carrying on of any business, on grounds of:
   - Sex;
   - Colour;
   - Race;
   - Ethnic or national origin; or
   - Disability.

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

iv. Information about any HMO or house that the proposed licence holder or manager owns or manages (or has owned or managed) which has been the subject of:
   - a **control order** under section 379 of the Housing Act 1985 in the five years preceding the date of the application, or
   - any appropriate enforcement action described in section 5(2) of the Housing Act 2004, including:
     - service of an improvement notice (s.11);
     - making a prohibition order (s.20);
     - serving a hazard awareness notice (s.28);
     - taking emergency remedial action (s.40);
     - making an emergency prohibition order (s.43);
     - making a demolition order (Housing Act 1985, s.265(1) or (2); and
     - declare a clearance area (Housing Act 1985, s.289(2).
v. Information about any HMO or house the proposed licence holder or manager owns or manages (or has owned or managed) for which a local housing authority has **refused a licence** under Parts 2 or 3 of the Act, or has **revoked a licence** in consequence of the licence holder breaching the conditions of the licence.

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

vii. Information about the proposed licence holder or manager who is subject to a **banning order** under the Housing and Planning Act 2016 (Banning Order Offences) Regulations 2017.

c.1. If any of the above apply to you or anyone involved in the management of the property, please provide the following information:

- the address of the property concerned;
- the date when the offence occurred or the adverse finding was made in the civil jurisdiction; and
- any measures you have taken to ensure that the situation is remedied where possible.

Please use a separate numbered and headed sheet for each person involved in any offences to give us all the appropriate information. Please also complete the following table as appropriate.

<table>
<thead>
<tr>
<th></th>
<th>No offences</th>
<th>Yes – number of pages attached?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Applicant</td>
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<tr>
<td>Proposed Licence Holder</td>
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<td>Person managing</td>
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<tr>
<td>Person having control</td>
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<tr>
<td>Any other person bound by licence condition</td>
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</tbody>
</table>
c.2. If you are a member of any landlords association or other professional body, please tell us which and the date you joined:

<table>
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<tr>
<th>Association / Professional Body</th>
<th>Date Joined</th>
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The Council may take up references with any organisation to which you say you belong or on whose lists you state you appear. Making this application will be taken as your agreement to any such action.

c.3. If you are an accredited landlord with another authority, please tell us which and the date of accreditation:

<table>
<thead>
<tr>
<th>Authority</th>
<th>Date of Accreditation</th>
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c.5. Please list any training courses you have undertaken or conferences attended in the last three years which you feel make you a better landlord:

\[\text{Blank space for list}\]

c.6. Please give us any further information which may help us decide if the person managing is a fit and proper person. You may do this on a separate sheet.

\[\text{Blank space for further information}\]
d. **Other licensable properties under the same ownership?**

If you have other properties under your control that need to be licensed under Parts 2 (Mandatory Licensing) or 3 (Selective Licensing) of the act in this or any other local housing authority area, you are also required to provide a list showing details of these. Where applicable, you need to prepare and attach a schedule to this application for each relevant licensing authority (with contact details) showing:

- the address of the property;
- the number of occupiers; and
- whether the property is licensed under Part 2 or Part 3 of the Housing Act.
Section B – Property Details

a.1. Please give approximate date of construction using the categories by ticking the appropriate box:

- Pre-1919 ☐
- 1919-45 ☐
- 1946-64 ☐
- 1965-80 ☐
- Post 1980 ☐

If converted, give approximate date of conversion ........................................

a.2. Description of Building (Please Circle):

- Detached
- Semi Detached
- Terraced
- End Terrace
- Purpose Built HMO
- Flat in converted house
- Self contained flats
- Mixed residential and Commercial
- Other (please give details)..........................................................................................................

a.3. Number of storeys in the property:

- 1 ☐
- 2 ☐
- 3 ☐
- 4 ☐
- 5 ☐
- 6+ ☐

a.4. Are any parts of the building used for non-residential purposes? Yes / No

If Yes, please give details: ..........................................................................................................

a.5. Please tick the appropriate box to state the type of HMO for which the application is being made:

- Shared house ☐
- Traditional bedsit accommodation ☐
- Non-self contained flats ☐
- Hostel (dormitory) type accommodation ☐
- Accommodation above commercial premises ☐
- Other (please describe briefly below) ☐

................................................................................................................................................
a.6. Considering the age, character and locality of the property, please state if it (please circle as appropriate):

1. is secure (with adequate window and external door locks) Yes / No / Not known
2. is reasonably free from damp Yes / No / Not known
3. is clean and in good repair Yes / No / Not known
4. has adequate facilities for rubbish storage and disposal Yes / No / Not known
5. structurally sound and in reasonable repair Yes / No / Not known

a.7. Do you have a schedule for:

1. planned maintenance Yes / No / Not known
2. inspection of furniture/facilities/equipment? Yes / No / Not known

Please provide brief details:
b. Fire Precautions

b.1. Does your system of smoke/heat detectors incorporate:

1. A fire alarm control panel
   - Yes / No / Not known
2. Heat detectors in Kitchens
   - Yes / No / Not Known
3. Heat detectors in rooms
   - Yes / No / Not Known
4. Smoke detectors in rooms
   - Yes / No / Not Known
5. Smoke detectors in common parts, mains powered
   - Yes / No / Not Known
6. Smoke detectors in common parts, battery powered
   - Yes / No / Not Known
7. Sounders/Alarms on all levels
   - Yes / No / Not Known
8. Manual call points at all levels
   - Yes / No / Not Known
9. Emergency Lighting system
   - Yes / No / Not Known

10. How often is the above system tested? ..........................................................

(please indicate the number and location of smoke alarms and detectors below. If easier please submit a layout plan)

b.2. Is there a sprinkler system?
   - Yes / No / Not Known

b.3. Is the main (internal) escape route protected by fire doors, self closers?
   - Yes / No / Not Known

b.4. Is the escape route kept clear of flammable material and obstructions?
   - Yes / No / Not Known

b.5. Is the following fire safety equipment provided?
    - Yes / No / Not known
    • Fire Blankets in all kitchens
    • Fire blankets in shared kitchens only
    • Fire extinguishers
    • Has the fire safety equipment been serviced in the last 12 months? Please supply a copy.

b.6. Do you have a competent contractor to maintain and inspect your fire detection system?
    - Yes / No / Not known
    If yes, please state who .................................................................

b.7. Is there a log book of inspection/testing?
   - Yes / No / Not known
Please confirm in the space below if you have established these or any other fire precaution procedures. Please also give details of any equipment you have provided that is not covered by the above or given the occupiers fire safety training.

---

c. Heating & insulation
c.1. What form of heating does the property have (please tick all that apply)?

- Gas fired central heating ☐
- Off peak night storage heaters ☐
- Individual wall mounted gas heaters ☐
- Individual wall mounted electric heaters ☐
- Other (please state below) ☐

…………………………………………………………....

c.2. Is the loft insulated? Yes / No / Not known

If yes, please tell us the date it was done ……………………………………………………..

c.3. If there are cavity walls, do you have cavity wall insulation? Yes / No / Not known

c.4. Are the windows in good repair? Yes / No / Not known

c.5. If there is a gas supply to the property, please confirm that you have a current Gas Safety Certificate (required annually for the installation and equipment you provide). Please submit a copy of the certificate with your application. Yes / No / Not known

c.6. Do you have an electrical safety certificate from a competent electrical engineer within the last five years confirming that the electrical installation is safe? Please submit a copy of the certificate with your application. Yes / No / Not known

c.7. If you have had any major work done to the electrical installations in the property, please give us the date below.

---
d. Appliances and furniture

d.1. Please indicate whether you provide:

- Furniture
- Appliances

Yes / No / Not known

Yes / No / Not known

d.2. Is all the furniture you provide compliant with current fire safety regulations?

Yes / No / Not known

d.3. Are all the appliances you provide compliant with current gas/electrical safety regulations?

Yes / No / Not known

d.4. Have you had your property inspected for the presence of asbestos?

Yes / No / Not known

e. Tenancy management

The council is required to ensure that there are satisfactory management arrangements for the property. To enable this, please answer the following:

e.1. Are there regular inspections for maintenance at the property? Yes / No

If yes, how often?

Who carries them out?

Yes / No

e.2. Are there arrangements in place to deal with emergency repairs at the property? Yes / No

If yes, what are these arrangements? (How do the tenants know who to contact, how do they contact them and what is their role?)

Yes / No

e.3. Is there provision for 24-hour contact for occupiers of the property in case of emergency? Yes / No

If yes, specify the names and numbers of the contacts?
e.4. Please confirm whether you provide the following tenancy agreements/written details of terms of tenancy, including sanctions for anti social behaviour?

- Standard form of tenancy agreement: Yes / No / Not known
- Inventory and schedule of condition at commencement of occupancy: Yes / No / Not known
- Rent book/receipts: Yes / No / Not known
- Repairs contact/procedure: Yes / No / Not known
- Complaints procedure: Yes / No / Not known

e.5. Please give us any further information you feel will help us to assess your property management skills:
Section C – Property Description:

The following information about the property for which this licence application is being made is required by law:

i. The number of storeys comprising the HMO and the levels on which those storeys are situated. (For example, if there are non-residential storeys, they should be counted when calculating whether the property requires licensing.

ii. The number of separate letting units (eg, whether the property is let as one shared house, the number of bedsits, the number of non-self contained flats, number of beds in dormitory-type accommodation in a hostel, etc).

iii. The number of habitable rooms (including bedrooms/bedsits/dormitories, sitting rooms, dining rooms, etc).

iv. Size of bedrooms / bedsits.

v. The number of bathrooms and shower rooms.

vi. The number of toilets and wash basins.

vii. The number of kitchens.

viii. The number of sinks.

ix. The number of households occupying the property.

x. The number of people occupying the property.

The table on the following page is intended to allow you to indicate the number and location of these facilities. Please continue on a separate sheet if necessary and attach it to the application.

Please note: it is acceptable to provide scale drawings of the property if you would prefer to, as long as all the above information is clearly provided on the drawings.

- Please tell us the number of storeys comprising the HMO: ..........Storeys

- Please tell us below how many people you wish to accommodate under the licence: ..........People

- Please tell us below how many households you wish to accommodate under the licence: ..........Households

(Note: A ‘household’ can either be a single person, a couple living together or people from the same family).
Please complete this form to indicate the number, location and use of the rooms in the property

<table>
<thead>
<tr>
<th>Floor</th>
<th>Number of bedrooms on that floor</th>
<th>Number of occupants on that floor</th>
<th>No. of bedrooms with wash hand basins</th>
<th>Number of living rooms on that floor</th>
<th>Number of dining rooms on that floor</th>
<th>Number of kitchens on that floor</th>
<th>Number of sets of facilities in each kitchen</th>
<th>Number of separate WCs on that floor</th>
<th>Number of separate Showers/baths on that floor</th>
<th>Number of bathrooms on that floor</th>
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<tbody>
<tr>
<td>Example: 1st</td>
<td>4</td>
<td>4</td>
<td>None</td>
<td>1</td>
<td>None</td>
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<td>1</td>
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</table>

Notes:
1. Floor level in property i.e. basement, ground, 1st, 2nd, Attic, etc
2. Number of rooms let as bedrooms
3. Number of persons occupying that floor
4. Number of bedrooms that have wash hand basins fitted in them
5. Number of living rooms, lounges or “common” rooms on that floor
6. Number of rooms used for dining in on that floor
7. Number of kitchens on that floor
8. A set of facilities comprises: cooker, microwave, kettle, sink, washing machine, fridge/freezer.

Please indicate how many people currently occupy the property:

Please indicate what the property consists of i.e. self contained flats, self contained bed-sits, bed-sits with shared facilities or shared house:
Please complete this form to indicate the size, (in m$^2$), of each bedroom / bedsit in the property:

<table>
<thead>
<tr>
<th>Room name (i.e. bedroom1, bedroom 2, etc.)</th>
<th>Floor (Basement, Ground, First, Second, etc.)</th>
<th>Size (m$^2$)</th>
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Please note:
For bedrooms and bedsits, any part of the floor area of a room where the height of the ceiling is less than 1.5 metres is not to be taken into account in determining the floor area of that room.
Section D – Declarations:

By law, you must let certain people 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 mortgage provider for the property to be licensed;
- any owner of the property to which the application relates (if that is not you) who are known to you, i.e. the freeholder and any head lessors who are known to you;
- any person who is a tenant or long leaseholder of any part of the property (including any flat) who is known to you, other than statutory or other tenants whose leases/tenancies are 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); and
- any person who has agreed to be bound by any condition or conditions in a licence if granted

You must tell each of these people:

- your name, address, telephone number and e-mail address or fax number (if any);
- the name, address, telephone number and e-mail address or fax number (if any) of the proposed licence holder (if that is not you);
- that you are applying for a House in Multiple Occupation licence under Part 2 of 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 will be submitted.

Please tell us in part (a), on the next page, who you have informed in writing and sign the declaration.

Alternatively, if there is no-one that you need to inform, please only sign the declaration in part (b), on the next page.
Section D – Declarations

Mandatory HMO Licensing Application (Under Part 2 of the Housing Act 2004)

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

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<tr>
<th>Name</th>
<th>Signature</th>
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Persons Informed:

<table>
<thead>
<tr>
<th>Name (Title, forename and surname)</th>
<th>Address telephone number &amp; email address</th>
<th>Description of the person’s interest in the property or application</th>
<th>Date of service</th>
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If necessary, please attach a separate sheet and continue. If you do attach an extra sheet, please tick this box ☐

b. Alternatively, I/we declare that there are no persons required to be informed that I/we have made this application.

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<thead>
<tr>
<th>Name</th>
<th>Signature</th>
<th>Date</th>
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You must also complete the following declaration for all applications:

I/we declare that the information contained in this application is correct to the best of my/our knowledge. I/we understand that it is an offence to 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 are reckless as to whether it is false or misleading.

<table>
<thead>
<tr>
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(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 another authorised officer, in which case we will require proof of authority.)

Please note: it is a criminal offence to knowingly supply information which is false or misleading for the purposes of obtaining a licence. Evidence of any statements made in this application with regard to the property concerned may be required at a later date. 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 cancelled or other action taken.)
Mandatory HMO Licensing Application (Under Part 2 of the Housing Act 2004)
Please use this form to calculate the appropriate fee.

Under the licensing arrangements for certain types of houses in multiple occupation every local authority has to set their own fee level for licences. Fees must however, reflect the actual costs of licensing a property and have a structure which is fair and transparent. The fee does not include aspects of management or enforcement of the licensing scheme.

If it is not clear which fee applies to your property or whether the property requires a licence please contact us to discuss the situation.

Scale of Charges:

- £575.00 for up to 5 lettings then £27.00 per extra letting.
- If your property has 6 lettings then the licence fee would be £575.00 plus £27.00 for the extra letting, therefore the total would be £602.00. If in doubt, please contact the Private Sector Housing team for advice

How to pay:

1. Complete and send in your HMO Licence application form to the Private Sector Housing Team.
2. Upon receipt of your completed HMO Licence application form you will receive an invoice requesting the appropriate payment. (The information provided in the application form concerning the number of occupants of the property will enable us to determine the appropriate fee).
3. The invoice will provide full details of how you can pay. This will include the options of paying by cheque, debit or credit card over the telephone or online, making a BACS payment or at your local post office, etc.
4. You will receive confirmation of your payment.

Please note:

- The fee is for the Licence application process. It does not include aspects of management or enforcement of the licensing scheme.
- If you are uncertain what fee you should be paying, please get in touch with us.
- If you wish to discuss payment options further please call us on 01603 430518 or e-mail: p.s.housing@broadland.gov.uk and ask for assistance for HMO Licensing.
- If, during the application process, the property if found not to require a licence the fee will be refunded. The fee is not refundable, however, once a licence has been issued (e.g. if a property is converted to single occupation during the licence period.
- Fees may be reviewed from time to time to ensure they reflect the full cost of administering the licensing arrangements.
Further information on HMO Licensing is available from our website at [www.broadland.gov.uk](http://www.broadland.gov.uk)

You can download copies of all forms and documents online.

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