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| **THE CIVIC GOVERNMENT (SCOTLAND) ACT 1982 (LICENSING OF SHORT-TERM LETS) ORDER 2022**  **APPLICATION FOR A SHORT-TERM LET LICENCE**  PLEASE READ GUIDANCE NOTES SUPPLIED BEFORE COMPLETING THE FORM |
| 1. **LICENCE DETAILS**   Tick one box only:  Secondary Letting  Home Letting  Home Sharing  Home Letting and Home Sharing  Are you applying for a temporary licence? YES / NO |
| 1. **APPLICANT DETAILS**   Tick one box only: Individual  Corporate Entity  **B.1 Individual Details:-**  Full Name …………………………………………………………………………………..  Home Address …………………………………………………………………………………..  …………………………………………………………………………………..  …………………………………………………………………………………..  Post Code …………………………………………………………………………………..  Tel. No ……………………………………Mobile……………………………………..  If you have lived at this address for less than five years, you must provide previous addresses below to cover this period.  Previous Address 1 …………………………………………………………………………………..  …………………………………………………………………………………..  …………………………………………………………………………………..  Post Code …………………………………………………………………………………..  Previous Address 2 …………………………………………………………………………………..  …………………………………………………………………………………..  …………………………………………………………………………………..  Post Code …………………………………………………………………………………..  If you have further address details to add, include these in the additional information sheet attached to this application.  Email …………………………………………………………………………………..  Date of Birth …………………………………….Age……………………………………….  Place of Birth …………………………………………………………………………………..  Are you a Registered Landlord? YES / NO  If yes, please provide your landlord registration number …………………………………………..  **B.2 Corporate Entity**  Full Name of Person completing application …………………………………………………………..  Full Name of Corporate Entity …………………………………………………………………………  Address of Registered …………………………………………………………………………………..  or Principal Office  …………………………………………………………………………………..  …………………………………………………………………………………..  Post Code …………………………………………………………………………………..  Tel. No …………………………………………………………………………………..  Email …………………………………………………………………………………..  **Full details of all Directors, Partners or other persons responsible for management of the entity** (continue on the additional information sheet if necessary)  Full Name …………………………………………………………………………………..  Home Address …………………………………………………………………………………..  …………………………………………………………………………………..  …………………………………………………………………………………..  Post Code …………………………………………………………………………………..  Tel. No ……………………………………Mobile……………………………………..  Email …………………………………………………………………………………..  Date of Birth …………………………………….Age……………………………………….  Place of Birth …………………………………………………………………………………..  Full Name …………………………………………………………………………………..  Home Address …………………………………………………………………………………..  …………………………………………………………………………………..  …………………………………………………………………………………..  Post Code …………………………………………………………………………………..  Tel. No ……………………………………Mobile……………………………………..  Email …………………………………………………………………………………..  Date of Birth …………………………………….Age……………………………………….  Place of Birth …………………………………………………………………………………..  Full Name …………………………………………………………………………………..  Home Address …………………………………………………………………………………..  …………………………………………………………………………………..  …………………………………………………………………………………..  Post Code …………………………………………………………………………………..  Tel. No ……………………………………Mobile……………………………………..  Email …………………………………………………………………………………..  Date of Birth …………………………………….Age……………………………………….  Place of Birth ………………………………………………………………………………….. |
| **C. DAY TO DAY MANAGEMENT OF THE PREMISES**  Do you intend to carry out the day to day management of the premises? YES / NO  If no, provide the full details of the agent/day-to-day manager who will be responsible for management of the premises:  Full Name …………………………………………………………………………………..  Home Address …………………………………………………………………………………..  …………………………………………………………………………………..  …………………………………………………………………………………..  Post Code …………………………………………………………………………………..  If the agent/day to day manager has lived at this address for less than five years, provide previous addresses below to cover this period.  Previous Address 1 …………………………………………………………………………………..  …………………………………………………………………………………..  …………………………………………………………………………………..  Post Code …………………………………………………………………………………..  Previous Address 2 …………………………………………………………………………………..  …………………………………………………………………………………..  …………………………………………………………………………………..  Post Code …………………………………………………………………………………..  If you have further previous address details to add, include these in the additional information sheet attached to this application.  Tel. No ……………………………………Mobile……………………………………..  Email …………………………………………………………………………………..  Date of Birth …………………………………….Age……………………………………….  Place of Birth ………………………………………………………………………………….. |
| **D. PREVIOUS/OTHER SHORT-TERM LET LICENCE DETAILS**  Have you or anyone else named on this application held a short-term let licence? YES / NO  If yes, please provide the licensee’s full name, name of licensing authority who granted the licence and the type of short-term let licence held  ………………………………………………………………………………….  …………………………………………………………………………………..  ………………………………………………………………………………….. |
| 1. **OWNERSHIP OF THE PREMISES**   Do you own the premises/land on which the premises are located that  you are seeking a licence for? YES / NO  If yes, do you share ownership? YES / NO  If you do not own, or are not the sole owner of the premises/land on which the premises are located, please provide the full name(s) and address(es) of each owner (continue on the additional information sheet if necessary):  Full Name …………………………………………………………………………………..  Home Address …………………………………………………………………………………..  …………………………………………………………………………………..  …………………………………………………………………………………..  Post Code …………………………………………………………………………………..  Full Name …………………………………………………………………………………..  Home Address …………………………………………………………………………………..  …………………………………………………………………………………..  …………………………………………………………………………………..  Post Code …………………………………………………………………………………..  If you do not own or are not the sole owner of the premises, do you have  permission of the owner(s), each other owner(s) or, person authorised to act  on behalf of the owner(s)? YES / NO  Have you included a consent declaration from each owner(s)/each other owner(s)  or, person authorised to act on behalf of the owner(s) with this application? YES / NO |
| 1. **PREMISES**   Full Address of Premises …………………………………………………………………………………..  (including County)  …………………………………………………………………………………..  …………………………………………………………………………………..  Post Code …………………………………………………………………………………..  Please confirm the Moray Council Ward where the premises are located by ticking the relevant box.  Ward 1 Speyside Glenlivet  Ward 2 Keith and Cullen  Ward 3 Buckie  Ward 4 Fochabers Lhanbryde  Ward 5 Heldon and Laich  Ward 6 Elgin City North  Ward 7 Elgin City South  Ward 8 Forres  Is the premises located within a National Park? YES / NO  If yes, please confirm the National Park where the premises are located by ticking the relevant box.  Cairngorms National Park  Loch Lomond and Trossachs National Park  **F.1 Description of the Premises**  Please give a general description of the type of the premises (e.g. bungalow, flat, unconventional dwelling, specify number of floors, etc) and enclose a detailed floor/layout plan. Your plan should indicate room sizes, fire escape routes, steps, stairs, elevators or lifts, accommodation intended for guests with mobility impairment as well as the extent and boundary of the building if relevant.  ……………………………………………………………………………………………………………………………..  ……………………………………………………………………………………………………………………………..  ……………………………………………………………………………………………………………………………..  ……………………………………………………………………………………………………………………………..  ……………………………………………………………………………………………………………………………..  Please provide details of any third party accreditation or certification awarded to the premises (e.g. Visit Scotland Quality Assurance, date of award and number of stars awarded).  ……………………………………………………………………………………………………………………………..  ……………………………………………………………………………………………………………………………..  ……………………………………………………………………………………………………………………………..  **F.1.1 Rooms**  Total number of habitable rooms (include kitchen) …………………………..  Total number of letting bedrooms …………………………..  Total number of beds available for use by the guests …………………………..  Total number of public rooms available for use by the guests …………………………..  i.e. lounge/dining room etc.  Total number of rooms used for owner/manager’s private accommodation …………………………..  **F.1.2 Catering**  Do you offer Self Catering accommodation? YES / NO  Do you offer Bed Only accommodation? YES / NO  Do you offer Bed & Breakfast/Full Board accommodation? YES / NO  **F.2 General Safety and Standards**  **F.2.1 Fire Safety**  Does the premises have satisfactory equipment installed for detecting and  giving warning of fire or suspected fire, and the presence of carbon monoxide? YES / NO  Do all upholstered furniture and furnishings intended for guest use or to  which guests are permitted to have access to comply with the Furniture and  Furnishings (Fire Safety) Regulations 1988? YES / NO  If yes, do you have records to demonstrate compliance with the Furniture  and Furnishings (Fire Safety) Regulations 1988? YES / NO  Have you completed Scottish Fire and Rescue Service’s fire safety checklist? YES / NO  You must send a copy of the completed checklist to Moray Council with your licence application.  **F.2.2 Gas Safety**  Does the premises have a gas supply? YES / NO  If yes, please provide a copy of the most recent Gas Safety Certificate for the premises with this application.  **F.2.3 Electrical Safety**  Do guests have access to electrical fittings within the premises? YES / NO  If yes, please provide a copy of the most recent Electrical Installation Condition Report on fixed installations with this application.  Do guests have access to electrical moveable appliances within the premises? YES / NO  If yes, please provide a copy of the most recent Portable Appliance Testing Report on moveable appliances with this application,  **F.2.4 Water Safety**  Does the premises have a private water supply? YES / NO  If yes, have you complied with the requirements set out in the Water Intended  for Human Consumption (Private Supplies)(Scotland) Regulations 2017? YES / NO    Have you completed a legionella risk assessment for the premises? YES / NO  Please provide a copy of the risk assessment carried out with this application.  **F.2.5 Safety & Repair Standards**  Have you taken all reasonable steps to ensure the premises are safe  for residential use? YES / NO  Are the premises subject to the requirements of Chapter 4 of Part 1 of the  Housing (Scotland) Act 2006? YES / NO  If yes, do the premises meet the repairing standard? YES / NO  **F.2.6 Energy Performance Certificate**  Does the premises have an Energy Performance Certificate issued within  the last 10 years? YES / NO  If yes, please enclose a copy of the Energy Performance Certificate with this application.  If yes, please tick the box which indicated the Energy Performance Certificate Rating for the premises.  A  B  C  D  E  F  G  **F.2.7 Building Warrant**  Are you aware of any building work that has been carried out on the premises  in the last 10 years? YES / NO  If yes, please specify  …………………………………………………………………………………………………………………..  …………………………………………………………………………………………………………………..  …………………………………………………………………………………………………………………..  Have you considered if a building warrant is required? YES / NO  If yes, please give the reference and date granted ……………………………………………………….  If no, please search “Do I need a building warrant?” at [www.moray.gov.uk](http://www.moray.gov.uk)  **F.2.8 Insurance**  Specify the buildings insurance in force, including details of insurance company and amount of cover. **Enclose with the application a valid Insurance Certificate or other proof of insurance cover.**  …………………………………………………………………………………………………………………..    …………………………………………………………………………………………………………………..  Specify the public liability insurance in force, including details of insurance company and amount of cover. Please note valid public liability insurance for not less than £5 million should be in place for the duration of each short-term let. **Enclose with the application a valid Insurance Certificate or other proof of insurance cover.**  …………………………………………………………………………………………………………………..    …………………………………………………………………………………………………………………..  …………………………………………………………………………………………………………………..  **F.3 Planning Permission**  Have you considered if planning permission is required? YES / NO  If yes, please give the reference and date granted ………………………………………………….  If no, please search “Do I need planning permission?” at [www.moray.gov.uk](http://www.moray.gov.uk) |
| 1. **OCCUPANCY AND AVAILABILITY**   Total number of guests you would like to accommodate at any one time in the premises  Total number of adult guests and total number of child (aged under 10) guests  you would like to accommodate at any one time in the premises.  Total number of owner(s) family or family of the person(s) managing the premises and  guests at one time.  Is the accommodation used by the owner(s) family or family of person(s) managing  the premises entirely separate from the other guests accommodation? YES / NO  How often do you intend to make the premises available to guests?  Please tick the box that applies.  Less than 3 months per year  3 to 6 months per year  6 to 9 months per year  All year round  Other please describe ……………………………………………………………………………………….  ………………………………………………………………………………………………………………….  Do you hold a House in Multiple Occupation Licence in respect of the premises? YES / NO |
| 1. **CRIMINAL CONVICTIONS**   Have you, or any other person named in this application, **ever** been convicted  of **any** crime or offence? YES / NO  If yes, please provide details …………....…………………………………..………………………….  …………………………………………………………………………………………………..  …………………………………………………………………………………………………..  You must provide details above of all relevant convictions (including road traffic offences) recorded against you or any other person named in this application. |
| 1. **RESIDENCE OUTSIDE THE UK**   Since being born have you, or anyone named in this application, lived outside the  UK for a continuous period of 12 months or more? YES / NO  If you have answered YES please provide details of all the countries in which you, or anyone named in this application, have lived. Please continue on a separate sheet if required.  Country of Residence………………………………………From ............................To………………….  Country of Residence………………………………………From ............................To………………….  Country of Residence………………………………………From ............................To………………….  Country of Residence………………………………………From ............................To………………….  For each country you, or anyone named in this application, have lived in the last 10 years you are required to provide a Criminal Record Check. Please refer to the Guidance Notes for further details of the documentation you are required to provide. |
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| 1. **DECLARATION**   **I declare that I shall, for a period of 21 days, display at or near the premises mentioned in Section F so that it can be conveniently read by the public, a notice complying with the requirements of Paragraph 2(2) of the Civic Government (Scotland) Act 1982.** *A form which may be used for this purpose is in appendix 1 and you must submit a Certificate of Compliance to the Council.*  Signature of applicant ………………………………………Date …………………………………....  or  Signature of Agent on ………………………………………Date ……………………………………  behalf of applicant  Agents Address …………………………………………………………………………………..  …………………………………………………………………………………..  **I declare that I have met the mandatory licence conditions set out in The Civic Government (Scotland) Act 1982 (Licensing of Short-term Lets) Order 2022**  Signature of applicant ………………………………………Date …………………………………....  or  Signature of Agent on ………………………………………Date ……………………………………  behalf of applicant  Agents Address …………………………………………………………………………………..  …………………………………………………………………………………..  **I declare that the particulars given by me on this form are true and I hereby make application to Moray Council for the grant of the licence applied for.**  Signature of applicant ………………………………………Date …………………………………....  or  Signature of Agent on ………………………………………Date ……………………………………  behalf of applicant  Agents Address …………………………………………………………………………………..  …………………………………………………………………………………..  **NB. It is an offence for any person to make any statement which he knows to be false in this application or in connection with the making of this application**  **Data Protection** - Moray Council is the Data Controller for this process. Please see our [Privacy Notice](http://www.moray.gov.uk/downloads/file144590.pdf) for information about how and why the personal information provided on this form will be used to process an application for a short-term lets licence. |

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## ADDITIONAL INFORMATION SHEET (1/2)

## Section B.1 Individual Details

## Section B.2 Corporate Entity

## Section C. Day to Day Management of the Premises

## Section E. Ownership of the Premises



## ADDITIONAL INFORMATION SHEET (2/2)

Use the space below to provide any other information relevant to your application