

CIVIC GOVERNMENT (SCOTLAND) ACT 1982

# APPLICATION FOR GRANT / RENEWAL OF SHORT-TERM LET LICENCE

## PART 1: ABOUT YOU

Are you applying as an individual or corporate entity?

Individual  Corporate Entity

Fill in if you are applying as an individual:

Title \_\_\_\_\_

Your full name \_\_\_\_\_

Date of birth \_\_\_\_\_

Place of birth \_\_\_\_\_

Home Address \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Tel. No. \_\_\_\_\_ Email address \_\_\_\_\_

Please provide your **home address history for the last 5 years** with no gaps or overlaps, starting with the most recent. Please confirm the dates you resided at these properties (continue on a separate sheet if necessary):

Addresses (last 5 years)	Postcode	Date from (mm/yy)	Date to (mm/yy)

### Agent(s) & Day to Day Manager(s)

Do you have or intend to appoint an agent or day-to day manager?

Yes  No

If you answered yes, please provide details for your agent(s) or day to day manager(s).

Trading Name and Nominated Individual \_\_\_\_\_

\_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Date of birth \_\_\_\_\_

Tel. No. \_\_\_\_\_ Email address \_\_\_\_\_

Addresses (last 5 years)	Postcode	Date from (mm/yy)	Date to (mm/yy)

\_\_\_\_\_

## Joint Ownership

Is your property jointly owned?    Yes             No

If you answered yes, please provide details for all joint owners.

Joint owner(s) (continue on a separate sheet if necessary):

Full name	Date of birth	Addresses (last 5 years)	Email	Tel. No.

**Individuals, please go to Part 2.**

### Corporate entities

Corporate entities, please complete the relevant sections on the following pages.  
Fill in if you are applying as a corporate entity (e.g. company, partnership, trust or charity)

Corporate entity name \_\_\_\_\_

Limited company number (if applicable) \_\_\_\_\_

First name and surname \_\_\_\_\_

Registered or principal office address \_\_\_\_\_

\_\_\_\_\_

Tel. No. \_\_\_\_\_ Email address \_\_\_\_\_

\_\_\_\_\_

Names and private addresses and dates and places of birth of its directors, partners or other persons responsible for its management, including trustees in the case of charities (continue on a separate sheet if necessary).

Full name	Personal address	Place of birth	Date of birth

If you do not own the property which is the subject of this licence application, do you have proof of permission from the owner(s):

Yes  No  N/A

## PART 2: PREMISES DETAILS

*Where you have a single premises with multiple accommodation units, please complete the Premises Details Supplementary form.*

Premises Address \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Unique Property Reference Number (if known) \_\_\_\_\_

EPC Rating\* \_\_\_\_\_

*\* (if applicable – not required for home sharing or unconventional accommodation)*

Please select the type of premises:

Detached House  Semi-detached house

Terraced House  Flat

Unconventional accommodation

From the following options, please select the description that best describes your short-term let:

- |               |                          |                            |                          |
|---------------|--------------------------|----------------------------|--------------------------|
| Self-catering | <input type="checkbox"/> | B&B                        | <input type="checkbox"/> |
| Guest house   | <input type="checkbox"/> | Other form of home sharing | <input type="checkbox"/> |
| Home letting  | <input type="checkbox"/> |                            |                          |

Specify the number of rooms within the premises used as:

Bedrooms \_\_\_\_\_ Bed/Sitting rooms \_\_\_\_\_

Bathrooms \_\_\_\_\_ Kitchens \_\_\_\_\_

Lounges \_\_\_\_\_

Other (please specify) \_\_\_\_\_

Specify the maximum number of guests \_\_\_\_\_  
(excluding children under 2 years of age)

Specify the number of off-street car parking spaces available \_\_\_\_\_

### **PART 3: APPLICATION AND LICENCE TYPE** **(to be completed by all applicants)**

Please select the application type:

- |   |                          |
|---|--------------------------|
| First application (new operator)  | <input type="checkbox"/> |
| New application (where property has been used as licensed STL previously) | <input type="checkbox"/> |
| Provisional application (where the property is under construction)        | <input type="checkbox"/> |
| Renewal   | <input type="checkbox"/> |
| Change to existing licence  | <input type="checkbox"/> |

If you are applying to renew or alter your licence, please complete the following fields. If submitting a new application where the property has never been used as a licensed short-term let before, please proceed to **'The Type of Short Term Licence you require'** (below).

Existing licence number \_\_\_\_\_

Existing licence expiry date \_\_\_\_\_

If you are submitting a new application where the property has been used as a licensed short-term let before, please complete the following fields.

Previous licence number \_\_\_\_\_

Previous licence expiry date \_\_\_\_\_

If you are applying for a change to your existing licence, please indicate the reason for your request (e.g. a change of agent, changes to the property – e.g. an extension to increase occupancy).

---

---

---

Please select the type of short-term let licence you require:

Home sharing

Home letting

Home sharing & home letting

Secondary letting

## **PART 4: CONVICTIONS**

Has anybody named on the application been convicted of any offence? Please include details of any unspent convictions in the table below:

<b>NAME</b>	<b>DATE</b>	<b>COURT</b>	<b>OFFENCE</b>	<b>SENTENCE</b>

## PART 5: APPLICATION CHECKLIST

**Note – this check list must be fully completed in order to submit your application**

<b>I have enclosed the following</b> (please tick to confirm (or enter N/A))	
Correct application fee	See East Lothian Council website – Civic Licence Fees
Annual gas certificate (for premises with a gas supply)	Valid to: ___ / ___ / ___
Electrical Installation Condition Report	Valid to: ___ / ___ / ___
Portable Appliance Testing Report	Valid to: ___ / ___ / ___
Fire Risk Assessment	
Fire Service Safety Checklist	
Legionella Risk Assessment	
Planning permission (for premises within a control area or where requested by the licensing authority)	Planning application reference number:
Floor plan	
EPC Certificate (for premises which are dwellinghouses)	Valid to: ___ / ___ / ___
Public Liability Insurance	Valid to: ___ / ___ / ___
Proof of consent from owner (if applicable)	
Waste Management contract (when registered for Business Rates)	Valid to: ___ / ___ / ___

<b>I have:</b> (please tick to confirm (or enter N/A))	
Identified the owners and those involved in the day-to-day management of my premises	
Ensured that to the best of my knowledge all those named on my application are fit and proper persons	
Prepared information that will be available to guests at the premises including: (a) a certified copy of the licence and the licence conditions, (b) fire, gas and electrical safety information, (c) details of how to summon the assistance of emergency services, (d) a copy of the gas safety report, (e) a copy of the Electrical Installation Condition Report, and (f) a copy of the Portable Appliance Testing Report. (g) instructions on action required in the event that the carbon monoxide alarm(s) sound (h) safety instructions as to the operation and movement of mobile gas cabinet heaters (where relevant)	
Applied for planning permission (if required).	
Noted the requirement to display my licence number and EPC rating on listings for my premises	
Proof that furniture and furnishings/the furniture and furnishings guests have access to, comply with fire safety regulations	
Read and understood the mandatory conditions that will apply to my licence	
Read and understood the additional conditions that will apply to my licence	

<b>My premises</b> (please tick to confirm (or enter N/A))	
Meets current statutory guidance for provision of fire, smoke and heat detection	
Meets statutory guidance for carbon monoxide alarms	
Meets the required regulations for private water supplies (for premises with a private water supply i.e not provided by Scottish Water)	
Meets obligations with regard to the Tolerable and Repairing standard (applicable to dwellinghouses)	

## **PART 6: DECLARATION**

East Lothian Council, as licensing authority, will use information it holds about you to determine whether you are a fit and proper person to operate a short-term let. In addition, licensing authorities to which you apply may share relevant information they hold about you with one another to help those authorities determine whether you are a fit and proper person to act as a landlord, or to act for a landlord. They may also share and seek relevant information with Police Scotland and, if appropriate, other relevant authorities.

Anyone who gives false information on this form, or fails to provide the information required by this form, is committing an offence which could lead to prosecution.

I declare that I have read and understood the mandatory conditions that apply to short-term let licences and East Lothian Council's additional conditions

I will comply with the requirement to display a site notice in accordance with paragraph 2 of Schedule 1 of the Civic Government (Scotland) Act 1982

I declare that the information given in this application is correct to the best of my knowledge

Signed \_\_\_\_\_

Print name \_\_\_\_\_

Date \_\_\_\_\_

## **DATA PROTECTION ACT 2018**

Please note that the information given on this form may be stored electronically by this Authority for the purpose of licensing.

The Identity of the Data Controller under the Data Protection Act 2018 ("the Act").

East Lothian Council, John Muir House, Haddington, East Lothian EH41 3HA ("the Council")

The purpose or purposes for which the data are intended to be processed.

The Data will be processed in order for East Lothian Council to fulfil its statutory duty under the Civic Government (Scotland) Act 1982 in receiving, registering, determining and granting applications for licenses under the said Act. The Data will be shared with public bodies who require to be consulted about the application, such as the Police. It will also be shared with internal East Lothian Council services, particularly within the Environment Department who give advice to the Council as Licensing Authority, in respect of the application.

East Lothian Council is under a duty to protect the public funds it administers, and to this end may use the information you have provided on this form for the prevention and detection of fraud. It may also share this information with other bodies responsible for auditing or administering public funds for these purposes.

### **Further information can be obtained from:**

Data Protection Officer  
Licensing, Administration and Democratic Services  
John Muir House  
Haddington  
dpo@eastlothian.gov.uk