

REPORT TO: Licensing Sub-Committee

MEETING DATE: 12 June 2025

BY: Executive Director for Council Resources

SUBJECT: Housing (Scotland) Act 2006, Part 5

Application for Grant of Licenses to Operate Houses in

Multiple Occupation (HMOs) at

7 Hope Park, Haddington, EH41 3AH 9 Hope Park, Haddington, EH41 3AH

1 PURPOSE

1.1 Licence applications (Appendix 1) for HMOs have been received for the two addresses above.

- 1.2 Historic letters of objection and complaints have been received from neighbouring residents. There are current breaches of both planning and housing legislation related to both addresses. Relevant representations and objections are required to be considered prior to the Council taking a decision on the licence application, and it is therefore a requirement that this application is determined by the Licensing Sub-Committee and not through delegated authority.
- 1.3 The Sub-Committee is required to focus on the suitability of the property as an HMO and to establish that the applicant is a fit and proper person to hold an HMO licence.

2 RECOMMENDATIONS

- 2.1 That the Sub-Committee:
- a) Considers both applications and representations/objections/background information, and determines whether the HMO licence applications are to be granted, granted subject to conditions, or refused.
- b) If the licences are granted, the Sub-Committee is asked to decide the period of the licences. This can range from six months to three years.

3

c) If the licences are granted, the Sub-Committee is asked to agree that they be granted subject to the conditions and standards outlined in Appendix 2.

3 BACKGROUND

- 3.1 The Housing (Scotland) Act 2006, Part 5 requires that where a property is to be occupied by three or more persons from three or more families, who share use of a sanitary convenience, personal washing facilities and/or cooking facilities, the owner must apply to the local authority for a licence to operate an HMO. The property must also be the residents' main or principal residence in the UK.
- 3.2 9 Hope Park, EH41 3AH was previously licensed as an HMO. This licence expired on 18 July 2020.
- 3.3 East Lothian Council (Licensing) actions (from 18 July 2020) are summarised in Appendix 3.
- 3.4 Historic neighbour complaints/objections are compiled in Appendix 4. These complaints/objections have not been received in response to the required display of a site notice for the current application.
- 3.5 Consultation responses to the current applications are found at Appendix 5.

4 POLICY IMPLICATIONS

4.1 None.

5 INTEGRATED IMPACT ASSESSMENT

5.1 The subject of this report does not affect the wellbeing of the community or have a significant impact on equality, the environment or economy.

6 RESOURCE IMPLICATIONS

- 6.1 Financial none.
- 6.2 Personnel none.
- 6.3 Housing potential for multiple homelessness presentations should the licence be refused and current residents are unable to secure alternative accommodation.

7 BACKGROUND PAPERS

7.1 None.

Appendix 1 – Licence application forms for 7 and 9 Hope Park, EH41 3AH

Appendix 2 – Licence conditions

Appendix 3 – Summary of East Lothian Council (Licensing) actions

Appendix 4 – Historic objections/complaints

Appendix 5 – Consultation responses (7 & 9 Hope Park, EH41 3AH)

| AUTHOR'S NAME | Ian Forrest |
|---------------|-------------|
| DESIGNATION | Solicitor |
| CONTACT INFO | Ext 7389 |
| DATE | 22 May 2025 |

Nº7 73802

East Lothian Council Licensing



East Lothian Council

Received

HOUSE OF MULTIPLE OCCUPANCY APPLICATION FORM

- ^a Please note that the applicant(s) must be the owner(s) of the property.
- Please include all joint owners.
- Please read the attached notes at Section 13 and reference is made to the Council's Guidance Notes and Standards for Shared Accommodation, available at: www.eastlothian.gov.uk where the detail of the relevant fees can be obtained.

Section 1 - Application Type

| existing licence or a application you are | Variati | on of an exist | ng licence. I | Please indicate wh | | of |
|---|-----------------|-----------------------------|---------------|----------------------------------|------|----|
| New HMO Licence | | Renewal of Existing Lice | nce | Variation of Ex Pending Licen | | |
| Existing Licence N | umber | | нмо/ | | | |
| (in the case of a Rer | newal or | Variation): | ν | | | |
| | | | | | | |
| If a Variation Applic | cation p | lease check e | ach approp | riate box 📝 | | |
| Change of ownership prior to a Licensing Committee (New and Pending Applications Only) | | | | | | |
| Change of day to day manager | | | | | | |
| Change of occupancy numbers | | | | | | |
| Change of physical I | layout | | | | 15. | |
| If the Variation is for | a chan | ge to the phys | ical layout c | of the property, ple | ease | |
| describe the change | e below | | | | | |
| | | | | | | |

Section 2 - Property Details

This section refers to the property for which the application is being made.

| Name of Premises (if applicable) | | | |
|--|---|--|--|
| Address 7 HOPE PARK | | | |
| HADDINGTON | Postcode EH41 3AH | | |
| Flat No and/or Location | | | |
| No. of storeys (floors) within this dwelling (flat or house) | Occupancy capacity of the property | | |
| Number of bedrooms to be occupied by one person | Number of bedrooms to be occupied by two or more people 2 | | |
| Number of bathrooms3 | Number of separate toilets | | |
| Other rooms (specify below) | Number of kitchens | | |
| | | | |
| Do you intend to provide meals for the r | residents? YES NO | | |
| Will the residents be self catering? | YES NO | | |
| Will there be employees working in the p | premises? YES NO | | |

Section 3 - Previous Licence Applications

| If this property was previously licensed a previous owner, what date did you co | • |
|--|--|
| Please confirm the name of the previo | ous owner |
| Previous HMO licence number HMO/ | |
| Have any of the current owners of this been refused a similar licence in the la | |
| If the answer to the question above is | YES, please give details below: |
| | |
| Section 4 – Applicant Details (| Individual Persons) |
| 4.1 Main Applicant (to be complete | |
| Tham tophodile (20 80 complete) | |
| Title MR Surname FLIEL | First Name |
| Middle Name(s) PATLICK | Maiden Name (if applicable) |
| Date of Birth | Place of Birth |
| Male Female [] | |
| Home Address | |
| | Dogtoodo |
| | Postcode |
| | |
| Home Tel. No. | Mobile Tel. No. |
| Work Tel. No. | Email address |
| Landlord Registration Number (if appl | icable) 38 503 210 21271 |
| Will this applicant be carrying out day management of the HMO? | to day YES NO |
| HI III A MINI TORK A CONTROL OF THE STATE OF | en e |

4.2 Joint Owner(s) (to be completed if an individual person)

Please provide details for all Joint Owners, other than the main applicant above (all those listed on the Title Deeds). The address provided for an individual owner should be their permanent residential address. (If more than 2 joint owners, please use separate sheet.

| Number of Joint Owners (including Main | n Applicant) | |
|---|---------------------------------------|--|
| Title Surname | First Name | |
| Middle Name(s) | Maiden Name (if applicable) | |
| Date of Birth | Place of Birth | |
| Male Female | | |
| Home Address | | |
| | Postcode | |
| Home Tel. No. | Mobile Tel. No. | |
| Work Tel. No. | Email address | |
| | able) | |
| Will this applicant be carrying out day to management of the HMO? | day YES NO | |
| Section 5 – Applicant Details (Company/Charity/Trust/Partnership) | | |
| 5.1 Please indicate whether the appli Partnership | icant is a Company, Charity, Trust or | |
| Company Charity Charity | Trust Partnership | |
| | | |
| | | |

5.2 Please provide the details of the Company, Charity, Trust or Partnership

| Full name of Company, Charity, Trust or Partnership (including postcode) | | |
|--|-------------------------------|--|
| Name of Secretary or responsible personal | on | |
| Address of principal office | | |
| | E-mail address | |
| Landlord Registration Number | | |
| 5.3 Please provide details of all Direc | tor(s), Trustees or Partners. | |
| If more than three, please use separate | e sheet. | |
| Applicant 1 | | |
| Title Surname | First Name | |
| Middle Name(s) | | |
| Date of Birth | Place of Birth | |
| Male Female | | |
| Home Address | | |
| - | Postcode | |
| Home Tel. No. | Mobile Tel. No. | |
| Work Tel. No. | | |
| Landlord Registration Number (if applica | able) | |
| Will this applicant be carrying out day to day management of the HMO? | | |

Applicant 2

| Title Surname | First Name | |
|---|-----------------------------|--|
| Middle Name(s) | Maiden Name (if applicable) | |
| Date of Birth | Place of Birth | |
| Male Female | | |
| Home Address | | |
| | Postcode | |
| Home Tel. No. | Mobile Tel. No. | |
| Work Tel. No. | Email address | |
| Landlord Registration Number (if applica | able) | |
| Will this applicant be carrying out day to management of the HMO? | yes No | |
| Applicant 3 | | |
| Title Surname | First Name | |
| Middle Name(s) | Maiden Name (if applicable) | |
| Date of Birth | Place of Birth | |
| Male Female | | |
| Home Address | | |
| | Postcode | |
| Home Tel. No. | Mobile Tel. No. | |
| Work Tel. No. | Email address | |
| Landlord Registration Number (if applicable) | | |
| Will this applicant be carrying out day to day management of the HMO? | YES NO | |

Section 6 – Day to Day Management

This section identifies who will be responsible for the day to day management of the licensed property. Please ensure questions 6.1 and 6.2 are completed where a company, including a named individual within the company, is carrying out the day to day management. Alternatively, Questions 6.3 or 6.4 should be completed where the day to day manager is an applicant or other individual.

| 6.1 Is the | e day to day Manager an organisation or company? |
|-------------|---|
| YES 🗌 | NO NO |
| company ar | er to the above question is YES, please provide the details of the and the names of ALL the Directors or partners below. If the answer is go to question 6.3. |
| Name of Or | ganisation or Company |
| Address of | Organisation or Company |
| | Postcode |
| Landlord Re | egistration Number of Organisation or Company |
| | |
| | |
| | |

6.2 Please provide the details of all Directors or Partners where an organisation or company is carrying out the day to day management

If more than three, please use separate sheet.

Applicant 1

NOTE: The first named individual below will be considered as the nominated person for the organisation or company. Any change to the nominated person will require a Variation to the Licence and the appropriate fee.

| Title Surname | First Name | |
|---|-----------------------------|--|
| Middle Name(s) | Maiden Name (if applicable) | |
| Date of Birth | Place of Birth | |
| Male Female | | |
| Home Address | | |
| | Postcode | |
| Home Tel. No. | Mobile Tel. No. | |
| Work Tel. No. | Email address | |
| Landlord Registration Number (if applicable) | | |
| Will this applicant be carrying out day to day management of the HMO? YES NO | | |

Applicant 2

| Title Surname | First Name | |
|---|-----------------------------|--|
| Middle Name(s) | Maiden Name (if applicable) | |
| Date of Birth | Place of Birth | |
| Male Female | | |
| Home Address | | |
| | Postcode | |
| Home Tel. No. | Mobile Tel. No. | |
| Work Tel. No. | Email address | |
| Landlord Registration Number (if applica | able) | |
| Will this applicant be carrying out day to management of the HMO? | day YES NO | |
| Applicant 3 | | |
| Title Surname | First Name | |
| Middle Name(s) | Maiden Name (if applicable) | |
| Date of Birth | Place of Birth | |
| Male Female | | |
| Home Address | | |
| | Postcode | |
| Home Tel. No. | Mobile Tel. No. | |
| Work Tel. No. | Email address | |
| Landlord Registration Number (if applicable) | | |
| Will this applicant be carrying out day to management of the HMO? | day YES NO | |

6.3 Will any of the applicants for this licence be carrying out the day to day management?

| YES NO | | | |
|--|-----------------------------|--|--|
| If the answer to the above question is YES, please provide the name of the applicant below. (The named individual below must appear in Section 4 or Section 5). If the answer is NO, please go to 6.4. | | | |
| Title Surname | First Name | | |
| Middle Name(s) | Maiden Name (if applicable) | | |
| Date of Birth | Place of Birth | | |
| Male Female | | | |
| Home Address | | | |
| | Postcode | | |
| Home Tel. No. | Mobile Tel. No. | | |
| Work Tel. No. | Email address | | |
| Landlord Registration Number (if applicable) | | | |
| Will this applicant be carrying out day to day management of the HMO? YES NO | | | |

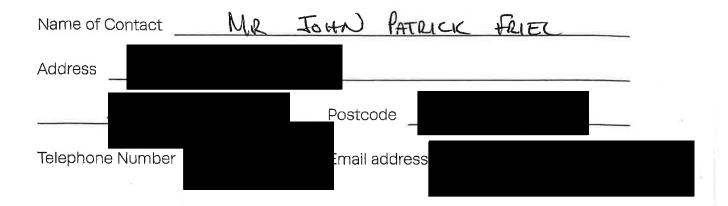
6.4 If the day to day Manager is an individual other than an applicant, named in Section 4 or Section 5, please complete the details below

| Title Surname | First Name | |
|--|-----------------------------|--|
| Middle Name(s) | Maiden Name (if applicable) | |
| Date of Birth | Place of Birth | |
| Male Female | | |
| Home Address | | |
| | Postcode | |
| Home Tel. No. | Mobile Tel. No. | |
| Work Tel. No. | Email address | |
| Landlord Registration Number (if applica | able) | |
| Will this applicant be carrying out day to management of the HMO? | day YES NO | |
| Section 7 – Appointed Agent | | |
| An Agent is an individual, organisation or company appointed to submit and process an application on behalf of the owners of the property but who will not be acting as day to day managers once a licence has been granted. | | |
| This section need not be completed if the applicant(s) or appointed day to day manager are submitting the application. | | |
| Name of Organisation or Company | | |
| Address of Organisation or Company _ | | |
| | Postcode | |
| Landlord Registration Number of Organisation or Company | | |
| | | |
| | | |
| | | |

Section 8 - Contacts

The contact details below can be the applicant, day to day manager or agent as required.

8.1 Contact for access and queries during the application process



8.2 Contact for access and queries during the life of the licence

Applicant or Day to Day Manager's representative

| Name of Contact | JOHN PATILICK FRIEL | |
|------------------|---------------------|--|
| Address | | |
| | Postcode | |
| Telephone Number | Email address | |

Section 9 - Details of Convictions and Fixed Penalty Notices

Has any person listed in Sections 4, 5, 6 or 8 been convicted of any offences or been issued with any fixed penalty notices?

| YES 🗹 | NO . | | | | |
|-----------------|-----------------------|---------------|--------------|-----------------|-------|
| (Read TRAFFIC & | אין the question a | above is YES, | please provi | ide the details | below |

NOTE: Details of ALL convictions and FIXED PENALTIES (CRIMINAL and ROAD TRAFFIC) including spent convictions must be given below, even if they have been previously disclosed on a prior application form.

| NAME | DATE | COURT | CRIME/ OFFENCE | PENALTY |
|--------------------------|---|-------|-------------------|---------|
| JOHN PATRICK FRIER | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | 1 00 00 00 00 00 00 00 00 00 00 00 00 00 | | | |
| | | | | |
| | | | | |
| | | | | |

Section 10 - Checklist of Required Enclosures and Actions

An application will only be deemed competent where all necessary information is submitted together with the relevant fee.

NEW APPLICATION CHECKLIST

| Document | Guidance Note | Comment | Enclosed (please tick) |
|---|--------------------|----------------------|---------------------------|
| Floor plan | 3 (a) (i) and (ii) | To Follow | |
| Style copy of Tenancy Agreement (LODGER) | 3 (b) | YES | ✓ |
| Copy of Property Insurance | 45 | YES | / |
| Copy of Landlords Owners/ Public Liability Insurance | 45 | To Cours | V |
| Current NICEIC or SELECT Electrical Installation Condition Report | 3 (d) and 37 to 40 | YES | ~ |
| Current Portable Appliance Test (PAT) Certificate | 3 (d) and 37 to 40 | to follow | |
| Gas Safety Certificate (if applicable) | 3 (e) and 41 & 42 | TO BE RENEWED YES | By 22 3 25 |
| Building Standards Warrant and Completion Certificate (if applicable) | 10 | NA | |
| Planning Change of Use Consent (if applicable) | 7 and 11 | NIF | |
| Application Fee | 2 | YES | / |
| Public Notice displayed | 4 and 5 | YES | |
| Energy Performance Certificate | 22 | NIA | |
| Legionella Risk Assessment | 23 | YES | / |
| Fire Risk Assessment | 28 | YES | V |

The guidance notes referred to above and below form part of East Lothian Council's "Guidance Notes and Standards for Shared Accommodation" which is available from the Licensing, John Muir House, Haddington, EH41 3HA 3BA or from the Council's website.

RENEWAL APPLICATION CHECKLIST - As above



| Document | Guidance Note | Change of ownership prior to Licensing Committee (New Application only) | Change of day to day manager | Change of Occupancy | Physical change to property | Enclosed (please tick) |
|---|--------------------|---|------------------------------------|------------------------|-----------------------------------|---------------------------|
| Floor plan | 3 (a) (i) and (ii) | | | Required | Required | |
| Style copy of Tenancy Agreement | 3 (b) | Required | Required | | | |
| Copy of Property Insurance | 45 | Required | | | | |
| Copy of Landlords Owners/ Public Liability Insurance | 45 | Required | | | | |
| Planning Change of Use Consent (if applicable) | 7 and 11 | | | Required | Required | |
| Building Standards Warrant and Completion Certificate | 4 and 5 | | | | Required | |
| Energy Performance Certificate | 22 | | | | Required | |
| Legionella Risk Assessment | 23 | | | | Required | |
| Fire Risk Assessment | 28 | | | | Required | |
| Application Fee | 2 | Required | Required | Required | Required | |

Section 11 - Public Notice Declaration

Where declaration (A) is made a Certificate of Compliance with paragraph 2(5) of Schedule 4 to the Housing (Scotland) Act 2006 must be produced in due course (see notes).



I / we declare that I / we shall, for a period of 21 days commencing with the date hereof, display at or near the premises so that it can conveniently be read by the public, a note correquirements of Paragraph 2(1), (2) and (3) of Sch Housing (Scotland) Act 2006 (see note 2).

OR

I / we declare that I am / we are unable to display a notice of this application at or near the premises because I / we have no rights of access or other rights enabling me to do so, but that I / we have taken the following steps to acquire the necessary rights, namely: (specify steps taken here)

В

but have been unable to acquire those rights.

OR

С

I am / we are not required to display a notice as this is likely to jeapordise the safety or welfare of the occupants, or the security of the premises. An application to disapply this requirement has been submitted to the Local Authority.

Section 12 – Application Declaration

| I DECLARE THAT THE PARTICULARS GIVE CORRECT TO THE BEST OF MY KNOWL GUIDANCE NOTES REFERRED TO AND I UNDERSTAND IT IS A CRIMINAL OFFENDE LICENCE BEING GRANTED. | EDGE AND FURTHER | BELIEF, I HAV ACKNOWLED | E READ THE GE THAT I |
|---|---------------------|----------------------------|-------------------------|
| Signature of Applicant or Agent*(*delete as necessary) | | | |
| Date | 2/2025 | i | |
| The individual signing this application sho agent or day to day manager identified in | | , , | ernatively the |
| Name (BLOCK CAPITALS) | OHN 1 | PATRICK | FRIEC |
| Position (if signing on behalf of applicant) |) | _ | |
| Address | | | |
| | Postcode _ | | |

East Lothian Council Licensing



13 FEB 2025

Received

HOUSE OF MULTIPLE OCCUPANCY APPLICATION FORM

- ⁴ Please note that the applicant(s) must be the owner(s) of the property.
- Please include all joint owners.
- Please read the attached notes at Section 13 and reference is made to the Council's Guidance Notes and Standards for Shared Accommodation, available at: www.eastlothian.gov.uk where the detail of the relevant fees can be obtained.

Section 1 - Application Type

| This application form can be existing licence or a Variati application you are making | ion of an existing | g licence. Plea | ase indicate which type | of |
|--|--------------------------------|-----------------|---|----|
| New HMO Licence | Renewal of Existing Licence | e \square | Variation of Existing/ Pending Licence | |
| Existing Licence Number | : HI | мо/ | 5 | |
| (in the case of a Renewal or | r Variation): | | | |
| If a Variation Application p | olease check eac | ch appropriat | e box 🕑 | |
| Change of ownership prior (New and Pending Applicati | | ommittee | | |
| Change of day to day mana | ger | | | |
| Change of occupancy number | bers | | | |
| Change of physical layout | | | | |
| If the Variation is for a chan | ge to the physica | al layout of th | ne property, please | |
| describe the change below | | | | |
| | | | | |

Section 2 – Property Details

This section refers to the property for which the application is being made.

| Name of Premises (if applicable) | | |
|---|---|--|
| Address 9 HOPE PAR | K, HADDINGTON | |
| | Postcode EH41 3AH | |
| Flat No and/or Location | | |
| No. of storeys (floors) within this dwelling (flat or house)3 | Occupancy capacity of the property | |
| Number of bedrooms 4 | Number of living rooms | |
| Number of bedrooms to be occupied by one person/ | Number of bedrooms to be occupied by two or more people | |
| Number of bathrooms3 | Number of separate toilets | |
| Other rooms (specify below) | Number of kitchens/ | |
| | | |
| Do you intend to provide meals for the I | residents? YES NO | |
| Will the residents be self catering? | YES NO | |
| Will there be employees working in the | premises? YES NO NO | |

| Section 3 – Previous Licence Ap | plications |
|--|--------------------------------|
| If this property was previously licensed a previous owner, what date did you con | |
| Please confirm the name of the previou | s owner |
| Previous HMO licence number HMO/ | |
| Have any of the current owners of this place to the last | |
| If the answer to the question above is Y | ES, please give details below: |
| Section 4 – Applicant Details (In 4.1 Main Applicant (to be completed | |
| Title MR Surname FRIEL | First Name JOHN |
| Middle Name(s) PATRICK | Maiden Name (if applicable) |
| Date of Birth | Place of Birth |
| Male Fernare | |
| Home Address _ | |
| | |
| Home Tel. No. M/A | Mobile Tel. No. |
| Work Tel. No. No. | Email address |
| Landlord Registration Number (if applica | able) <u>38/503/2/0/2/27/</u> |

HMO Application Form

YES 🗹 NO 🗌

Will this applicant be carrying out day to day

management of the HMO?

4.2 Joint Owner(s) (to be completed if an individual person)

Please provide details for all Joint Owners, other than the main applicant above (all those listed on the Title Deeds). The address provided for an individual owner should be their permanent residential address. (If more than 2 joint owners, please use separate sheet.

| Number of Joint Owners (including Mair | Applicant) |
|---|---------------------------------------|
| Title Surname | First Name |
| Middle Name(s) | Maiden Name (if applicable) |
| Date of Birth | Place of Birth |
| Male Female | |
| Home Address | |
| <u>, , , , , , , , , , , , , , , , , , , </u> | Postcode |
| Home Tel. No. | Mobile Tel. No. |
| Work Tel. No. | Email address |
| Landlord Registration Number (if applic | able) |
| Will this applicant be carrying out day to management of the HMO? | day YES NO |
| Section 5 – Applicant Details (Company/Charity/Trust/Partne | ership) |
| 5.1 Please indicate whether the appli Partnership | icant is a Company, Charity, Trust or |
| Company Charity Charity | Trust Partnership |
| | |

5.2 Please provide the details of the Company, Charity, Trust or Partnership

| Full name of Company, Charity, Trus | Full name of Company, Charity, Trust or Partnership (including postcode) | | |
|--|--|--|--|
| Name of Secretary or responsible p | person | | |
| Address of principal office | | | |
| | E-mail address | | |
| Landlord Registration Number | | | |
| 5.3 Please provide details of all D | irector(s), Trustees or Partners. | | |
| If more than three, please use sepa | arate sheet. | | |
| Applicant 1 | | | |
| Title Surname | First Name | | |
| Middle Name(s) | Maiden Name (if applicable) | | |
| Date of Birth | Place of Birth | | |
| Male Female | | | |
| Home Address | | | |
| | | | |
| | Mobile Tel. No. | | |
| Work Tel. No. | Email address | | |
| | pplicable) | | |
| Will this applicant be carrying out day to day management of the HM0 | | | |

Applicant 2

| Title Surname | First Name |
|---|-----------------------------|
| Middle Name(s) | Maiden Name (if applicable) |
| Date of Birth | Place of Birth |
| Male Female | |
| Home Address | |
| | Postcode |
| Home Tel. No. | |
| Work Tel. No. | Email address |
| Landlord Registration Number (if applica | able) |
| Will this applicant be carrying out day to management of the HMO? | day YES NO |
| Applicant 3 | ¥ |
| Title Surname | First Name |
| Middle Name(s) | Maiden Name (if applicable) |
| Date of Birth | Place of Birth |
| Male Female | |
| Home Address | 1 |
| · | Postcode |
| Home Tel. No. | Mobile Tel. No. |
| Work Tel. No. | Email address |
| Landlord Registration Number (if applica | able) |
| Will this applicant be carrying out day to day management of the HMO? | YES NO |

Section 6 - Day to Day Management

This section identifies who will be responsible for the day to day management of the licensed property. Please ensure questions 6.1 and 6.2 are completed where a company, including a named individual within the company, is carrying out the day to day management. Alternatively, Questions 6.3 or 6.4 should be completed where the day to day manager is an applicant or other individual.

| 6.1 Is the day to day Manager an organisation or company? |
|---|
| YES NO V |
| If the answer to the above question is YES, please provide the details of the company and the names of ALL the Directors or partners below. If the answer is NO, please go to question 6.3. |
| Name of Organisation or Company |
| Address of Organisation or Company |
| Postcode |
| Landlord Registration Number of Organisation or Company |

6.2 Please provide the details of all Directors or Partners where an organisation or company is carrying out the day to day management

If more than three, please use separate sheet.

Applicant 1

NOTE: The first named individual below will be considered as the nominated person for the organisation or company. Any change to the nominated person will require a Variation to the Licence and the appropriate fee.

| Title Surname | First Name |
|---|-----------------------------|
| Middle Name(s) | Maiden Name (if applicable) |
| Date of Birth | Place of Birth |
| Male Female | |
| Home Address | |
| · | Postcode |
| Home Tel. No. | Mobile Tel. No. |
| Work Tel. No. | Email address |
| Landlord Registration Number (if applica | able) |
| Will this applicant be carrying out day to management of the HMO? | day YES NO |

Applicant 2

| Title Surname | First Name | | |
|---|-----------------------------|--|--|
| Middle Name(s) | Maiden Name (if applicable) | | |
| Date of Birth Place of Birth | | | |
| Male Female | | | |
| Home Address | | | |
| | Postcode | | |
| Home Tel. No. | Mobile Tel. No. | | |
| Work Tel. No. | Email address | | |
| Landlord Registration Number (if application | able) | | |
| Will this applicant be carrying out day to management of the HMO? | | | |
| Applicant 3 | | | |
| Title Surname | First Name | | |
| Middle Name(s) | Maiden Name (if applicable) | | |
| Date of Birth | Place of Birth | | |
| Male Female | | | |
| Home Address | | | |
| | Postcode | | |
| Home Tel. No. | Mobile Tel. No. | | |
| Work Tel. No. | | | |
| Landlord Registration Number (if applic | able) | | |
| Will this applicant be carrying out day to management of the HMO? | day YES NO N | | |

| If the answer to the above question is YES, please provide the name of the applicant below. (The named individual below must appear in Section 4 or Section 5). If the answer is NO, please go to 6.4. Title MR Surname FRIEL First Name JOHN Middle Name(s) PATRICK Maiden Name (if applicable) — Date of Birth Place of Birth Home Address Home Tel. No. M/A Mobile Tel. No. Work Tel. No. M/A Email address Landlord Registration Number (if applicable) 38/53/03/2/10/2/27/ Will this applicant be carrying out day to day management of the HMO? YES NO | day management? |
|---|---|
| applicant below. (The named individual below must appear in Section 4 or Section 5). If the answer is NO, please go to 6.4. Title MR Surname FRIEL First Name JOHN Middle Name(s) PATRICK Maiden Name (if applicable) Date of Birth Place of Birth Male Female Home Address Home Tel. No. M/A Mobile Tel. No. Work Tel. No. M/A Emair address Landlord Registration Number (if applicable) 38/53/03/2/10/2/27/ Will this applicant be carrying out day to day | ES NO |
| Middle Name(s) PATRICK Maiden Name (if applicable) Place of Birth Male Female Home Address Home Tel. No. Work Tel. No. Landlord Registration Number (if applicable) 38/53/03/2/10/2/2/1 Will this applicant be carrying out day to day | pplicant below. (The named individual below must appear in Section 4 or Section |
| Middle Name(s) PATRICK Maiden Name (if applicable) Place of Birth Male Female Home Address Home Tel. No. Work Tel. No. Landlord Registration Number (if applicable) 38/53/03/2/10/2/2/1 Will this applicant be carrying out day to day | Title MR Surname Forer First Name Town |
| Date of Birth Male Female Home Address Home Tel. No. Work Tel. No. Landlord Registration Number (if applicable) Male Female Mobile Tel. No. Email address Landlord Registration Number (if applicable) 38/53/03/2/0/2/27/ Will this applicant be carrying out day to day | |
| Male Female Mobile Tel. No. Home Tel. No. Work Tel. No. Landlord Registration Number (if applicable) 38/53/03/2/0/2/27/ Will this applicant be carrying out day to day | Maiden Name (If applicable) |
| Home Address Home Tel. No. W/A Work Tel. No. Landlord Registration Number (if applicable) 38/58/03/2/0/2/27/ Will this applicant be carrying out day to day | Place of Birth |
| Home Tel. No. N/A Mobile Tel. No. Work Tel. No. N/A Email address Landlord Registration Number (if applicable) $38/5303/2/0/2/27/$ Will this applicant be carrying out day to day | Male Female |
| Work Tel. No. No. No. No. No. No. No. No. No. No | Home Address |
| Landlord Registration Number (if applicable) 38/58/03/210/2127/ Will this applicant be carrying out day to day | Home Tel. No. Mobile Tel. No. |
| Will this applicant be carrying out day to day | Vork Tel. No. //A Email address |
| Manual Manual Administration of the Control of the | andlord Registration Number (if applicable) 38/5803/2/0/2/27/ |
| | Append Append |

6.3 Will any of the applicants for this licence be carrying out the day to

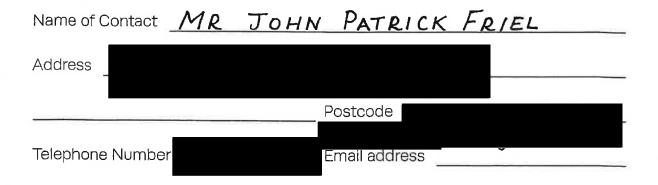
6.4 If the day to day Manager is an individual other than an applicant, named in Section 4 or Section 5, please complete the details below

| First Name | | | | |
|--|--|--|--|--|
| Maiden Name (if applicable) | | | | |
| Place of Birth | | | | |
| | | | | |
| | | | | |
| Postcode | | | | |
| Mobile Tel. No. | | | | |
| Email address | | | | |
| able) | | | | |
| o day YES NO | | | | |
| | | | | |
| or company appointed to submit and owners of the property but who will not be icence has been granted. | | | | |
| if the applicant(s) or appointed day to lication. | | | | |
| | | | | |
| | | | | |
| Postcode | | | | |
| nisation or Company | | | | |
| | | | | |
| | | | | |
| | | | | |

Section 8 - Contacts

The contact details below can be the applicant, day to day manager or agent as required.

8.1 Contact for access and queries during the application process



8.2 Contact for access and queries during the life of the licence

Applicant or Day to Day Manager's representative

| Name of Contact | MR JOHN PATRICK FRIEL | |
|------------------|-----------------------|--|
| Address | | |
| | Postcode | |
| Telephone Number | Email address | |

Section 9 - Details of Convictions and Fixed Penalty Notices

Has any person listed in Sections 4, 5, 6 or 8 been convicted of any offences or been issued with any fixed penalty notices?

| YES NO NO (ROAD TRAFFIC CASEY) | | |
|---|------------|----|
| If the answer to the question above is YES, please provide the de | tails belo | WC |

NOTE: Details of ALL convictions and FIXED PENALTIES (CRIMINAL and ROAD TRAFFIC) including spent convictions must be given below, even if they have been previously disclosed on a prior application form.

| NAME | DATE | COURT | ORIME/ OFFENCE | PENALTY |
|-----------|------|-------|-------------------|---------|
| FOUR PAIR | | | | |
| | | | | |
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Section 10 - Checklist of Required Enclosures and Actions

An application will only be deemed competent where all necessary information is submitted together with the relevant fee.

NEW APPLICATION CHECKLIST

| Document | Guidance Note | Comment | Enclosed (please tick) |
|---|--------------------|----------------------|---------------------------|
| Floor plan | 3 (a) (i) and (ii) | YES | ✓ |
| Style copy of Tenancy Agreement | 3 (b) | To follow | 7 |
| Copy of Property Insurance | 45 | YES | |
| Copy of Landlords Owners/ Public Liability Insurance | 45 | YES | V |
| Current NICEIC or SELECT Electrical Installation Condition Report | 3 (d) and 37 to 40 | To focion | # |
| Current Portable Appliance Test (PAT) Certificate | 3 (d) and 37 to 40 | to fourw | |
| Gas Safety Certificate (if applicable) | 3 (e) and 41 & 42 | to Be revened YES | BY 22/3/25 |
| Building Standards Warrant and Completion Certificate (if applicable) | 10 | 11 4 | |
| Planning Change of Use Consent (if applicable) | 7 and 11 | NA | |
| Application Fee | 2 | YES | RECEIPT ENCY |
| Public Notice displayed | 4 and 5 | YES | / |
| Energy Performance Certificate | 22 | NA | |
| Legionella Risk Assessment | 23 | YES | / |
| Fire Risk Assessment | 28 | TO FOLLOW | Z |

The guidance notes referred to above and below form part of East Lothian Council's "Guidance Notes and Standards for Shared Accommodation" which is available from the Licensing, John Muir House, Haddington, EH41 3HA 3BA or from the Council's website.

RENEWAL APPLICATION CHECKLIST - As above



| Document | Guidance Note | Change of ownership prior to Licensing Committee (New Application only) | Change of day to day manager | Change of Occupancy | Physical change to property | Enclosed (please tick) |
|---|-----------------------|---|------------------------------------|------------------------|-----------------------------------|---------------------------|
| Floor plan | 3 (a) (i) and (ii) | | | Required | Required | |
| Style copy of Tenancy Agreement | 3 (b) | Required | Required | | | |
| Copy of Property Insurance | 45 | Required | | | | |
| Copy of Landlords Owners/ Public Liability Insurance | 45 | Required | | | | |
| Planning Change of Use Consent (if applicable) | 7 and 11 | | | Required | Required | |
| Building Standards Warrant and Completion Certificate | 4 and 5 | | | | Required | |
| Energy Performance Certificate | 22 | 2 | | | Required | |
| Legionella Risk Assessment | 23 | | | | Required | |
| Fire Risk Assessment | 28 | | | ^ | Required | |
| Application Fee | 2 | Required | Required | Required | Required | |

Section 11 - Public Notice Declaration

Where declaration (A) is made a Certificate of Compliance with paragraph 2(5) of Schedule 4 to the Housing (Scotland) Act 2006 must be produced in due course (see notes).



I / we declare that I / we shall, for a period of 21 days commencing with the date hereof, display at or near the premises so that it can conveniently be read by the public, a note complying with the requirements of Paragraph 2(1), (2) and (3) of School 1 of the Housing (Scotland) Act 2006 (see note 2).

OR

I / we declare that I am / we are unable to display a notice of this application at or near the premises because I / we have no rights of access or other rights enabling me to do so, but that I / we have taken the following steps to acquire the necessary rights, namely: (specify steps taken here)

В

but have been unable to acquire those rights.

OR

С

I am / we are not required to display a notice as this is likely to jeapordise the safety or welfare of the occupants, or the security of the premises. An application to disapply this requirement has been submitted to the Local Authority.

Section 12 – Application Declaration

| CORRECT TO THE PARTICULARS GIVEN BY ME ON THIS FORM ARE CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I HAVE READ THE GUIDANCE NOTES REFERRED TO AND I FURTHER ACKNOWLEDGE THAT I UNDERSTAND IT IS A CRIMINAL OFFENCE TO OPERATE AN HMO PRIOR TO A LICENCE BEING GRANTED. | | | |
|---|--|--|--|
| Signature of Applicant or Agent* | | | |
| Date | | | |
| # (| | | |
| The individual signing this application should be an applicant or alternatively the agent or day to day manager identified in this application. | | | |
| Name (BLOCK CAPITALS) TOHN PATRICK FRIEL | | | |
| Position (if signing on behalf of applicant) | | | |
| Address | | | |
| | | | |
| | | | |



HOUSES IN MULTIPLE OCCUPATION LICENSING CONDITIONS

- 1. The Licensee shall make the Licence and these conditions, available to occupiers within the premises where it can be conveniently read by residents.
- 2. If there is a material change of circumstance affecting the Licensee or the operation of the HMO, the Licensee must inform the licensing authority as soon as possible. No alteration must be made to the property without the prior written consent of the authority.
- 3. The granting of a licence requires that notice in writing be given to every occupier of premises in the same building and the occupiers of adjoining premises which share a common boundary with the land upon which the licensed premises are situated, advising them of the name of the Licensee or managing agent, a contact address, daytime telephone number and emergency telephone contact number. For the purposes of this condition, "common boundary" means any land or buildings which share a boundary with the land on which the licensed premises are situated or are on the opposite side from the licensed premises of any road, pathway or common area less than 20 metres in width. Where the licensed premises are in a sub-divided building, notification requires to be made to all other parts of that building, in addition to any land or buildings falling within the terms of the preceding sentence. Where any such adjoining buildings are themselves part of a sub-divided building, all parts of that building require to be notified.
- **4.** The licence holder must take steps to ensure that the property, fittings and furniture, including fire precautions, plumbing, gas and electrical installations, are maintained throughout the period of the licence to the standard required. The HMO owner should hold all necessary certificates.
- 5. Where appropriate, the Licensee shall comply with the Food Safety Act 1990, and any regulations thereunder. The Food Hygiene Regulations, The Health and Safety at Work Act 1974, and any regulations thereunder and The Furniture and Furnishings (Fire) Safety Regulations 1988.



HOUSES IN MULTIPLE OCCUPATION - LICENSING CONDITIONS (continued)

- **6.** All licensed premises shall comply with the requirements of the Fire (Scotland) Act 2005 and the Fire Safety (Scotland) Regulations 2006 and will be provided with:
- Adequate means of escape in case of fire.
- Adequate means of ensuring that the means of escape can be safely and effectively used at all times.
- Adequate and suitable fire-fighting equipment.
- An adequate fire alarm system.
- An adequate number of smoke detectors.
- An adequate number of Notices detailing procedures in the event of fire.
- 7. The equipment required to comply with these conditions shall be adequately maintained at all times, and it shall be the responsibility of the Licensee to ensure sufficient instructions are given to the residents of the licensed premises regarding the procedures to be followed in the event of a fire.
- **8.** To ensure an adequate electricity supply is maintained to the installed Fire Detection system, where credit card meters are in use, the Licensee will be responsible for ensuring that the meters remain in credit when the premises are unoccupied for any period exceeding 48 consecutive hours.
- **9.** The licence holder must ensure that advice to occupiers on action to be taken in the event of an emergency is clearly and prominently displayed within the living accommodation.
- **10.** The licence holder must ensure that the physical standards for HMO living accommodation assessed as suitable by the local authority when approving the licence application are met at all times.
- 11. The number of persons residing in the premises shall not exceed the maximum number stated on the licence. The use and occupancy levels of each room shall not be changed without the approval of East Lothian Council. Any change may be subject to a variation fee.



HOUSES IN MULTIPLE OCCUPATION - LICENSING CONDITIONS (continued)

- **12.** The Licensee shall allow access to the premises at any reasonable time to the following officials for licensing purposes:
- Any officer of East Lothian Council.
- Any officer of the Scottish Fire & Rescue Service
- Any officer of Police Scotland
- **13.** The Licensee shall comply with all relevant legislation affecting private sector residential tenancies.
- **14.** Written occupancy agreements must be provided, and must meet with the approval of East Lothian Council. Once approved, the occupancy agreement must not be altered unless the Licensee obtains further approval from the Council.
- **15.** The Licensee will be responsible for the day to day running of the premises, and for ensuring that residents comply with the terms of their Lease and in particular to deal effectively with any anti–social behaviour by tenants to anyone else in the HMO or in the locality of the HMO.
- **16.** Actions to secure repossession must be only by lawful means.
- 17. The Licensee shall be responsible for ensuring that all electrical installations are in accordance with the current IEE Wiring Regulations, and gas installations comply with the Gas Safety (Installation and Use) Regulations 1998.
- **18.** Gas and electrical appliances provided by the Licensee must be maintained in a safe and satisfactory condition. Continuity of certification must be maintained. Tenants' appliances should be in good repair, used for the intended purpose, and suitable for the intended purpose.
- 19. Liquefied Petroleum Gas (LPG) shall not be used or stored on the premises.
- **20.** The licence holder shall comply with the current regulations regarding maximum re-sale prices of gas and electricity supplied, as appropriate.



HOUSES IN MULTIPLE OCCUPATION - LICENSING CONDITIONS (continued)

- **21.** The licence holder should ensure that let rooms are fitted with a lever latch and secured with a suitable lock and thumb turn mechanism or other appropriate locking mechanism.
- 22. The building should be maintained in a reasonable state of repair, having regard to its age, type and location. Garden and environmental areas should also be adequately maintained. Where an HMO is in a shared building the Landlord must co-operate and participate in the general repair and maintenance of the building and the cleaning of common parts. Where the tenants fail to participate in the cleaning and maintenance of common areas or environmental areas, the landlord will be expected to carry out the work.
- **23.** Adequate and suitable facilities must be provided for the storage and disposal of refuse. Where bins are provided to terraced and tenemental property they must be clearly identified by flat or property address. The landlord must ensure that the tenants utilise the bins provided and ensure that refuse or bins are placed out on collection day and that bins are returned to the bin storage area following collection (where applicable).
- **24.** The Licensee will ensure that residents' mail is made available to residents on a daily basis.
- **25.** The Licensee shall maintain comprehensive Building Insurance and Property Owner/Public Liability Insurance in accordance with the approved Standards.

Unlicensed House in Multiple Occupation (HMO)

Addresses - 7 Hope Park, HADDINGTON, EH41 3AH

9 Hope Park, HADDINGTON, EH41 3AH

Landlord - John Friel



Summary of events

| Date | Action | | |
|-------------|---|--|--|
| 17 Dec 2020 | O20 Advised by Mr Friel that 9 Hope Park not currently being used as an HMO. A | | |
| | that he sometimes lived at no. 9 and sometimes at no. 7 | | |
| 19 Aug 2022 | Email from Police Scotland who advised both 7 and 9 Hope Park identified as | | |
| | HMOs | | |
| 7 Sep 2022 | Landlord Registration officer (LRO) and Environmental Health officer (EHO) visited | | |
| | both addresses where Mr Friel admitted four lodgers lived at each address and he | | |
| | lived at no. 7. | | |
| | HMO application forms and guidance notes left with Mr Friel who advised he | | |
| | would submit the applications the next day. | | |
| 8 Sep 2022 | LRO emailed details of HMO licence application fees to Mr Friel | | |
| 12 Sep 2022 | HMO application fees received for 7 and 9 Hope Park, EH41 3AH (2 x £811 – for | | |
| | occupancy between 6 and 10 persons) | | |
| 4 Jan 2023 | Compliance notices received for both properties stating Site Notices were publicly | | |
| | displayed 2 to 23 December 2022 | | |
| 21 Apr 2023 | LRO phoned Mr Friel re no HMO licence applications received. Mr Friel stated | | |
| | they would be dealt with on the same day. | | |
| 1 May 2023 | Voicemail left for landlord (from LRO) – no HMO licence applications received | | |
| 19 May 23 | Planning Contravention Notices served (Unauthorised change of use to HMO). | | |
| 28 Sep 2023 | Landlord Registration expired | | |
| 20 Oct 2023 | Rent Penalty Notice served to take effect 1 November 2023 | | |
| 31 Oct 2023 | Landlord Registration renewal applied for | | |
| 6 Nov 2023 | Application forms received for 7 and 9 Hope Park, EH41 3AH | | |
| 15 Nov 2023 | Objection to HMO licence received | | |
| 17 Nov 2023 | Email to Mr Friel from Licensing Officer advising a number of discrepancies with | | |
| | application forms and advising that no supporting documentation lodged with | | |
| | either application form | | |
| 21 Nov 2023 | Second objection to HMO licence received | | |
| 23 Nov 2023 | Multi-agency (Environmental Health, Planning, Landlord Registration, Police | | |
| | Scotland and Scottish Fire and Rescue Service) visit to 7 and 9 Hope Park. Mr Friel | | |
| | was not in attendance. It was found to be c. 14 tenants between both properties | | |
| | resident. | | |
| | No. 7 – 1 bedroom on ground floor (occupied by Mr Friel) | | |
| | - 3 bedrooms on first floor | | |
| | - Attic converted to bedroom (with en suite) | | |
| | - Occupant advised that there was 1 couple in 1 first floor bedroom, the | | |
| | other first floor bedrooms were single rooms and the attic bedroom was | | |
| | a twin room | | |

| | T |
|------------|--|
| | No. 9 – 1 bedroom on ground floor |
| | - 3 bedrooms on first floor |
| | - 1 attic bedroom with ensuite |
| | Occupant advised there were two double bedrooms and 3 |
| | single bedrooms in the property. The occupant also advised that rent |
| | was paid in cash and no receipts were received for rent payments. |
| | In addition to the original buildings, it was found that there were two 'garden |
| | sheds' in the structure attached to the rear of the building. Single beds were |
| | observed in both the sheds. |
| 6 Dec 2023 | Meeting with LRO, Planning representative, Homelessness Team representative |
| | and Mr Friel held at John Muir House, HADDINGTON, EH41 3HA. |
| | LRO discussion – Mr Friel advised that objections received to HMO licence |
| | applications and would therefore be determined by Licensing Sub-committee. Mr |
| | Friel also advised that HMO applications were incomplete and therefore not valid, |
| | and in order to submit valid applications all supporting documentation was |
| | required to be lodged (EICR, Gas Safe certificate, LRA, FRA etc) |
| | Mr Friel also admitted that a single person had been sleeping in the understair |
| | cupboard of one of the properties (reported by Police Scotland following their visit |
| | of 19 August 2022). |
| | Planning discussion – report to be provided by Planning regarding a number of |
| | sites in breach of planning permissions |
| | Homelessness discussion – concern that occupants of both properties did not |
| | receive formal tenant / lodger agreements, frequent presentations to the |
| | Homelessness team from former tenants of Mr Friel, potential presentations from |
| | current lodgers due to both properties being in breach of HMO legislation |
| 8 Dec 2023 | Further compliance notices received stating Site Notices displayed between 2 |
| | November 2023 and 7 December 2023 |
| 21 Mar 24 | No supporting documentation to the HMO applications received |
| 10 Jul 24 | Enforcement Notice – Unauthorised change of use to HMO. Takes effect 20/08/24 |
| | (6 month compliance period). |
| 13 Aug 24 | HMO applications considered withdrawn (as not competent) and Mr Friel advised |
| | of same |
| 15 Aug 24 | Rent Suspension Orders served by Sheriff Officer, taking effect 21 Aug 24 |
| 1 Oct 24 | Visit to both addresses with Police Scotland Officers (x 3). Established properties |
| | both still being used as HMO and occupants have been paying rent to Mr Friel |
| | throughout September. |
| 2 Oct 24 | Tel call from Mr Friel querying visit to properties (1 Oct 24). Advised offences |
| | being committed by operating unlicensed HMO and receiving Rent. Mr Friel |
| | advised he would submit new applications, with supporting documentation and |
| | pay licence application fees by end of week. |

Sheila Fitzpatrick – Team Leader, Licensing & Landlord Registration – 3 October 2024

From: Henry, David (Safer Communities Team)

Sent: 22 March 2023 16:37

To: Grant, Shona <sgrant@eastlothian.gov.uk>

Subject: HMO

Hi Shona,

The Safer Communities received this complaint (see below)- please note the HMO 5 bedroom part of the complaint which you might find of interest/investigate. The complainer alleges that he has seen at least 13 people/tenants.

Kind Regards

Dave Henry

David Henry

Working From Home

Safer Communities Team

The George Johnstone Centre

35 Winton Place

TRANENT

EH33 1AE

Telephone Number: 01620 829902

| Service Case Ref | ELGF58664 |
|------------------|---------------------------|
| Date created | Sat, 18 Mar 2023 15:57 pm |
| Your name | |
| Your address | |

Property type private tenant Town Haddington Your email address Email address Your home telephone number Your mobile telephone number 7/9 hope park John Friel is constantly out side day and evening shouting and swearing on his phone he is using his garden as a storage yard so we have workmen arriving 6/7am daily even on Sundays loading vans with tools and materials Give as full a he has ladders stored in open view we have to description of the keep our windows locked as fear of a break in complaint as possible I believe these properties are hmo 5 bedroom houses we have strange people walking around at all hours making noise and sitting watching tv on phone in the garden sitting in cars outside smoking drugs playing loud music Perpetrator's name (if John feel known)

Perpetrator's address (if

known)

7 and 9 hope park Haddington

From: Henry, David (Safer Communities Team)

Sent: 26 April 2023 11:30

Hi Shelia,

I hope you're well.

Update.

On 12/4/23 I visited Hope Park, Haddington and did a bit of door knocking and left calling cards- so far I received very little information to suggest that there is ASB. One neighbour said that they were not aware of any disturbances or noise other than the traffic outside. It doesn't look like there were any reports to the Police either.

I'll be calling the complainer again but just wanted to keep you posted.

Thanks

Dave

From:

Sent: 03 April 2023 17:36

I beleave you may have been contacted already about the ongoing troubles we are having with John Friel We are according to the house deeds it is only allowed to be used as a one family dwelling house not multiple occupancy some of the issues we are having are tenants Smoking drugs in the garden Shouting and swearing on the phone Drinking till late in the garden Tenants sitting in cars with the engine running 4 pm listing to music

Many thanks

Sent from my iPhone

From:

Sent: 12 November 2023 15:08

To whom it my concern

I would like to object to Mr Freil's HMO applications as reasons below; we have had multiple incidents with him and his tenants.

Firstly, we have had to deal with noise at all hours of the day and night, parties, tenant's consuming drugs in the garden/smoking marihuana which caused us having had to close our back door and locking our pets in, having to listen to tenants having sex with the windows wide open, fire alarms going off for hours on end, have an early morning police raid on both

properties and all the tenants removed for questioning. Between the two properties, there are often ten or more cars parked on the street which is not illegal, and I am aware of it, but simply not fair to us residents trying to park outside our own homes.

Secondly, Mr Freil advertises these two properties as a 3-bedroom HMO with outdoor smoking area and parking. These are actually being used as 5-bedroom properties with average 10 people per house. He has also created single storey timber framed and timber lined structure with corrugated polycarbonate roof lining attached to the dwelling without planning permission, so his tenants have a place to eat and drink as well as socialise and smoke. On many occasions we have had to listen unpleasant and unacceptable language coming from the tenants, Mr Freil himself and his employees.

He has blocked communal access to rest of the properties with locked gates and keypads that are meant to have access 24/7. I have listed my concerns about the extension below and I have emailed planning and building control multiple times but unfortunately, had no response to this day (please note, over a year now).

He also conducts his business called CRS construction from 7-9 Hope Park. Heavy construction materials are aften loaded and unloaded, transported though the seating area and stored in the garden, with workers constantly coming and going, sometimes at extremely early hours.

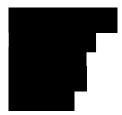
Lastly, the deeds to the property clearly state that these two properties are for family residential use only and not to be used as HMO / CONSTRUCTION business builder's yard. The structure that he has created illegally, is now in a process of being enclosed and forming an extension to the property, is fully attached to the dwelling and projects approximately 4m from the external wall into the garden and extends the length (north to south) of their property including a wraparound at the southern elevation. The structure he has built, is border line (i.e., the distance is 0m). He has also blocked access from both sides with gates\doors with keypad locks as I have stated above. The "extension" has been wired to supply electricity to lights, fridge freezers and televisions.

The concerns in particular I have raise to building \ planning

- The structure is built over a shared access path which forms part of an external escape route for your property and your neighbouring properties to the south as well as the north
- The external walls of the structure are constructed in combustible materials and on this basis do not appear to have met the technical requirements (Technical Standard 2.6.1) for fire resistance of external walls i.e. the external walls sharing the boundary should have a 30 minute fire resistance as a minimum (on the basis they are less than 1m from the boundary)
- Similarly the external wall cladding is timber lined and does not appear to have been treated to provide the required European Classification A1 or A2 (as Technical Standard 2.6.4)
- The roof covering appears to be a corrugated polycarbonate sheet and therefore unlikely to meet the requirements for 'low vulnerability' as required under Technical Standard 2.8.1 for roof coverings not more than 6m from a boundary

I am similarly concerned for the wellbeing and safety of the property occupants. For example, is there adequate installations for the early warning of fire and subsequent escape.

As part of my fire escape has been blocked, to date I have had no updates or any correspondence on any off my concerns, the properties are a death trap waiting to happen and I have raised these concerns directly with Mr Freil also to no avail.



From:

Sent: 14 November 2023 16:36

To: HMO Licensing hmo@eastlothian.gov.uk

Subject: Re: Objection John Patrick Freil HMO 7 & 9 Hope Park Haddington EH41 3AH

You don't often get email from Learn why this is important

CAUTION: This email originated from outside of the organisation. Do not click links or open attachments unless you recognise the sender and know the content is safe.

Good afternoon thank you for receipt of my email

further to my original objections about mr frail and his application

I have found out today that he has people sleeping in two plastic ikea garden sheds in the back garden calling them pods.

(I have witnessed this myself)

Should I be calling the police about this kind of letting out rooms it seams he just does what he wants to make money with no regard to the safety and welfare off his tenants or neighbours I cannot see how this is legal in any way and at the moment I presume he does not have an hmo license at the moment

it greatly concerns me that somebody can operate in such a way



From: Sent: 20 November 20

As the owner of the property we have several objections to granting an HMO licence to the above properties. We have been complaining for almost two years to the council on how the two properties are occupied first complaint 14 December 2021, yet Mr Friel's been allowed to

continue behaving in an inappropriate manner, and in fact since then has extended the properties. See bullet points.

Below are copies of emails from my partner to the council, joint owner of

Points

- He has been operating illegally with numerous families / random people in both properties for a number of years, and in some cases over 20 people across both properties.
- I have personally witnessed disgusting behaviours including drug taking, fighting, loud obnoxious behaviour. Mr Freil sits out in the front street partially dressed on a very regular basis, there is even a suite in the garden, this is unacceptable a demonstration of what is anti-social behaviours/
- Mr Friel has blocked the communal access to the properties this has been discussed with police, due to an altercation when we tried to get access.
- He has built extension to the properties without planning permission, this runs across both properties (which now links the two properties) He has people sleeping in sheds out in the garden. Photographic evidence is available. Hope Park is a conservation area.
- The deeds of all properties at Hope Park are clear that the properties should only be used as family dwellings.
- My tenants complain to me on a daily basis about the behaviours of the neighbours at 7 & 9
 Hope Park.
- I believe that our property is devalued due to unsociable behaviours and obscene building structures.
- Mr Friel for years has been operating a building business from number 7 Hope Park for at least 15 years. People arrive at various hours day and night with deliveries, unloading vans.
 Staff shouting and swearing if there are wage / payment issues.
- There have been a number of police raids reported to us by our tenants, this is upsetting and disturbing.
- Parking in the street is taken over by John Friels work vehicles and tenants vehicles.
- There is a risk to life in these properties.
- I believe there is a GLAA issue that should be reviewed and looked into.

| From: | |
|------------------------------|--|
| From: | |
| Sent: 23 November 2023 14:46 | |

23rd November 2023

Dear Sirs,

I have recently bought and feel that I must add my voice to the objections to the proposed HMO at 7 and 9 Hope Park.

While preparing a submission to the Planning Department for proposed upgrades to my property (still at draft stage), the architect I had instructed informed me that the large extension to the rear of 7 and 9 Hope Park, together with the large garden shed, have neither planning permission nor building warrant.

Also, my neighbour has shown me recent photographic evidence suggesting that said large extension appears to be sleeping pods and may have been evolving over the past 2 years. I have no objection to HMOs in principle, but when it appears that neither building control nor planning have been consulted, it does raise alarm bells over issues of fire hazard and access. My wife and I are elderly and this matter is causing us quite some alarm.

Finally, given that there are many design constraints in this Conservation Area, it seems contradictory that the above should be happening.

I look forward to hearing from you in due course.

Yours faithfully,

Consultee Reports

7 Hope Park, Haddington EH41 3AH

Planning- Objection – see report

Landlord Registration - Objection - see report

Community Protection Team – 4 registered complaints

Environmental Health / Protection Team - Objection - see report

Parking – No Objection

Police - No Objection

9 Hope Park, Haddington EH41 3AH

Planning- Objection – see report

Landlord Registration - Objection - see report

Community Protection Team – 2 registered complaints

Environmental Health / Protection Team - Objection - see report

Parking – No Objection

Police – No Objection

Rafferty, Alison (Licensing)

From:

Robertson, Scott

Sent:

03 April 2025 11:12

To:

HMO Licensing

Subject:

RE: HMO076/2025 9 Hope Park, Haddington EH41 3AH

Hello,

Please be advised that there is an ongoing enforcement investigation in relation to both 7 and 9 Hope Park of the property as a HMO as planning permission is required for the operation of the properties as HMO's. I would therefore object to a HMO licence being granted until the correct planning permissions has been obtained.

Regards

Scott

Scott Robertson | Assistant Planner – Planning Delivery | East Lothian Council | John Muir House | Haddington EH41 3HA

T. 01620 827585 E.srobertson2@eastlothian.gov.uk Visit our website at www.eastlothian.gov.uk

From: HMO Licensing hmo@eastlothian.gov.uk

Sent: 01 April 2025 16:02

To: Environment Reception <environment@eastlothian.gov.uk> **Subject:** FW: HMO076/2025 9 Hope Park, Haddington EH41 3AH

Good Afternoon,

Please provide observations/comments regarding the application for a House of multiple occupancy Licence for the above address. All responses should be returned within the 21 day consultation period.

Kind Regards

Arlene

| Licensing Officer | East Lothian Council | John Muir House | Haddington EH41 3HA | T. 01620 827664 | E. licensing@eastlothian.gov.uk

Licensing

From:

Landlord Registration

Sent:

16 April 2025 10:39

To:

HMO Licensing

Subject:

RE: HMO075/2025 7 Hope Park Haddington EH41 3AH

Good morning,

- There have been multiple neighbour complaints (November 2023) with regard to tenant and landlord behaviour at the addresses 7 and 9 Hope Park, EH41 3AH.
- 7 Hope Park is currently subject to a Rent Suspension Order. This was served August 2024 as a result of the address being operated as an unlicensed HMO.
- A statement was provided to Police Scotland (January 2025) in relation to this property being operated as an unlicensed HMO.
- Failure to maintain the requirement to be registered as a landlord, resulted in a Rent Penalty Notice being served October 2023.

Regards,

Sheila Fitzpatrick Team Leader - Licensing and Landlord Registration East Lothian Council **Democratic & Licensing Services** John Muir House HADDINGTON, EH41 3HA

01620 820623

landlordregistration@eastlothian.gov.uk

Protect Our Privacy: use a password manager to store your passwords. Never leave passwords near your computer or use the same password for multiple applications.

From: Licensing

Sent: 01 April 2025 15:36

To: Business Support CPT; Building Standards; Environment Reception; Landlord Registration; Lothian

and Borders Police (lothianscotborderslicensingeastmid@scotland.pnn.police.uk)

Subject: FW: HMO075/2025 7 Hope Park Haddington EH41 3AH

Good Afternoon,

Please provide observations/comments regarding the application for a House of Multiple Occupancy Licence for the above address. All responses should be returned within the 21 day consultation period.

Aitken, Christine (Licensing)

From:

Stephen Gibson <Stephen.Gibson@scotland.police.uk>

Sent:

04 April 2025 11:21

To:

Licensing

Subject:

MHO075/2025 - HMO GRANT - 7 HOPE PARK HADDINGTON EH41 3AH

Attachments:

APPLICATION.PDF

CAUTION: This email originated from outside of the organisation. Do not click links or open attachments unless you recognise the sender and know the content is safe.

Morning,

No police objections

PSOS ref 911475

Regards

Stephen

Licensing

From:

Business Support CPT

Sent:

02 April 2025 15:40

To:

Licensing

Subject:

RE: HMO075/2025 7 Hope Park Haddington EH41 3AH

Follow Up Flag:

Follow up

Flag Status:

Completed

Hi Arlene

I have checked the ASB register. We have a record of 4 x ASB complaints regarding the address listed. Two of the complaints list only 9 Hope Park. The other cite both 7 and 9 Hope Park. 3 out of the four complaints name the applicant John Friel.

18/03/2023 - Shouting/voices complaint - re 7/9 Hope Park

21/11/2023 - Littering complaint - 7 Hope Park

23/04/2024 - Flytipping - 7 Hope Park

20/11/2024 - Flytipping - 7/9 Hope Park

If you need any further information please feel free to get back to me Arlene.

Best Wishes,

Claire

From: Licensing < licensing@eastlothian.gov.uk>

Sent: 01 April 2025 15:36

To: Business Support CPT <businesssupportcpt@eastlothian.gov.uk>; Building Standards <buildingstandards@eastlothian.gov.uk>; Environment Reception <environment@eastlothian.gov.uk>; Landlord Registration <landlordregistration@eastlothian.gov.uk>; Lothian and Borders Police (lothianscotborderslicensingeastmid@scotland.pnn.police.uk)

<lothianscotborderslicensingeastmid@scotland.pnn.police.uk>
Subject: FW: HMO075/2025 7 Hope Park Haddington EH41 3AH

Good Afternoon,

Please provide observations/comments regarding the application for a House of Multiple Occupancy Licence for the above address. All responses should be returned within the 21 day consultation period.

Kind Regards

Rafferty, Alison (Licensing)

From:

Slight, Lynn

Sent:

21 May 2025 19:56

To:

HMO Licensing Grant, Shona

Cc: Subject:

No. 7 and No. 9 Hope Park, Haddington EH41 3AH - Applications for HMO

Licences.

Dear Licensing,

I refer to the applications above and comment as follows -

Environmental Protection inspected No. 7 Hope Park, Haddington on 16th April 2025 and met with the applicant, Mr Friel. No.9 Hope Park, Haddington was inspected on the 20th May 2025, again in the presence of Mr Friel. The properties were inspected in accordance with the Civic Government (Scotland) Act 1982 (Licensing of Houses in Multiple Occupation) Order 2000 and Scottish Government guidance. These two properties are part of a terraced row and span across three floors. Number 7 is end terrace and some room dimensions are slightly wider. The properties share a similar layout with the exception of a first floor shower and WC room which is communal in property 9 and ensuite in property 7.

Both application forms request an occupancy capacity of 7 persons over 4 bedrooms, 1 living room and 1 kitchen as per the submitted floorplan. At the time of inspection it was noted that both kitchens have 1 sink and 1 cooker and therefore can only support a maximum of 6 persons.

At the time of inspection the ground floor living room in both properties was being used as a bedroom. This arrangement reduces the additional activity space for occupants and without the facility of a living room, the minimum bedroom space standard is increased to 10 square metres for single occupancy and 15 square meters for a double room (refer to table B). The smallest bedroom on each 1st floor does not meet this space standard according to the submitted plans (number 7 is 6.75m2 and number 9 is 7.25m2) and therefore these rooms cannot be used as bedrooms whilst there is no living room. The 2nd floor attic bedroom in property 9 is less than 15 square metres and can support a capacity of 1 person.

Table A - Bedrooms where a common living-room is available:

| Single Room (1 adult) | 6.5 sq. metres |
|--|---------------------------------|
| Double Room (2 adults) | 10.5 sq. metres |
| riple Room (3 adults) 16.5 sq. metres + 4.5 sq.m | |
| | per person over 3 |
| Family Room (2 adults + children under 10) | 10.5 sq. metres + 4.5 sq metres |
| | per child |

Table B - Bedrooms where no common living room is available:

| 1 adult | 10 sq. metres | |
|--|----------------------------------|--|
| 2 adults | 15 sq. metres | |
| 3 adults | 19.5 sq. metres + 6 sq.metres pe | |
| | person over 3 | |
| Family Room (2 adults + children under 10) | 15 sq. metres + 7 sq. metres per | |
| • | child | |

The maximum capacity of each property is given below in Table C. This is given both with and without the use of the living room and takes into account the limiting factor of the kitchen which caps occupancy at 6 regardless of bedroom sizes.

Table C - Maximum capacity of 7 & 9 Hope Park

| No 9 | Occupancy with living room | Occupancy without |
|------------------------------------|----------------------------|-------------------|
| living room | | |
| Living Room | 0 | 2 |
| Bedroom 1 (first at top of stairs) | 1 | 0 |
| Bedroom 2 | 2 | 1 |
| Bedroom 3 | 1 | 1 |
| Bedroom 4 (second floor) | 2 | 1 |
| Total | 6 | 5 |
| | | |
| <u>No 7</u> | | |
| Living Room | 0 | 2 |
| Bedroom 1 (first at top of stairs) | 1 | 0 |
| Bedroom 2 | 2 | 1 |
| Bedroom 3 | 2 | 1 |
| Bedroom 4 (second floor) | 2 | 2 |
| Total | 6 | 6 |

Therefore the maximum capacity determined by the inspection with no living room provided for number 7 is 6 persons and number 9 is 5 persons.

If the ground floor living room was to be reinstated and operated as an additional activity space, the maximum capacity for number 7 would be <u>6 persons</u> and number 9 would be <u>6 persons</u>.

There is an additional built on ground floor covered "porch" area to the rear of both properties which is awaiting retrospective planning permission. This area cannot be considered as activity space under the licensing scheme as it does not meet the Tolerable Standard of a dwelling house.

General maintenance and repair

It was noted at the time of inspection that both properties require general redecoration and repair, including replacement of a missing stair balustrade in number 9, both properties requiring replacement of bath and shower seals and tiling, in number 9 (second floor shower room) replacement of a defective shower rail holder and investigation into the reason for excessive condensation.

Environmental Protection can only support this application based on the above revised occupancy.

Kind regards

Environmental Protection

LS Slight Senior Environmental Health Officer Protective Services East Lothian Council John Muir House

Haddington





From: HMO Licensing < hmo@eastlothian.gov.uk >

Sent: 01 April 2025 15:49

To: Environmental Protection < <u>envprot@eastlothian.gov.uk</u>> **Subject:** HMO075/2025 7 Hope Park, Haddington EH41 3AH

Good Afternoon,

Please provide observations/comments regarding the application for a House of multiple occupancy Licence for the above address. All responses should be returned within the 21 day consultation period.

Kind Regards

Arlene

| Licensing Officer | East Lothian Council | John Muir House | Haddington EH41 3HA | T. 01620 827664 | E. licensing@eastlothian.gov.uk



Licensing

From:

Parking

Sent:

02 April 2025 09:26

To:

Licensing

Subject:

RE: HMO075/2025 7 Hope Park Haddington EH41 3AH

Hi,

I have no objection to this application.

Kind Regards

Grant Talac The Parking Team East Lothian Council



From: Licensing < licensing@eastlothian.gov.uk>

Sent: 01 April 2025 15:34

To: Parking <parking@eastlothian.gov.uk>

Subject: HMO075/2025 7 Hope Park Haddington EH41 3AH

Good Afternoon,

Please provide observations/comments regarding the application for a House of Multiple Occupancy Licence for the above address. All responses should be returned within the 21 day consultation period.

Kind Regards

Arlene

| Licensing Officer | East Lothian Council | John Muir House | Haddington EH41 3HA | T. 01620 827664 E. licensing@eastlothian.gov.uk

Aitken, Christine (Licensing)

From:

Stephen Gibson <Stephen.Gibson@scotland.police.uk>

Sent:

04 April 2025 11:27

To:

Licensing

Subject:

HMO076/2025 - HMO GRANT - 9 HOPE PARK, HADDINGTON EH41 3AH

Attachments:

APPLICATION.PDF

CAUTION: This email originated from outside of the organisation. Do not click links or open attachments unless you recognise the sender and know the content is safe.

Morning,

No police objections

PSOS ref 911500

Regards

Stephen

Rafferty, Alison (Licensing)

From:

Robertson, Scott

Sent:

03 April 2025 11:06

To:

HMO Licensing

Subject:

RE: HMO076/2025 9 Hope Park, Haddington EH41 3AH

Hello,

Please be advised that there is an ongoing enforcement investigation in relation to the use of the property as a HMO as planning permission is required for the operation of the property as a HMO. I would therefore object to a HMO licence being granted until the correct planning permission has been obtained.

Regards

Scott

Scott Robertson | Assistant Planner – Planning Delivery | East Lothian Council | John Muir House | Haddington EH41 3HA

T. 01620 827585 E.srobertson2@eastlothian.gov.uk Visit our website at www.eastlothian.gov.uk

From: HMO Licensing hmo@eastlothian.gov.uk

Sent: 01 April 2025 15:53

To: Parking <parking@eastlothian.gov.uk>; Building Standards <buildingstandards@eastlothian.gov.uk>; Business Support CPT <businesssupportcpt@eastlothian.gov.uk>; Environment Reception <environment@eastlothian.gov.uk>; Landlord Registration <landlordregistration@eastlothian.gov.uk>; Lothian and Borders Police (lothianscotborderslicensingeastmid@scotland.pnn.police.uk) <lothianscotborderslicensingeastmid@scotland.pnn.police.uk> Subject: HMO076/2025 9 Hope Park, Haddington EH41 3AH

Good Afternoon.

Please provide observations/comments regarding the application for a House of multiple occupancy Licence for the above address. All responses should be returned within the 21 day consultation period.

Kind Regards

Arlene

| Licensing Officer | East Lothian Council | John Muir House | Haddington EH41 3HA | T. 01620 827664 | E. licensing@eastlothian.gov.uk

Licensing

From: Sent: Landlord Registration 16 April 2025 10:39

To:

HMO Licensing

Subject:

RE: HMO076/2025 9 Hope Park, Haddington EH41 3AH

Good morning,

- There have been multiple neighbour complaints (November 2023) with regard to tenant and landlord behaviour at the addresses 7 and 9 Hope Park, EH41 3AH.
- 9 Hope Park is currently subject to a Rent Suspension Order. This was served August 2024 as a result
 of the address being operated as an unlicensed HMO.
- A statement was provided to Police Scotland (January 2025) in relation to this property being operated as an unlicensed HMO.
- Failure to maintain the requirement to be registered as a landlord, resulted in a Rent Penalty Notice being served October 2023.

Regards,

Sheila Fitzpatrick
Team Leader – Licensing and Landlord Registration
East Lothian Council
Democratic & Licensing Services
John Muir House
HADDINGTON, EH41 3HA

01620 820623

landlordregistration@eastlothian.gov.uk

Protect Our Privacy: use a password manager to store your passwords. Never leave passwords near your computer or use the same password for multiple applications.

From: HMO Licensing Sent: 01 April 2025 15:53

To: Parking; Building Standards; Business Support CPT; Environment Reception; Landlord Registration;

Lothian and Borders Police (lothianscotborderslicensingeastmid@scotland.pnn.police.uk)

Subject: HMO076/2025 9 Hope Park, Haddington EH41 3AH

Good Afternoon,

Please provide observations/comments regarding the application for a House of multiple occupancy Licence for the above address. All responses should be returned within the 21 day consultation period.

Kind Regards

Rafferty, Alison (Licensing)

From:

Business Support CPT

Sent:

02 April 2025 15:36

To:

HMO Licensing

Subject:

RE: HMO076/2025 9 Hope Park, Haddington EH41 3AH

Follow Up Flag:

Follow up

Flag Status:

Completed

Hi Arlene

I have checked the ASB register. We have a record of 4 x ASB complaints regarding the address listed. Two of the complaints list only 9 Hope Park. The other cite both 7 and 9 Hope Park. 3 out of the four complaints name the applicant John Friel.

18/03/2023 - Shouting/voices complaint - re 7/9 Hope Park

21/11/2023 - Littering complaint - 7 Hope Park

23/04/2024 - Flytipping - 7 Hope Park

20/11/2024 - Flytipping - 7/9 Hope Park

If you need any further information please feel free to get back to me Arlene.

Best Wishes,

Claire

From: HMO Licensing hmo@eastlothian.gov.uk

Sent: 01 April 2025 15:53

To: Parking <parking@eastlothian.gov.uk>; Building Standards <buildingstandards@eastlothian.gov.uk>; Business Support CPT <businesssupportcpt@eastlothian.gov.uk>; Environment Reception <environment@eastlothian.gov.uk>; Landlord Registration <landlordregistration@eastlothian.gov.uk>; Lothian and Borders Police (lothianscotborderslicensingeastmid@scotland.pnn.police.uk)

<lothianscotborderslicensingeastmid@scotland.pnn.police.uk>
Subject: HMO076/2025 9 Hope Park, Haddington EH41 3AH

Good Afternoon,

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Kind Regards

Arlene

O'Reilly, Arlene

From:

Parking

Sent:

02 April 2025 09:25

To:

HMO Licensing

Subject:

RE: HMO076/2025 9 Hope Park, Haddington EH41 3AH

Hi,

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Kind Regards

Grant Talac The Parking Team East Lothian Council



From: HMO Licensing hmo@eastlothian.gov.uk

Sent: 01 April 2025 15:53

To: Parking <parking@eastlothian.gov.uk>; Building Standards <buildingstandards@eastlothian.gov.uk>; Business Support CPT <businesssupportcpt@eastlothian.gov.uk>; Environment Reception <environment@eastlothian.gov.uk>; Landlord Registration <landlordregistration@eastlothian.gov.uk>; Lothian and Borders Police (lothianscotborderslicensingeastmid@scotland.pnn.police.uk) <lothianscotborderslicensingeastmid@scotland.pnn.police.uk>

Subject: HMO076/2025 9 Hope Park, Haddington EH41 3AH

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Kind Regards

Arlene

| Licensing Officer | East Lothian Council | John Muir House | Haddington EH41 3HA | T. 01620 827664 | E. <u>licensing@eastlothian.gov.uk</u>