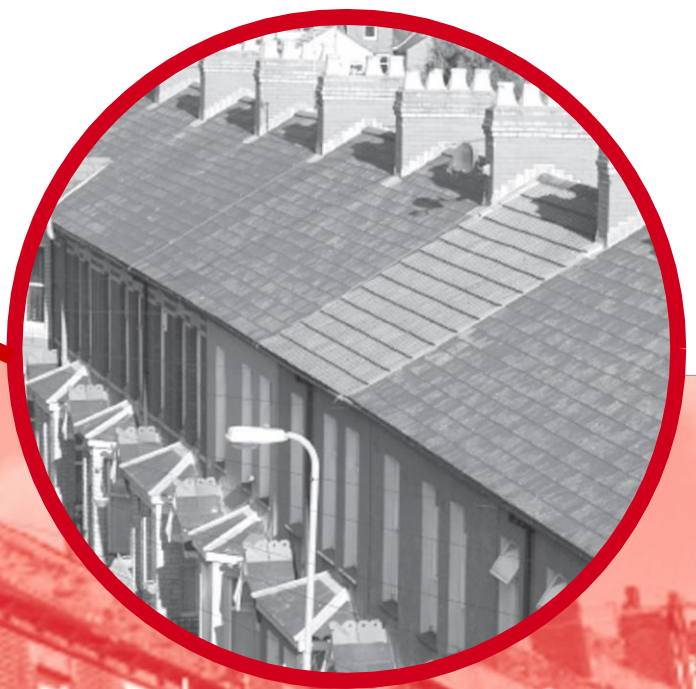




# Application Form





Office Ref:

## Landlord Accreditation Scheme: North Staffordshire

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### APPLICATION FORM FOR MEMBERSHIP/RENEWAL

PLEASE COMPLETE ALL RELEVANT SECTIONS IN CAPITAL LETTERS AND USING BLACK OR BLUE INK. PLEASE TICK THE RELEVANT BOX WHEN NECESSARY.

The Landlord Accreditation scheme accredits the landlord; therefore any application **MUST** be submitted by the owner/s of the property/ies.

This form can be completed for a joint or single membership:

Single Membership: A single named landlord on the membership. To be applied for when only a single person owns the property/ies listed.

Joint Membership – More than one name on the membership. To be applied for when more than one person owns the property/ies listed.

Type of Membership being applied for: Single / Joint

#### LANDLORD DETAILS (Primary Member)

Title: ..... Surname: ..... First Names: .....  
Address (inc postcode): .....  
.....  
Telephone No. .... Mobile No. ....  
Email: .....

If you are applying for a joint membership, please list the names of all the other persons to be included on the membership, who jointly own the properties listed on the property portfolio. Where a Joint Membership is applied for all future information and contact will be made using the Landlord Details given above unless otherwise stated on page 2.

#### JOINT OWNER DETAILS (1)

Title: ..... Surname: ..... First Names: .....  
Address (inc postcode): .....  
.....

#### JOINT OWNER DETAILS (2)

Title: ..... Surname: ..... First Names: .....  
Address (inc postcode): .....  
.....

#### JOINT OWNER DETAILS (3)

Title: ..... Surname: ..... First Names: .....  
Address (inc postcode): .....  
.....

### DETAILS OF ANY MANAGING AGENT

Company Name: .....  
Specified Contact Name: .....  
Address (inc postcode): .....  
.....  
Telephone No. .... Mobile No. ....  
Email: .....

### Are you a member of any other Landlord Association? Yes/No

If yes, which one:

### WHO SHALL WE CONTACT?

If we receive a complaint about one of your properties or if we need to gain access to inspect a property, who is the most suitable person to contact?

Landlord (Primary)  Joint Owner 1 / 2 or 3  Managing Agent

The Scheme Operators will from time to time send updates to its members. These may include information on changes to legislation, any training events that are being provided, details of new services and initiatives e.g. grant availability. Who would you like this information to be sent to?

Landlord (Primary)  Joint Owner 1 / 2 or 3  Managing Agent

How would you like this information to be provided?

By Email  By Post

## PROPERTY REGISTER - Important information

Please complete the following details about all of the property(ies) you let that are located in any of the participating local authority areas: Stoke-on-Trent and Newcastle-under-Lyme. If necessary, photocopy page 3 and attach the additional list to this form.

**Please remember to update the Scheme Operators with changes to your property portfolio.**

**Gas Safety Certificates** – copies of all current certificates must be included with the application form or we cannot process your application. (Unless you have a valid reason for not being able to).

### Guidance Notes:

#### What is a HMO?

HMO stands for House in Multiple Occupation.

A property is a HMO if it is let to three or more tenants, who form more than one household and who share a kitchen or bathroom regardless of the type of tenancy they have.

If you are not sure if your property is a HMO, please contact the Landlord Accreditation team

#### What is a bed space?

A space in which an individual bed is or is intended to be placed.

<b>PROPERTY DETAILS: LA area – Stoke On Trent</b> <input type="checkbox"/>		<b>Newcastle Under Lyme</b> <input type="checkbox"/>	
Address (inc postcode): .....			
Type of accommodation (tick all that apply)			
Single Household <input type="checkbox"/> Family Household <input type="checkbox"/> Student HMO <input type="checkbox"/> HMO <input type="checkbox"/>			
*Gas Installation - Yes <input type="checkbox"/> No <input type="checkbox"/> (if gas certificate not provided please provide details why )		No. of floors	No. of letting rooms:

<b>PROPERTY DETAILS: LA area – Stoke On Trent</b> <input type="checkbox"/>		<b>Newcastle Under Lyme</b> <input type="checkbox"/>	
Address (inc postcode): .....			
Type of accommodation (tick all that apply)			
Single Household <input type="checkbox"/> Family Household <input type="checkbox"/> Student HMO <input type="checkbox"/> HMO <input type="checkbox"/>			
*Gas Installation - Yes <input type="checkbox"/> No <input type="checkbox"/> (if gas certificate not provided please provide details why )		No. of floors	No. of letting rooms:

<b>PROPERTY DETAILS: LA area – Stoke On Trent</b> <input type="checkbox"/>		<b>Newcastle Under Lyme</b> <input type="checkbox"/>	
Address (inc postcode): .....			
Type of accommodation (tick all that apply)			
Single Household <input type="checkbox"/> Family Household <input type="checkbox"/> Student HMO <input type="checkbox"/> HMO <input type="checkbox"/>			
*Gas Installation - Yes <input type="checkbox"/> No <input type="checkbox"/> (if gas certificate not provided please provide details why )		No. of floors	No. of letting rooms:

<b>PROPERTY DETAILS: LA area – Stoke On Trent</b> <input type="checkbox"/>		<b>Newcastle Under Lyme</b> <input type="checkbox"/>	
Address (inc postcode): .....			
Type of accommodation (tick all that apply)			
Single Household <input type="checkbox"/> Family Household <input type="checkbox"/> Student HMO <input type="checkbox"/> HMO <input type="checkbox"/>			
*Gas Installation - Yes <input type="checkbox"/> No <input type="checkbox"/> (if gas certificate not provided please provide details why )		No. of floors	No. of letting rooms:

<b>PROPERTY DETAILS: LA area – Stoke On Trent</b> <input type="checkbox"/>		<b>Newcastle Under Lyme</b> <input type="checkbox"/>	
Address (inc postcode): .....			
Type of accommodation (tick all that apply)			
Single Household <input type="checkbox"/> Family Household <input type="checkbox"/> Student HMO <input type="checkbox"/> HMO <input type="checkbox"/>			
*Gas Installation - Yes <input type="checkbox"/> No <input type="checkbox"/> (if gas certificate not provided please provide details why )		No. of floors	No. of letting rooms:

\* Enclose Gas Certificate

# DECLARATION

PLEASE READ, SIGN AND DATE THE FOLLOWING DECLARATION.

I / We .....

(Print Full Name / Names if applying for joint membership)

as owner(s) of private rented properties let within the boundaries of Stoke-on-Trent and Newcastle-under-Lyme, hereby declare to the best of my/our knowledge that the following statements are true.

- I/We have not had a conviction for illegal eviction or harassment of tenants in the last seven years.
- I/We have not had a conviction for violence towards any persons in the last seven years.
- I/We have not had a conviction for mortgage, Housing Benefit or Council Tax fraud or breach of grant conditions within the last three years.
- I/We have not intentionally failed to comply with any statutory notice either for an individual dwelling or House in Multiple Occupation in the last three years, and works in default relating to such notices have only been completed through prior agreement with the relevant Council.
- I/We have not knowingly failed to comply with the requirements of the Furniture and Furnishings (Fire)(Safety) Regulations 1988 in the last three years.
- I/We have not had a conviction for non-compliance with a Planning Enforcement Notice relating to residential property within the last three years.
- I/We do not have any other convictions that may make me unsuitable as an applicant to the Scheme.
- I/We am not aware that any of the managing agents detailed on the application has failed to comply with the above criteria. (Applicable/Not applicable).
- I/We understand that if a false statement is made about any of the above, membership of the Landlord Accreditation Scheme: North Staffordshire may be refused or withdrawn by the Scheme Operators.
- I/We recognise the authority of the Scheme Operators (Stoke-on-Trent City Council and Newcastle-under-Lyme Borough Council) through the Landlord Accreditation Scheme Steering Group and give permission for appropriate records to be checked to confirm the statements made above.
- I/We declare that to the best of my knowledge the information provided on this form is full and correct.
- I/We declare that I/We have read and understood the documentation provided in the application pack, and agree to abide by the Terms and Conditions of the Landlord Accreditation Scheme: North Staffordshire.
- If I/We should contravene any of the conditions of membership, I understand that I can be suspended or removed from the Landlord Accreditation Scheme: North Staffordshire.
- I/We acknowledge the Scheme Operators rights over the use of the Accreditation Logo and for my part authorise the public disclosure of my membership of the scheme as an individual, but reserve the right to provide written authorisation for the release of any other information I may supply to the Scheme Operators.

Note: All members of the Scheme will be included on a published list, on the Scheme website, which will include the main landlords name, joint owners names and business name and Landlord Accreditation Scheme number, no contact details will be listed.

Signed: ..... Dated: .....

Where applying for joint membership, the above statements apply to all joint owners who must sign the declaration.

## FEE CALCULATOR

- |                 |      |                          |   |
|-----------------|------|--------------------------|---|
| 1-5 Properties  | £80  | <input type="checkbox"/> |   |
| 6+ Properties   | £100 | <input type="checkbox"/> | A bed space is a space in which an individual bed is or |
| 10 + Bed Spaces | £120 | <input type="checkbox"/> | is intended to be placed.                               |

## METHOD OF PAYMENT

Cheque enclosed  Card payment via phone/online  Ref No. ....

## HOW DID YOU FIND OUT ABOUT THE SCHEME?

Website  At a meeting  Recommended  Leaflet  Existing member

Other: .....

**Remember** to enclose copies of all current gas safety certificates with your application form.

**Cheque to be made payable to Stoke-On-Trent City Council.**

**Please return to:** Private Sector Housing Team, Stoke-on-Trent City Council, Civic Centre, Glebe Street, Stoke-on-Trent ST4 1HH or email [mail@landlordaccreditation.co.uk](mailto:mail@landlordaccreditation.co.uk)

## **GAS SAFETY CERTIFICATES**

Are there any gas fittings and flues to any of the properties listed in the property register section?

If so, you need to tick the box against “gas installation” and include a copy of the gas safety certificate with your application form.

### **WE WILL NOT PROCESS ANY APPLICATIONS WITHOUT THESE CERTIFICATES**

If you are unaware of your duties please see the leaflet – Landlords: A guide to landlords’ duties: Gas Safety (Installation and Use) Regulations 1998’. This is available on the Health and Safety Executive website

[www.hse.gov.uk/pubns/indg285.pdf](http://www.hse.gov.uk/pubns/indg285.pdf)

For any further information or advice please contact Landlord Accreditation Scheme: North Staffordshire

Tel: **01782 232271**

Email: [mail@landlordaccreditation.co.uk](mailto:mail@landlordaccreditation.co.uk)

