

Dumfries & Galloway Council

Application for Landlord Registration



Your Details – Lead Owner

New Registration <input type="checkbox"/>	Registration Renewal <input type="checkbox"/>
If a renewal of an existing registration please provide your registration number: _____ /170/ _____	

Title:	First Name:
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Other Names:	Surname:
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Other names you have been known by:

Date of Birth (dd/mm/yyyy):

Organisations

Organisation Name:

Contact Person:

Your Position:	Tel No:
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Is this organisation a registered charity?	Yes / No
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If yes, please state the charity Registration number:

Please provide the company Registration number if applicable:

Address - Please provide addresses for the previous 5 years.

Address:

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Town:

Postcode:

How long have you lived at this address?	Years:	Months:
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Previous Addresses

Address:	Address:
Town:	Town:
Postcode:	Postcode:
Years: Months:	Years: Months:

Email Address (If you enter an email address we will use this to contact you in most circumstances):

Telephone Number:

Conviction Details

Do you have any spent/unspent convictions, or have you ever had any court or tribunal judgements under Housing Law, Landlord or Tenant Law, discrimination legislation?
Yes / No

If yes please give details - Continue on a separate sheet if necessary.

Conviction or description of case	Date	Court or tribunal which held the case

Do you have any previous or current Repairing Standard Enforcement Orders issued by the Private Rented Housing Panel? Yes / No

If yes please provide details of dates and description of the case below - Continue on a separate sheet if necessary.

Description of case	Date

Have you or a tenant residing at any of your properties ever been served with an Antisocial Behaviour Order or an Interim Antisocial Behaviour Order
Yes / No

If yes please provide details below

Date	Court	Local Authority (Optional)	Please indicate whether it was you or your tenant who was served with the order

Have you or any of your properties ever been subject to an Antisocial Behaviour Notice?
Yes / No

If Yes Please provide details below

Date	Local Authority

Other Registrations or Licences

Do you hold any registrations or licences in connection with letting houses anywhere in the UK? Yes / No

Description	Awarded by	Date	Local authority approving the scheme	Reference no

Have you had any such registrations or licences refused or revoked? Yes / No

Have you applied for Landlord Registration to another Local Authority? Yes / No

If yes please give details below.

Local Authority Name	Date and Registration Number

To register property in the Dumfries & Galloway Council area please complete the next page.

Properties

Address of property you let including postcode - Please continue on a separate sheet if necessary

Address:	Address:
Town:	Town:
Postcode:	Postcode:
Address:	Address:
Town:	Town:
Postcode:	Postcode:

Are any of the above properties occupied by 3 or more unrelated individuals? Yes / No

If yes do you hold a HMO (House in Multiple Occupation) licence for this property?
Yes/No

If Yes, please enter the HMO Licence Reference Number _____

Do you currently hold any HMO Licences in Dumfries and Galloway that are not included on the above list? Yes / No

Properties - Cont

Does an agent act for you in relation to the properties? Yes / No

If yes—Has this person already registered or applied for registration with Dumfries & Galloway Council? Yes / No

If yes please enter their registration number below.

_____ /170/ _____

If no please enter their name and address here, then ask them to complete page 13 –16 and return to us. You will need to pay a principal fee for your agent.

Agent Name:
Address:
Town:
Postcode:

Do you jointly own this property with anyone else? Yes / No

If Yes, Please complete joint owners form. Please note all joint owners of any let house must be registered. Your application cannot be approved until all details have been received.

Has this person already registered or applied for registration in Dumfries and Galloway Council? Yes / No

If yes, please provide registration number: _____ /170/ _____

What contact address do you want to use for this property?

Your Address Your Agent's Address

Other Address - Please specify _____

Properties - Cont

Declarations

I declare that I comply with all legal requirements relating to my letting of houses.

Information on the law and good practice in letting is available from the Landlord Registration Team at Dumfries & Galloway Council, online on the Scottish Government website at: www.scotland.gov.uk/Topics/Built-Environment/Housing/privaterent/landlords/registration, and other sources. If in doubt about legal requirements you should consult a solicitor or professional letting agent.

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

I agree that Dumfries & Galloway Council may use other information it holds about me to determine whether I am a fit and proper person to act as a landlord, or to act for a landlord, in terms of the Antisocial Behaviour etc (Scotland) Act 2004.

I agree that Dumfries & Galloway Council may share the information provided in this form, and other relevant information it holds about me, with other local authorities in Scotland to which I have applied for registration, to help those other authorities determine whether I am a fit and proper person to act as a landlord, or to act for a landlord, in terms of the Antisocial Behaviour etc (Scotland) Act 2004.

A local authority may use information it holds about you to determine whether you are a fit and proper person to act as a landlord, or to act for a landlord. In addition, local 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 the Police Service of Scotland and, if appropriate, other relevant authorities. Information is shared in terms of the Antisocial Behaviour etc. (Scotland) Act 2004 in terms of s 139, and / or the Data Protection Act 1998.

Under the Data Protection Act 1998 information is shared for the purposes of preventing and detecting crime.

Signed _____ Date _____

Print Name _____

**Please include payment with this application and return to the address below.
Details of fees are included in the guidance notes.**

Dumfries & Galloway Council
Landlord Registration
Municipal Chambers
Buccleuch Street
Dumfries
DG1 2AD

Your Details - Joint Owners

New Registration <input type="checkbox"/>	Registration Renewal <input type="checkbox"/>
If a renewal of an existing registration please provide your registration number: _____ /170/ _____	

Title:	First Name:
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Other Names:	Surname:
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Other names you have been known by:

Date of Birth (dd/mm/yyyy):

Organisations

Organisation Name:

Contact Person:

Your Position:	Tel No:
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Is this organisation a registered charity?	Yes / No
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If yes, please state the charity Registration number:

Please provide the company Registration number if applicable:

Address - Please provide addresses for the previous 5 years.

Address:

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Town:

Postcode:

How long have you lived at this address?	Years:	Months:
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Previous Addresses

Address:		Address:	
Town:		Town:	
Postcode:		Postcode:	
Years:	Months:	Years:	Months:

Email Address (If you enter an email address we will use this to contact you in most circumstances):

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Conviction Details

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Yes / No

If yes please give details - Continue on a separate sheet if necessary.

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Do you have any previous or current Repairing Standard Enforcement Orders issued by the Private Rented Housing Panel? Yes / No

If yes please provide details of dates and description of the case below - Continue on a separate sheet if necessary.

Description of case	Date

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Yes / No

If yes please provide details below

Date	Court	Local Authority (Optional)	Please indicate whether it was you or your tenant who was served with the order

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Landlord Registration
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DG1 2AD

Your Details - Agents

New Registration <input type="checkbox"/>	Registration Renewal <input type="checkbox"/>
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Your Position:	Tel No:
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Town:

Postcode:

How long have you lived at this address?	Years:	Months:
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Years:	Months:	Years:	Months:

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