FIT AND PROPER PERSON FORM - MANAGER Name & address: Title: First name(s): Surname: Address: Postcode: Email: Tel: Professional qualifications: (e.g. RICS, ARMA, ARLA, etc) What redress scheme are you a member of: Do you agree to receive the licence documents by email? Have you, or anyone you are associated with: Committed any offence involving fraud or other dishonesty (including benefit fraud), violence, drugs, or any offence listed in Schedule 3 to the Sexual Offences Act 2003 (subject to the Rehabilitation of Offenders Act 1974)? Practised unlawful discrimination on grounds of sex, colour, race, ethnic or national origins or disability in, or in connection with, any business? Contravened any legislation relating to housing, public health, environmental health or landlord and tenant law? Been refused a licence under Part 2 or 3 of the Housing Act 2004? Had a licence revoked for breach of any conditions under Parts 2 or 3 of the Housing Act 2004? Contravened any Code of Practice relating to the management of HMOs? Been subject to a Management Order under the Housing Act 2004? Failed to comply with a Housing Notice (requiring works etc.) served by a local authority? Been subject to complaints from tenants or other sources, regarding serious or repeated breaches of the conditions of a licence under the Housing Act 2004? No Yes If yes, please give further details:

Dated:

Signed: