

FIT AND PROPER PERSON FORM – OTHER INDIVIDUAL

Name & address:

Title: First name(s):

Surname:

Address:

..... Postcode:

Email:

Tel:

Interest in the property:

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:

.....

Signed:

Dated: