

Declaration in respect of Licence Application under Part 2 or 3 of the Housing Act 2004



Section 1

(To be completed by the Applicant)

Address of property to be licenced (add address)
.....
.....

Application Reference No (add WK/ reference)

Application submitted by (add Applicant's name)

Date of Application (add date application submitted)

Section 2

(To be completed by licence holder, manager or person agreeing to be bound by the conditions)

I (insert your name here) declare that I have seen a copy of the above named Licence application and that the information contained within it is correct to the best of my knowledge. I understand that I commit an offence if I supply any information to a local housing authority in connection with any of their functions under any of Parts 1 to 4 of the Housing Act 2004 that is false or misleading and which I know is false or misleading or am reckless as to whether it is false or misleading.

I understand that I have been named on the application as (please tick as appropriate):

- Licence holder
- Manager
- Person agreeing to be bound by the conditions

Your Address
.....
.....

Contact Tel NoEmail address

Signed

Date

Please return this form within 14 days to:

Private Sector Housing Licensing team, Hastings Borough Council, Aquila House, Breeds Place, Hastings, East Sussex, TN34 3UY

Please note: that we will not be able to process the Licence application until all declarations have been returned to the above address.