

# THE CIVIC GOVERNMENT (SCOTLAND ACT 1982 (LICENSING OF SHORT-TERM LETS) ORDER 2022 AS AMENDED

# APPLICATION FOR TRANSFER OF SHORT-TERM LET LICENCE

<u>Please note, only the current licence holder(s) or person(s) authorised to act on behalf of the licence holder(s) can make an application to transfer the Licence</u>

Part A - must be completed by the current licence holder(s) or person(s) authorised to act on behalf of the licence holder(s)

Part B - must be completed by the transferee

#### PART A

#### 1: Licence Details

Current Licence Number:	
Premises Address:	
I have enclosed my Licence with this application	YES / NO
If answered No, you must provide reasons for failing to do so. Please so reasons below:	et out your

# 2: Applicant Information

Are you the current licence holder	YES / NO
If No, please explain why you are making this application:	
Please provide the Licence Holder(s) full name(s) and address(es), inclubelow:	uding post code(s)
Each licence holder(s) or person authorised to act on behalf of each holder(s) must consent to the transfer of the licence to the transfer	
Have you included a consent declaration from the licence holder/joint licence holder or person authorised to act on behalf of the licence holder/ joint licence holder with this application	YES / NO

## 3: Ownership of the Premises

Does the licence holder/joint licence holder own the licensed premises	YES / NO
If Yes, does the licence holder/joint licence holder share ownership	YES / NO
If the licence holder/joint licence holder does not own, or is not the sole of premises, please provide the full name and address of each owner below	

Each owner(s) or person a to the transfer of the licen	authorised to act on behalf of the owner(s	s) must consent
	nt declaration from each owner(s) or behalf of the owner(s) with this application	YES / NO
4: Transferee Details		
s the Licence to transfer to a	an Individual or Corporate Entity, tick one box	c below:
ndividual	Corporate Entity	
ndividual Details:		
First Name(s)		
Surname		
Address		
Corporate Entity Details: Full Name of Company or B	Body	
Limited Commons Number	(if the arms)	
Limited Company Number (	ir known)	
Address of Principle or Rea	istered Office (including Postcode)	
Address of Filliopic of Reg	istered Office ( <i>including</i> i ostoode)	
4: Checklist		
have enclosed the followi	ng documents with this application – plea	ase tick all that
apply:		
Short-Term Let Licence		
Joint Licence Holder conser	nt to transfer <i>(if applicable)</i>	
Owner consent to transfer (	if applicable)	
Fee		

### 5: Declaration

#### To be completed by ALL categories of applicant:

Anyone who gives false information on this form, or fails to provide the information required by this form, is committing an offence which could lead to prosecution.

	n in this application is correct to the bes	
of my knowledge		
	n to make any statement which they l	
in this application or in conn	ection with the making of this applicate	<u>tion</u>
SIGNATURES		
• • • • • • • • • • • • • • • • • • • •	alse or misleading information in an appli ect to a Level 4 fine on the standard scale	•
NOTE: (M/hava a as nawtrawahir		ontitu planca
also state position of signatory.	each partner should sign. If a corporate	entity, piease
also state position of eightery.		
Print Name and Position (if applicable)	Signature	Date
иррпоизго)		
		]
The information supplied will	be used for the purposes of this applica	tion and in

accordance with the General Data Protection Regulations 2018.



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# **APPLICATION FOR** TRANSFER OF SHORT-TERM LET LICENCE

### **PART B**

To be completed by the Transferee				
1: Transferee Details				
Is the Licence to transfer to an Individu	ual or	Corporate E	Entity, tick one box	below:
Individual		Cor	porate Entity	
Individual Details:				
First Name(s)				
Surname				
Date of Birth				
Place of Birth				
Address				
E-mail Address				
Telephone Number				
Please provide your home address his starting with the most recent. Please				
Address (history for last 5 years)	Post	code	Date From (Month/Year)	Date To (Month/Year)

# **Corporate Entity Details:**

Full Name of Company or Bo	dy		
Limited Company Number (if	applicable)		
Address of Principle or Regist	tered Office (inc	luding Postcode	e)
E-Mail Address		Tel. No.	
Please provide details of each		ors, Partners o	or other persons concerned
in the management of the bo	ody.		
Director/Partner/Trustee – 1			
Full Name	Date of Birth		Place of Birth
Home Address			
E-Mail Address	Home Tel. No		Mobile No.
Director/Partner/Trustee – 2			L 31 ( 32 ) ( 1
Full Name	Date of Birth		Place of Birth
Home Address			
E-Mail Address	Home Tel. No		Mobile No.
Director/Partner/Trustee – 3			Di
Full Name	Date of Birth		Place of Birth
Home Address			
E-Mail Address	Home Tel. No		Mobile No.

# 2: Ownership of the Premises

Will you be the so being transferred	ole owner of the premi	ses at the point	of the Licence	YES / NO
If you will not be owner below:	the sole owner, please	e provide the ful	I name and addre	ss of each joint
	or person authorised being used as a shor		alf of the owner(s	) must consent
	ed a consent declaration d to act on behalf of th			YES / NO
3: Agent/Manage  Do you intend to a  Yes	e <u>r Details</u> ppoint an agent or dag	y-to-day Manag No	er:	
If you answered y	yes, please provide o	details of your	agent(s) or day t	o day manager(s)
Full Name	Address (5 year address history)	Date of Birth	E-mail Address	Telephone Number
4: Previous/Othe	r Short-Term Let Lice	ence Details		
Have you or anyo short-term let lice	one named in Part 1 o	f the applicatior	form held a	YES / NO
	ovide the licensee's ful nce, and the type of sh		of the Licensing Au	uthority who

Have you or anyone named in Part 1 of the application been refused a licence previously	YES / NO
If Yes, please provide the licensee's full name, name of the licensing authorefused the licence and the type of licence refused and the date of refusal	•

## 5: Insurance

Do you have building insurance in place, which covers the activity of short-term letting	
	YES / NO
(If yes, please provide a copy of the documentation with this application)	
Do you have public liability insurance in place, which covers the activity of short-term letting	YES / NO
(If yes, please provide a copy of the documentation with this application)	

# 6: Criminal Convictions

Have you or any other person named at Part 1 of the application been convicted of any offence	YES / NO
Please include details of any <b>unspent</b> convictions in the table below: (An unspent conviction is a criminal conviction that is still within the constrehabilitation period. In other words, not enough time has elapsed for the considered spent.	

Name	Date	Court	Offence	Sentence

#### 7: Checklist

I have enclosed the following documents with this application – please tick all that apply:

Building Insurance Certificate			
Public Liability Insurance Certificate			
Joint Owner consent (if applicable)			
Portable Appliance Testing Report (if applicable)			

### 8: Declaration

#### To be completed by ALL applicants:

EAST AYRSHIRE COUNCIL, as licensing authority, will use information it holds about you to determine whether you are a fit and proper person to operate a short-term let. In addition, licensing 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 Police Scotland, and, if appropriate, other relevant authorities.

Anyone who gives false information on this form, or fails to provide the information required by this form, is committing an offence which could lead to prosecution.

National Fraud Initiative - East Ayrshire Council is under a duty to protect the public funds it administers, and to this end may use the information you provide on this form for the prevention and detection of fraud. It may also share this data with other bodies including government organisations for these purposes. Further information can be obtained from the council's website.

I declare that I have read and understood the Mandatory Conditions that			
apply to short-term let licences and East Ayrshire Council Standard			
Conditions			
I declare that the information given in this application is correct to the best of my knowledge			
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NB <u>It is an offence for any person to make any statement which they know to be false in this application or in connection with the making of this application</u>

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Anyone who knowingly provides false or misleading information in an application may be guilty of an offence, which is subject to a Level 4 fine on the standard scale.

NOTE: (Where a co-partnership, each partner should sign. If a corporate entity, please also state position of signatory.

Print Name and Position (if applicable)	Signature	Date

The information supplied will be used for the purposes of this application and in accordance with the General Data Protection Regulations 2018.