

For Official Use: Cash Office/Service Point

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|---|------|
| APPLICATION FEE: | £120 |
| FEE PAID: | |
| RECEIPT NO: | |
| DATE RECEIVED: | |
| RECEIVED BY: (SERVICE POINT & INITIALS) | |



**THE HIGHLAND COUNCIL
CIVIC GOVERNMENT (SCOTLAND) ACT 1982
APPLICATION FOR THE TRANSFER OF A SHORT TERM LET LICENCE**

Introductory Notes:

- This application can only be made by the current short term let (STL) licence holder or a person authorised to act on their behalf.
- The application should be accompanied by the STL Licence to which the application relates. If this is not possible, a statement of reasons should be provided for the failure to produce the licence.
- In order to process this form, The Highland Council needs to collect and process your personal data as described in the Privacy Policy, which is annexed at the end of this form. By proceeding you are confirming that you have read and understood this notice.
- Please complete all sections of this application form, unless indicated otherwise.
- Please complete all details in this form in block capitals, using black ink.
- Please review and sign the declarations at Section 9 of this form before returning this to us.
- Please return this form to Short-Term Let Licensing Team, The Highland Council, Charles Kennedy Building, Achintore Road, Fort William, PH33 6RQ or by email to: stl@highland.gov.uk.
- Please ensure you have arranged payment of the application fee of £120. We will require payment of this fee before we can process this application form. The ways to pay this fee are as follows:

By Debit or Credit Card

- In Person at any Service Point
- By Telephone to a member of Council staff. Please telephone the payment line on 01349 886605/09 and a member of staff will be able to take your payment. This service is available Monday-Friday 8 am to 6 pm.

By Bank Credit Transfer, Telephone or Online Banking or Standing Order

Please pay to the: Virgin Money, 15 Academy Street, Inverness, IV1 1JN
Bank Sort Code: 82:70:13
Bank Account Number: 30000542
Please quote: Name of Premises/Type of Application or Invoice Number with all payments.

- If you have any questions regarding this application form, please contact us at 01397 707236 or at stl@highland.gov.uk

SECTION 1 – APPLICANT DETAILS

| | |
|--|---|
| <p>1.1 Are you the current STL licence holder or are you an agent completing this application on their behalf:</p> | <p>Licence Holder <input type="checkbox"/> or Agent <input type="checkbox"/> (Please put a cross at the applicable option)</p> <p>If you have answered “Agent”, please provide the following details:</p> <p>Full Name:</p> <p>Business/Firm/Company Name (if applicable):</p> <p>Address:</p> <p>Email Address:</p> <p>Telephone Contact Number:</p> |
| <p>1.2 Do you have permission to make this application to transfer the STL Licence from all current STL Licence Holders:</p> | <p>Yes <input type="checkbox"/> or No <input type="checkbox"/> (Please put a cross at the applicable option)</p> <p>If you have answered No please provide details of why at Section 8, the Additional Information part of this form</p> |
| <p>1.3 Do you have permission to make this application to transfer the STL Licence from all persons to whom the STL licence is proposed to be transferred:</p> | <p>Yes <input type="checkbox"/> or No <input type="checkbox"/> (Please put a cross at the applicable option)</p> <p>If you have answered No please provide details of why in Section 8, the Additional Information part of this form</p> |
| <p>1.4 Do you have permission to make this application on behalf of all owners of the STL property, including any shared or joint owners who are not detailed as “Transferees” at Section 3 of this form:</p> | <p>Yes <input type="checkbox"/> or No <input type="checkbox"/> (Please put a cross at the applicable option)</p> <p>If you have answered No please provide details of why in Section 8, the Additional Information part of this form</p> <p>If you have answered Yes, please provide us with a signed declaration from each owner of the STL property who is not detailed as a Transferee at Section 3 of this form or a person authorised to act on their behalf, confirming that they consent to you making this application on their behalf. Such declaration <u>must</u> accompany your application and applications which do not include such declarations will be treated as incomplete and returned to you.</p> <p>Have you enclosed a signed consent declaration from each owner(s)/other owner or person authorised to act on behalf of the owner(s) with this application:</p> <p>Yes <input type="checkbox"/> or No <input type="checkbox"/> (Please put a cross at the applicable option)</p> |

SECTION 2 – CURRENT LICENCE HOLDER(S) INFORMATION

Particulars of STL licence and current licence holder

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|---|--|
| 2.1 STL Licence Number: | |
| 2.2 Full Address of STL property (including postcode): | |
| 2.3 Date Licence was issued: | |
| 2.4 I have enclosed the licence with this application | Yes <input type="checkbox"/> or No <input type="checkbox"/> If No, you must provide reasons for failing to do so. Please state your reasons below: |

2.5 Full name (s) of current Licence Holder:

(please include the names of all current licence holders)

2.6 Organisation number (such as company number) if applicable:

2.7 Address(es) and postcode of current STL Licence Holder(s):

(including registered office if Licence Holder is a company):

2.8 Contact Telephone Number(s) for current licence holder:

2.9 E-mail Address(es) for current licence holder:

SECTION 3 – TRANSFEREE INFORMATION

Particulars of the proposed transferee i.e. the person (including an individual, sole trader, partnership, company or other organisation) who, if approved, will be the new STL licence holder

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|---|---|
| <p>3.1.1. How many host/operators of the STL property will there be following the proposed transfer of the licence:</p> <p>(Please include reference to any current host/operators who will remain as a host/operator of the STL property after the proposed licence transfer)</p> | |
| <p>3.1.2 In which capacity does the Transferee propose to hold the STL licence:</p> | <p>Individual(s) or Sole Trader <input type="checkbox"/> <i>i.e. you run the business as an individual or are self-employed (including where two or more individuals are operating the STL property in their respective individual capacities)</i></p> <p>Partnership <input type="checkbox"/> <i>i.e. your business is set up as a legal partnership where two or more persons carry on the business with view to a profit</i></p> <p>Company <input type="checkbox"/> <i>i.e. your business is a company registered with Companies House</i></p> <p>Other organisation <input type="checkbox"/> <i>i.e. your business does not fall into any of the above categories e.g., limited liability partnership, charity etc.</i></p> <p>(Please put a cross at the applicable option)</p> |

If you have answered “Individual(s) or Sole Trader” please complete section 3.2 of this form and then move on to section 4

If you have answered “Partnership”, please complete section 3.3 of this form and then move on to section 4

If you have answered “Company”, please complete section 3.4 of this form and then move on to section 4

If you have answered “Other organisation”, please complete section 3.5 of this form and then move on to section 4

3.2 Individual or Sole trader:

3.2.1 Individual or Sole trader: Details:

Please confirm the requested details for all host/operators following the proposed transfer including any current host/operators of the STL property who will remain as a host/operator following the proposed licence transfer:

If you require further space to detail further individuals, please complete the details requested above for such individuals on a supplementary piece of paper and annex them to this application

Host/Operator 1:

Title:

First Name:

Middle Names(s):

Last Name:

Home Address:

Postcode:

Date of Birth:

Place of Birth:

Email address:

Telephone Contact Number:

Host/Operator 2:

Title

First Name:

Middle Names(s):

Last Name:

Home Address:

Postcode:

Date of Birth:

Place of Birth:

Email address:

Telephone Contact Number:

3.3 Partnership

| | |
|--|--|
| 3.3.1 Name of Partnership | |
| 3.3.2 Type of Partnership: <i>(For example, is this a traditional partnership, limited partnership, limited liability partnership or other type of partnership)</i> | |
| 3.3.3 Partnership Number (if applicable): | |
| 3.3.4 How many Partners are there <i>(Please confirm the number of partners of the business, including the applicant if they are a partner):</i> | |
| 3.3.5 Main or registered office address of Partnership (including postcode): | |
| 3.3.6 Partner Details <i>Please confirm the following details for all Partners of the Partnership:</i> <i>If you require further space to detail further Partners, please complete the details requested above for such Partners on a supplementary piece of paper and annex them to this application</i> | Partner 1: Title: First Name: Middle Names(s): Last Name: Home Address: Postcode: Date of Birth: Place of Birth: Email address: Telephone Contact Number: |

Partner 2:

Title:

First Name:

Middle Names(s):

Last Name:

Home Address:

Postcode:

Date of Birth:

Place of Birth:

Email address:

Telephone Contact Number

Partner 3:

Title:

First Name:

Middle Names(s):

Last Name:

Home Address:

Postcode:

Date of Birth:

Place of Birth:

Email address:

Telephone Contact Number:

3.4 Company

| | |
|--|---|
| 3.4.1 Company Name | |
| 3.4.2 Company number: | |
| 3.4.3 Registered office address of the Company (including postcode): | |
| 3.4.4 How many Directors of the Company are there: | |
| 3.4.5 Director Details <i>Please confirm the following details for all Directors of the Company:</i> <i>If you require further space to detail further Directors, please complete the details requested above for such Directors on a supplementary piece of paper and annex them to this application</i> | Director 1: Title: First Name: Middle Names(s): Last Name: Home Address: Postcode: Date of Birth: Place of Birth: Email address: Telephone Contact Number: |

Director 2:

Title:

First Name:

Middle Names(s):

Last Name:

Home Address:

Postcode:

Date of Birth:

Place of Birth:

Email address:

Telephone Contact Number:

Director 3:

Title:

First Name:

Middle Names(s):

Last Name:

Home Address:

Postcode:

Date of Birth:

Place of Birth:

Email address:

Telephone Contact Number:

3.5 Other organisation

| | |
|---|--|
| 3.5.1 Organisation Name: | |
| 3.5.2 Organisation Number (if applicable): | |
| 3.5.3 Type of Organisation <i>(Such as though not limited to an unincorporated association, Scottish Charitable Incorporated Organisation, or Trust):</i> | |
| 3.5.4 How many office holders (such as directors, trustees, secretaries) are there: | |
| 3.5.5 Main or registered address of organisation (including postcode) | |
| 3.5.6 Office Holder's Details <i>Please confirm the following details for all Office Holders of the Organisation:</i> | Individual 1: <i>Designation:</i> <i>Title:</i> <i>First Name:</i> <i>Middle Names(s):</i> <i>Last Name:</i> <i>Home Address:</i> <i>Postcode:</i> <i>Date of Birth:</i> <i>Place of Birth:</i> <i>Email address:</i> <i>Telephone Contact Number:</i> |

Individual 2:

Designation:

Title:

First Name:

Middle Names(s):

Last Name:

Home Address:

Postcode:

Date of Birth:

Place of Birth:

Email address:

Telephone Contact Number:

Individual 3:

Designation:

Title:

First Name:

Middle Names(s):

Last Name:

Home Address:

Postcode:

Date of Birth:

Place of Birth:

Email address:

Telephone Contact Number:

SECTION 4 – PROPERTY OWNERSHIP

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|---|---|
| <p>4.1 Is the current ownership of the STL property changing:</p> | <p>Yes <input type="checkbox"/> or No <input type="checkbox"/> (Please put a cross at the applicable option)</p> <p>If you have answered Yes, please answer question 4.2</p> <p>If you have answered No, please move on to section 5</p> |
| <p>4.2 Date of the change of ownership of the STL property:</p> | |
| <p>4.3 Are all Transferees, detailed at Section 3 of this form, the owners of the STL property?</p> | <p>Yes <input type="checkbox"/> or No <input type="checkbox"/> (Please put a cross at the applicable option)</p> |
| <p>4.4 Are there any other owners of the STL property who are not a Transferee detailed at Section 3 of this form:</p> <p>Please note this includes:</p> <ul style="list-style-type: none"> • shared ownership of the STL property; • owners of the land that the STL property is located on; and • STL property held in joint names. | <p>Yes <input type="checkbox"/> or No <input type="checkbox"/> (Please put a cross at the applicable option)</p> <p>If you have answered Yes, please move on to section 5</p> <p>If you have answered No, please confirm the following details for all owners of the STL property below then move on to section 5. If you require further space to detail further owners, please complete the details requested on a supplementary piece of paper and annex them to this application</p> <p>Individual 1:</p> <p><i>Title:</i></p> <p><i>First Name:</i></p> <p><i>Middle Names(s):</i></p> <p><i>Last Name:</i></p> <p><i>Company/Partnership/Other Organisation Name (if applicable) and registered number:</i></p> <p><i>Address/Registered Office Address:</i></p> <p><i>Postcode:</i></p> <p><i>Date of Birth:</i></p> |

Place of Birth:

Email address:

Telephone Contact Number

Individual 2:

Title:

First Name:

Middle Names(s):

Last Name:

Company/Partnership/Other Organisation Name (if applicable) and registered number:

Address/Registered Office Address:

Postcode:

Date of Birth:

Place of Birth:

Email address:

Telephone Contact Number

SECTION 5 – DAY-TO-DAY MANAGER

5.1 Is the day-to-day manager of the STL property changing as part of the proposed transfer of the STL licence:

Please note the day-to-day manager must be an individual and not a partnership, company or other organisation.

Yes Or No

(Please put a cross at the applicable option)

If you have answered No, please move on to section 6

If you have answered Yes, please complete question 5.2 then move on to section 6

5.2 Is any party whose details are provided at section 3 as the Transferee the proposed day-to-day manager(s) of the STL property:

Yes or No

(Please put a cross at the applicable option)

If you have answered Yes, can you please confirm below the full name of the day-to-day manager(s), whose details are provided at section 3, then move on to section 6:

Name(s):

If you have answered No, please confirm the following details for the proposed new day-to-day manager and then move on to section 6:

Title:

First Name:

Middle Names(s):

Last Name:

Home Address:

Postcode:

Date of Birth:

Place of Birth:

Email address:

Telephone Contact Number:

SECTION 6 – PREVIOUS LICENCES

6.1 Have any individuals named in Sections 3, 4 or 5 of this form who have held or currently hold an STL licence:

Yes or No

(Please put a cross at the applicable option)

If you have answered No, please move on to question 6.2

If you have answered Yes, please complete the following details for each licence that they hold then move on to question 6.2. If you require further space to complete this question, please complete the details requested on a supplementary piece of paper and annex them to this application.

Full name of person who holds or held a licence:

Licence number:

When was the licence(s) granted:

Expiry Date:

Which licensing authority issued the licence:

Was the licence revoked or suspended at any time:

Yes Or No

(Please put a cross at the applicable option)

If you have answered Yes, please confirm the following:

Revoked licence number if known:

Which authority revoked the licence:

6.2 Have any individuals named in Section 3 or 4 of this form been refused an STL licence:

Yes or No

(Please put a cross at the applicable option)

If you have answered No, please move on to section 7

If you have answered Yes, please complete the following details then move on to section 7. If you require further space to complete this question, please complete the details requested on a supplementary piece of paper and annex them to this application.

Full name of person(s) refused a licence:

Date the licence(s) was refused:

Which authority (ies) refused the licence(s):

SECTION 7 – CRIMINAL CONVICTIONS

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|---|---|
| <p>7.1 Does any of the individuals named in Sections 3, 4 or 5 of this form have any criminal convictions that are not spent or protected:</p> <p><i>Please note: Further guidance on spent or protected criminal convictions are found at https://www.highland.gov.uk/downloads/file/23171/spent_and_protected_convictions_-_nov_2020 - please contact us to request a copy of such guidance in advance of completing your application form.</i></p> <p><i>Working out whether a conviction is spent and, if so, whether it is protected can be complicated and it is strongly recommended that applicants seek independent legal advice if in any doubt.</i></p> | <p>Yes <input type="checkbox"/> Or No <input type="checkbox"/></p> <p>(Please put a cross at the applicable option)</p> <p>If you have answered Yes, please complete section 7.2 then move on to section 8</p> <p>If you have answered No, please move on to section 8.</p> |
| <p>7.2 Details of Convictions</p> <p><i>Please note: If you require further space to detail further criminal convictions, please complete these details on a supplementary piece of paper and annex them to this application</i></p> | <p>Date of Offence:</p> <p>Type of Court:</p> <p>Location of Court:</p> <p>Offence:</p> <p>Outcome:</p> |

SECTION 8 – ADDITIONAL INFORMATION

8.1 Is there any further information you wish to submit with your application?

Yes or No

(Please put a cross at the applicable option)

If you have answered No, then move on to question 8.2:

If you have answered Yes, please provide details below and then move on to question 8.2. If you require further space to complete this question, please complete the details requested on a supplementary piece of paper and annex them to this application.

8.2 Have you annexed any additional pages or documents with this application:

If you wish to submit any documents along with this application, please annex these to this application:

Yes or No

(Please put a cross at the applicable option)

If you have answered No, then move on to section 9

If you have answered Yes, please provide details below and then move on to section 9:

SECTION 9 - DECLARATIONS

I / we confirm the following

- The particulars given by me on this form are true.
- All the host/operators and owners of the STL property have been identified. These persons are named on the application form.
- Permission to use the property for this purpose has been given by the owners.
- All the people involved in the day-to-day management of the property have been identified and are listed on the application.
- The licensing authority will be notified of any changes to the day-to-day management of the property.
- Only those named as the duty holder can carry out day-to-day management of the property.
- Satisfactory equipment is installed to detect and warn against fire, suspected fire and carbon monoxide.
- Furniture and furnishings within the property comply with fire safety regulations with records to demonstrate compliance.
- All reasonable steps have been taken to ensure the property is safe for residential use.
- All required planning permissions and building warrant documentation have been applied for. This includes for any alterations made to the property.
- Information has been prepared for guests on the use of the property and is provided to the guests ahead of arrival.
- The property licence number will be displayed on adverts and listings for the property.
- The property has a valid Energy Performance Certificate, issued within the last 10 years.
- Plans have been made to display the property EPC rating on adverts and listings, if required.
- A Portable Appliance Testing Report has been provided for all moveable appliances to which guests have access to within the property. These are dated, labelled, and signed.
- There is valid buildings insurance for the intended use of the property as an STL.
- There is valid public liability insurance for the intended use of the property as an STL whilst it is operating as an STL.
- Satisfactory safety certification for any pressure vessels, lifts or other mechanical equipment used on the property has been completed.

I / we have checked

- That the licence holder complies with additional licence conditions (if applicable).
- If the property meets the repairing standard.
- The food hygiene and safety rules that apply to the licence holder.

I / we understand

- It is an offence to provide statements to The Highland Council (as licensing authority) that is false or misleading, or that you know to be.
- The information provided by me on the form may be stored on a computer system for licensing purposes. The information may be disclosed to other relevant parties for background enquiries.

I confirm I have read and accept the above declarations

Date: _____

(Signature of Applicant/Agent)

Privacy notices - Civic Government licence

- **Purpose**

Civic Government licence

- **Description**

The Highland Council is the licensing authority for various types of licensable activities in the Highland area which come under either the Civic Government (Scotland) Act 1982 and associated regulations (the 1982 Act) or the Housing (Scotland) Act 2006 (the 2006 Act).

Under the 1982 Act, a licence is required for:

- Boat hire
- Commercial window cleaning
- Indoor sports premises
- Itinerant metal dealing
- Knife dealing
- Late hours catering
- Market operating
- Metal dealing
- Private hire car driving
- Private hire car operating
- Public entertainment
- Second hand dealing
- Second hand vehicle dealing
- Sex shop operating
- Sexual entertainment venues
- Short-term lets
- Skin piercing and tattooing
- Street trading
- Taxi booking office operating
- Taxi driving
- Taxi operating

Our permission is also required under the 1982 Act to hold a charitable collection or to hold a march or parade.

Under the 2006 Act, a licence from us is required to operate a house or flat as a house in multiple occupation (HMO).

As well as processing applications for these types of licences or permissions, we have a responsibility for handling complaints about licence holders or licensed premises or vehicles, for reviewing existing licences where necessary and for issuing various reminder notices to licence holders, such as reminders when licence renewals are due. We arrange medical check ups for taxi and private hire car drivers to ensure they meet DVLA Group 2 medical standards. We also have to arrange vehicle inspections and meter tests for taxi and private hire car operators to make sure their vehicle meets the standards, and inspections by the Environmental Health service for certain types of premises, vehicles and trailers to ensure that food hygiene, health and safety and HMO standards are met.

Personal information is needed to allow us to process your application for a licence, to determine your application and issue your licence, to include your licence in the public register of licences, to ensure you comply with the terms of your licence, to send you any necessary reminder notices and to process and determine any complaints we receive in respect of your licence.

Where licence fees are payable, payments are taken through an online form on our website or by phoning or attending our Service Centre.

- **If you don't give us your information**

If you don't provide all of the personal information which is requested in our licence or permission application forms, we will be unable to process or determine your application and it will be returned to you.

- **Conditions for processing personal information**

We have a legal obligation under the 1982 Act and the 2006 Act to administer these licensing and permission functions in the Highland area. If you wish to hold a licence, we must process your personal information to fulfil this legal obligation.

- **Your rights**

- View personal data
- Change personal data
- Delete personal data
- Restrict processing of personal data

Find out more about your rights at

https://www.highland.gov.uk/info/704/data_protection_and_freedom_of_information/341/information_we_hold_about_you

- **Who we share your information with?**

Your information will be shared with Police Scotland and any relevant council services who may need to inspect your premises, site, vehicle, or trailer.

Where premises (including temporary structures) are involved, your information will also be shared with the Scottish Fire and Rescue Service who may carry out an inspection.

For public entertainment events, your information may also be shared with NHS Highland and the Ambulance Service to assess first aid provision. We may also share your information with Bear Scotland, Transport Scotland, and Traffic Scotland where traffic management during the event needs to be assessed.

Your information may also be shared with the Home Secretary, where we are required to check your right to work in the UK.

In relation to short-term let licensing, data will be shared with the Scottish Government for statistical and research purposes, which may involve some additional data linkage for analysis purposes where appropriate.

- **How long we hold your information**

Your information will be held for 2 years after you cease to hold a licence or, in the case of refusal of a licence application, 2 years from the date of the refusal.

- **Automated processing**

Your personal information is not subject to automated decision making or profiling.

- **Data controller**

The data controller is The Highland Council

- **Data Protection Officer**

Data Protection Officer
Highland Council Headquarters
Glenurquhart Road
Inverness
IV3 5NX
01463 702029

dpo@highland.gov.uk

- **Supervisory authority**

If you are unhappy with the way, we have processed your personal information you can contact the Information Commissioner:

Information Commissioner's Office
Wycliffe House
Water Lane
Wilmslow
Cheshire
SK9 5AF
Tel: 0303 123 1113
<https://ico.org.uk/global/contact-us/>
