



Residential Letting & Property Management Specialists

Barnsley Accredited Landlord Scheme



Landlord Membership Application Form

Your Details

Full name, including title	
Trading as (where applicable)	
Address for correspondence	
Post Code	
Contact Telephone(s)	
Mobile Telephone number	
E-mail address	
Date of birth	
NB To save on costs and time we will generally contact you by Email unless you specifically request otherwise.	

Joint owners Details (if Applicable)

Full name, including title	
Trading as (where applicable)	
Address for correspondence	
Post Code	
Contact Telephone(s)	
Mobile Telephone number	
E-mail address	
Date of birth	



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Details of any Managing Agent (if applicable)	
Name of Agent	
What services do they provide for you?	
Contact name at agent	
Address for correspondence	
Post Code	
Contact Telephone(s)	
E-mail address	
Do you require us to deal directly with you, your agent (if applicable) or both. Please state:	

(Please continue on a separate sheet if necessary)



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Property Details

please list below the properties within your portfolio. Please indicate which of these properties you would like to register for accreditation status, following successful acceptance onto the scheme.

	Property address including post code	Number of bedrooms	Number of Bed spaces	Number of storeys excluding cellars used only for storage	Type of property (please insert relevant code from next page)	Number of letting units *	If applicable, have you applied for an HMO licence with the Council?	I would like to register this property for accreditation status
1.							Y/N	Y/N
2.							Y/N	Y/N
3							Y/N	Y/N
4							Y/N	Y/N
5							Y/N	Y/N
6							Y/N	Y/N



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7							Y/N	Y/N
8							Y/N	Y/N
9							Y/N	Y/N
10							Y/N	Y/N
11							Y/N	Y/N
12							Y/N	Y/N

* The number of unrelated people sharing the property i.e. students or professionals.



Property Type Codes:

Property Type Codes	Description
H	House (let as a single letting including shared student house or to a family)
F	Flat above a shop
SC	Purpose built, self-contained flats / apartments
HMO	A dwelling will be an HMO if three or more unrelated people are sharing it
ML HMO	Dwelling with 5 or more individuals on 3 storeys or more
R	Accommodation or lodgings with resident landlords
O	Other – please describe

(Please continue on a separate sheet if necessary)

PLEASE NOTE: Properties which are occupied on 3 or more stories by 5 or more occupants may require a 'House in Multiple Occupation' (HMO) licence. For further information please contact Regulatory Services: 01226 772468, or email regulatoryservices@barnsley.gov.uk



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Fit & Proper Person Check

In order to participate in the scheme you must be a fit and proper person and meet the specified criteria. If you are not sure or you feel unable to make the declaration please discuss it with us first.

The existence of such an issue may not necessarily prevent you becoming accredited however we may carry out the further legal checks on applicants, as deemed necessary.

1: I declare that I am a fit and proper person to be accredited in that neither I, nor any person associated or formerly associated with me, have any unspent convictions that are relevant to my application and in particular:

- a. any offence involving fraud or other dishonesty, or violence or drugs or any offence listed in Schedule 3 to the Sexual Offences Act 2003;
- b. any unlawful discrimination on grounds of sex, colour, race, ethnic or national origins or disability in, or in connection with, the carrying on of any business; and
- c. contravention of any provision of the law relating to housing or of landlord and tenant law; (including any civil proceedings that you have lost).

2: And that during the last 5 years neither I, nor any person associated or formerly associated with me, have:

- a. been in control of any property subject to a control order under S379 of the Housing Act 1985;
- b. been refused a licence or had a licence removed for any property in relation to HMO, additional or selective licensing under the Housing Act 2004;
- c. been found to have breached a condition on a licence for any property in relation to HMO, additional or selective licensing under the Housing Act 2004;
- d. been found by a local authority to have acted otherwise than in accordance with any Code of Practice approved under Section 233 of the Housing Act 2004;
- e. been in control of any property that has been the subject of any proceedings by a local authority (such as breaches of the Environmental Protection Act, planning control or compulsory purchase proceedings.);
- f. been in control of any property on which the local authority has carried out work in default; or
- g. been in control of any property, which has been the subject of an interim or final management order or a special interim management order under the Housing Act 2004.



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Additional Information regarding Fit and Proper Person Status

Please supply all relevant information. If this section is not applicable, then please state N/A.

Point number:

Point number:

Point number:



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Management Standards Checklist

Please tick all the items below which you declare you provide. BMBC reserves the right to request evidence of any of these items at any time during your membership:

Landlord	Tick
Written tenancy agreements	
Individual property information packs	
Provision of emergency contact numbers	
Written inventories pre and post tenancy	
Use of a tenancy deposit scheme	
Have a written complaints policy and procedures	

Membership of Professional Organisation :

Please supply details of membership held with any relevant professional organisations:

Name of Professional Organisation	
Membership Number	
Start Date	
Expiry date	

Name of Professional Organisation	
Membership Number	
Start Date	
Expiry date	



Applicants Declaration

I/we declare that as a member(s) of the Barnsley Accredited Landlord Scheme that I/we have:

- Have read and understood the contents of the Barnsley Accredited Landlord Scheme Information pack, and will abide by all the requirements of the Scheme
- Will not conduct our business in such a way which could bring the Scheme or the council into disrepute
- Will recognise the authority of the Councils nominated officer, if a dispute occurs
- Understand that accreditation status can be suspended or removed, following breaches of the requirements of the Scheme
- Will be committed to partnership working
- Will provide evidence of competent management practices
- Will participate in the Barnsley Accredited Tenant Scheme
- Will provide BMBC with details of my/our property portfolio, both owned or managed by me/us, indicating those which are licensable and non-licensable Houses in Multiple Occupation (HMOs), and those which I/we would like to consider registering for accreditation status, to be updated as applicable
- Agree to renew my/our membership of the Scheme every year, should we wish to continue our membership
- Will provide access to properties for Barnsley Council or its agents to carry out property inspections
- Will ensure that my/our properties and properties managed by me/us meet the relevant standards of the Scheme, or are working towards meeting the standards, as far as is reasonably practicable
- Will work towards ensuring that as far as is reasonable practicable that none of my/our properties have category 1 hazards, as defined by the Housing Health and Safety Rating System
- Will treat all tenants and potential tenants equally and fairly regardless of race, gender, disability, age, religion or sexual orientation



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- Will undertake 'Property Upgrade Plan' works in a reasonable timescale, as agreed with the nominated Officer
- Give BMBC consent to carry out the necessary checks to ensure I/we are suitable to become members of the Barnsley Accredited Landlords Scheme
- Agree for my/our accredited properties to be subject to random compliance inspections, and to accompany the nominated Officer on these inspections, where possible
- Will advise BMBC if a contract ends between myself/ourselves and a managing agent (accredited or otherwise) in respect of any of my/our properties
- Consent to the information submitted in this application to be stored on a BMBC database (BMBC adhere to Data Protection principles)

I am / we are happy for our contact details to be advertised publicly on the scheme website for promotional purposes (please tick): Yes No

I/we declare that to the best of my/our knowledge all the information provided in this application is correct. I/we understand that the provision of any false information will render this application and membership status null and void.

Signed	
Print Name	
Trading as/ Company (where applicable)	
Date	

Joint Applicant

Signed	
Print Name	
Trading as/ Company (where applicable)	
Date	



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Please supply a passport sized photo of yourself. This will be used on your membership card. You can either attach a photo to this application, or email a photo to accreditation@barnsley.gov.uk , clearly stating your name and contact details.

Attach your photo
here

Thank you for filling in this application form. You will be notified in writing regarding the outcome of your application.

If you own two or more properties to which the service applies you are liable for the Membership Charge The total charge is £50 per annum inclusive of £8.33 VAT.

You need to pay the fee before you application can be considered and it is non-refundable.

You can do this via the councils automated payment system on the Councils Website.

You Payment reference is. _____ / _____ / _____

The process is as follows:

Log onto www.barnsley.gov.uk

- Click **"Pay for It Button"**
- Click **"Invoices Starting M"**
- Select Payment Type **"Landlord Accreditation Services"** from drop down menu.
- Type in your payment reference above
- Type in the payment amount £50:00
- Follow through with Payment Instructions for debit / credit card

Please note payment by credit card will normally incur an additional 2.2% charge.

Please send your completed application to:

Barnsley Accredited Landlord Scheme

C/o Berneslai Homes

PO box 627

Barnsley

South Yorkshire S70 9FZ Telephone: 01226 775580

E-mail: accreditation@barnsley.gov.uk



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Equality Profile Questions:

Barnsley Council is committed to ensuring that all its services are delivered fairly. We are therefore asking you the following questions about yourself so that we can make sure that our services are delivered fairly to everyone. The information you provide will be kept confidential. These questions are voluntary, and should you prefer to not answer them, this will not affect your application.

Gender				
Are you?	<input type="checkbox"/>	Male	<input type="checkbox"/>	Female

Age					
What is your age in years ?					
		<input type="checkbox"/>	0-16	<input type="checkbox"/>	51-60
		<input type="checkbox"/>	16-20	<input type="checkbox"/>	61-70
		<input type="checkbox"/>	21-30	<input type="checkbox"/>	71-80
		<input type="checkbox"/>	31-40	<input type="checkbox"/>	80+
		<input type="checkbox"/>	41-50	<input type="checkbox"/>	

Disability				
Are you disabled?				
(A disabled person can be someone with a physical or sensory impairment, learning difficulties, mental health problems or a long term or progressive medical condition.)				
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	

Ethnicity				
What is your ethnic origin? (please tick one only)				
White	<input type="checkbox"/>	British		
	<input type="checkbox"/>	Irish		
	<input type="checkbox"/>	European		
	<input type="checkbox"/>	Gypsy / Traveller		
	<input type="checkbox"/>	Other - Please state:		
Mixed	<input type="checkbox"/>	White & Black Caribbean		
	<input type="checkbox"/>	White and Black African		
	<input type="checkbox"/>	White and Asian		
	<input type="checkbox"/>	Other - Please state:		
Black or Black British	<input type="checkbox"/>	Caribbean		
	<input type="checkbox"/>	African		
	<input type="checkbox"/>	Other - Please state:		



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Asian or Asian British	<input type="checkbox"/>	Indian	
	<input type="checkbox"/>	Pakistani	
	<input type="checkbox"/>	Bangladeshi	
	<input type="checkbox"/>	Other - Please state:	
Chinese or other ethnic group	<input type="checkbox"/>	Chinese	
	<input type="checkbox"/>	Other - Please state:	

Language and Disability Access Needs:

Services may wish to monitor the access needs of disabled customers. However services should make sure they know how to respond to any request made to this question. A suggested question they could use is:

Access Needs		
Do you have any of the following language or disability access needs?		
(Please tick all that apply)		
<input type="checkbox"/>	Information in large print	
<input type="checkbox"/>	Information in Easy Read (simple words and pictures)	
<input type="checkbox"/>	Information in Braille	
<input type="checkbox"/>	Sign language interpretation	
<input type="checkbox"/>	Information other format eg. audio tape, electronic etc	
	please state:	
<input type="checkbox"/>	Information in another language	
	please state:	

Where did you hear about the Barnsley Landlord Accreditation Scheme?

	Tick all that apply
Local Press	
Word of mouth	
Local Landlord Association	
Correspondence from BMBC	
BMBC Council Website	
Other BMBC department	
Other – Please state:	