

Short Term Let

Application for Grant, Renewal or Variation of Licence

- Please include all joint owners.
- Please read the attached notes at Section 14 and reference is made to the Council's Short-term Lets Guidance Notes and Standards for Shared Accommodation, available at: <https://www.dundee.gov.uk/service-area/neighbourhood-services/communities-safety-and-protection/licensing/dundee-city-councils-short-term-lets-licensing> where the detail of the relevant fees can be obtained.

<i>For Official Use</i>	
STL Licence Number:	
Date Received:	
Date Paid:	
Fee Paid:	
Receipt No:	
Date to Officers:	

Section 1 – Application and Licence Type

1. This application form can be used to apply for a **New Licence**, **Renewal** of an existing licence or a **Variation** of an existing licence. Please indicate which type of application you are making by checking the appropriate box below.

New Application <input type="checkbox"/>	Renewal of Existing Licence <input type="checkbox"/>	Variation of Existing/Pending Licence <input type="checkbox"/>
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Existing Licence Number (in the case of a Renewal or Variation)	DD
Existing Licence Expiry Date	

New application (where property has been used as a licensed STL previously)	<input type="checkbox"/>
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Previous Licence Number (Previously licensed STL)	DD
Previous Licence Expiry Date	
What date did you conclude the purchase?	

2. If a **Variation Application** please check each appropriate box

Change of ownership prior to a Licensing Committee (New and Pending Applications Only)	<input type="checkbox"/>
Change of day to day manager or agent	<input type="checkbox"/>
Change of occupancy	<input type="checkbox"/>
Change of physical layout	<input type="checkbox"/>
If the Variation is for a change to the physical layout of the property, please describe the change below	

Section 2 – Select the type of licence you require

 Secondary Letting

 Home Letting

 Home Sharing

 Home Sharing & Home Letting

3. If you do not own the property which is the subject of this application, do you have proof of permission from the owner(s)

 YES

 NO

 N/A

Section 3 – Premises Details

4. This section refers to the property for which the application is being made.

Name of Premises (if applicable)			
Address			Postcode
Flat No and/or Location		Unique Property Reference (if Known)	
Maximum number of occupants			Total number of bedrooms
Number of bedrooms to be occupied by one person			Number of bedrooms to be occupied by two or more people
Number of living rooms			Number of bathrooms
Number of separate toilets			Number of kitchens
Other rooms (specify)			
Will there be employees working in the premises?			YES NO

5. Please select the type of premises:

 Detached House

 Semi-detached House

 Terraced House

 Flat

 Unconventional Accommodation

6. From the following options, please select the description that best describes your short-term let:

 Self-catering

 B&B

 Guest House

 Home Letting

 Other form of Home Sharing

Section 4 – Applicant Details (Individual Persons)

4.1 Main Applicant (to be completed if an individual person)

Title	Surname	First Name	
Middle Name(s)	Maiden Name (if applicable)	Date of Birth	
Place of Birth		Male	Female
Home Address		Postcode	

Home Telephone Number	Mobile Telephone Number	Work Telephone Number	
Email Address			
Landlord Registration Number <i>(if applicable)</i>			
Will this applicant be carrying out day to day management of the STL?	YES	NO	

Address (history for last 5 years). Please provide your home address history for the last 5 years with no gaps or overlaps, starting with the most recent. Please confirm the dates you resided at these properties:	Postcode	Date from (month/year)	Date to (month/year)

4.2 Joint Owner(s) (to be completed if an individual person)

7. Please provide details for all Joint Owners, other than the main applicant above (all those listed on the Title Deeds). The address provided for an individual owner should be their permanent residential address. (If more than 2 joint owners, please use separate sheet at Section 15).

Number of Joint Owners (including Main Applicant)	
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Title	Surname	First Name	
Middle Name(s)	Maiden Name (if applicable)	Date of Birth	

Place of Birth		Male	Female
Home Address		Postcode	
Home Telephone Number	Mobile Telephone Number	Work Telephone Number	
Email Address			
Landlord Registration Number <i>(if applicable)</i>			
Will this applicant be carrying out day to day management of the STL?		YES	NO

Address (history for last 5 years). Please provide your home address history for the last 5 years with no gaps or overlaps, starting with the most recent. Please confirm the dates you resided at these properties:	Postcode	Date from (month/year)	Date to (month/year)

Title	Surname	First Name	
Middle Name(s)	Maiden Name (if applicable)	Date of Birth	
Place of Birth		Male	Female
Home Address		Postcode	
Home Telephone Number	Mobile Telephone Number	Work Telephone Number	
Email Address			
Landlord Registration Number <i>(if applicable)</i>			
Will this applicant be carrying out day to day management of the STL?		YES	NO

Address (history for last 5 years). Please provide your home address history for the last 5 years with no gaps or overlaps, starting with the most recent. Please confirm the dates you resided at these properties:	Postcode	Date from (month/year)	Date to (month/year)

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Section 5 – Applicant Details (Company/Charity/Trust/Partnership)

5.1 Please indicate whether the applicant is a Company, Charity, Trust or Partnership

Company

Charity

Trust

Partnership

Please indicate below which type of trust owns the property. (If you are unsure, please check with your solicitor to confirm the type of trust that you have). Please check the appropriate box.

Incorporated Trust (Trust and Trustees must be licensed). Please complete Section 6.2 and provide the details of all Trustees in Section 6.3.

Non Incorporated Trust (the named trust must be licensed). Please complete Section 6.2.

5.2 Please provide the details of the Company, Charity, Trust or Partnership

Full name of Company, Charity, Trust or Partnership (including postcode)	
Name of Secretary or responsible person	
Address of principal office	
Telephone number	
E-mail address	
Landlord Registration Number	

5.3 Please provide details of all Director(s), Trustees or Partners.

If more than four, please use separate sheet at Section 15

Title	Surname	First Name
Middle Name(s)	Maiden Name (if applicable)	Date of Birth
Place of Birth		Male Female

Home Address		Postcode	
Home Telephone Number	Mobile Telephone Number	Work Telephone Number	
Email Address			
Landlord Registration Number (if applicable)			
Will this applicant be carrying out day to day management of the STL?		YES	NO

Address (history for last 5 years). Please provide your home address history for the last 5 years with no gaps or overlaps, starting with the most recent. Please confirm the dates you resided at these properties:	Postcode	Date from (month/year)	Date to (month/year)

Title	Surname	First Name	
Middle Name(s)	Maiden Name (if applicable)	Date of Birth	
Place of Birth		Male	Female
Home Address		Postcode	
Home Telephone Number	Mobile Telephone Number	Work Telephone Number	
Email Address			
Landlord Registration Number (if applicable)			
Will this applicant be carrying out day to day management of the STL?		YES	NO

Address (history for last 5 years). Please provide your home address history for the last 5 years with no gaps or overlaps, starting with the most recent. Please confirm the dates you resided at these properties:	Postcode	Date from (month/year)	Date to (month/year)

Title	Surname	First Name	
Middle Name(s)	Maiden Name (if applicable)	Date of Birth	
Place of Birth		Male	Female
Home Address		Postcode	
Home Telephone Number	Mobile Telephone Number	Work Telephone Number	
Email Address			
Landlord Registration Number (if applicable)			
Will this applicant be carrying out day to day management of the STL?			YES NO

Address (history for last 5 years). Please provide your home address history for the last 5 years with no gaps or overlaps, starting with the most recent. Please confirm the dates you resided at these properties:	Postcode	Date from (month/year)	Date to (month/year)

Title	Surname	First Name	
Middle Name(s)	Maiden Name (if applicable)	Date of Birth	
Place of Birth		Male	Female
Home Address		Postcode	
Home Telephone Number	Mobile Telephone Number	Work Telephone Number	
Email Address			
Landlord Registration Number (if applicable)			
Will this applicant be carrying out day to day management of the STL?			YES NO

Address (history for last 5 years). Please provide your home address history for the last 5 years with no gaps or overlaps, starting with the most recent. Please confirm the dates you resided at these properties:	Postcode	Date from (month/year)	Date to (month/year)

Section 6 – Day to Day Management

8. This section identifies who will be responsible for the day to day management of the licensed property. Please ensure questions 6.1 and 6.2 are completed where a company, including a named individual within the company, is carrying out the day to day management. Alternatively, Questions 6.3 or 6.4 should be completed where the day to day manager is an applicant or other individual.

6.1 Is the day to day Manager an organisation or company?

YES **NO**

9. If the answer to the above question is YES, please provide the details of the company and the names of ALL the Directors or partners below. If the answer is NO, please go to question 6.3.

Corporate entity name			
Registered or principal office address		Postcode	
Limited company number (if applicable)			

6.2 Please provide the details of all Directors or Partners where an organisation or company is carrying out the day to day management

10. If more than three, please use separate sheet at Section 15

NOTE: The first named individual below will be considered as the nominated person for the organisation or company. Any change to the nominated person will require a Variation to the Licence and the appropriate fee.

Title	Surname	First Name	
Middle Name(s)	Maiden Name (if applicable)	Date of Birth	
Place of Birth		Male	Female
Home Address		Postcode	

Home Telephone Number	Mobile Telephone Number	Work Telephone Number
Email Address		
Landlord Registration Number		

Address (history for last 5 years). Please provide your home address history for the last 5 years with no gaps or overlaps, starting with the most recent. Please confirm the dates you resided at these properties:	Postcode	Date from (month/year)	Date to (month/year)

Title	Surname	First Name	
Middle Name(s)	Maiden Name (if applicable)	Date of Birth	
Place of Birth		Male	Female
Home Address		Postcode	
Home Telephone Number	Mobile Telephone Number	Work Telephone Number	
Email Address			
Landlord Registration Number			

Address (history for last 5 years). Please provide your home address history for the last 5 years with no gaps or overlaps, starting with the most recent. Please confirm the dates you resided at these properties:	Postcode	Date from (month/year)	Date to (month/year)

Title	Surname	First Name
Middle Name(s)	Maiden Name (if applicable)	Date of Birth

Place of Birth		Male	Female
Home Address		Postcode	
Home Telephone Number	Mobile Telephone Number	Work Telephone Number	
Email Address			
Landlord Registration Number			

Address (history for last 5 years). Please provide your home address history for the last 5 years with no gaps or overlaps, starting with the most recent. Please confirm the dates you resided at these properties:	Postcode	Date from (month/year)	Date to (month/year)

6.3 Will any of the applicants for this licence be carrying out the day to day management?

YES NO

11. If the answer to the above question is YES, please provide the name of the applicant below. (The named individual below must appear in Section 4 or Section 5). If the answer is NO, please go to 6.4.

Title	Surname	First Name	
Middle Name(s)	Maiden Name (if applicable)	Date of Birth	
Place of Birth		Male	Female
Home Address		Postcode	
Home Telephone Number	Mobile Telephone Number	Work Telephone Number	
Email Address			
Landlord Registration Number			

6.4 If the day to day Manager is an individual other than an applicant, named in Section 4 or Section 5, please complete the details below

Title		Surname		First Name	
Middle Name(s)		Maiden Name (if applicable)		Date of Birth	
Place of Birth				Male	Female
Home Address				Postcode	
Home Telephone Number		Mobile Telephone Number		Work Telephone Number	
Email Address					
Landlord Registration Number <i>(if applicable)</i>					

Address (history for last 5 years). Please provide your home address history for the last 5 years with no gaps or overlaps, starting with the most recent. Please confirm the dates you resided at these properties:	Postcode	Date from (month/year)	Date to (month/year)

Section 7 – Appointed Agent

12. An Agent is an individual, organisation or company appointed to submit and process an application on behalf of the owners of the property but who will not be acting as day to day managers once a licence has been granted. **This section need not be completed if the applicant(s) or appointed day to day manager are submitting the application.**

Name of Organisation or Company (if applicable)			
Name of responsible person or agent			
Address		Postcode	
Telephone number			

Mobile number	
E-mail address	

Section 8 – Contacts

13. The contact details below can be the applicant, day to day manager or agent as required.

8.1 Contact for access and queries during the application process

Name of Contact Person			
Address		Postcode	
Telephone number			
Mobile number			
E-mail address			

8.2 Contact for access and queries during the life of the licence

14. Applicant or Day to Day Manager's representative

Name of Contact Person			
Address		Postcode	
Telephone number			
Mobile number			
E-mail address			

Section 9 – Details of Convictions, Fixed Penalty Notices and Revoked or Refused licences

Has any person listed in Sections 4, 5, 6 or 8 been convicted of any offences or been issued with any fixed penalty notices?	YES	NO
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15. If the answer to the question above is YES, please provide the details below

NOTE: PLEASE INCLUDE DETAILS OF ANY UNSPENT CONVICTIONS IN THE TABLE BELOW

Name	Date	Court	Crime/Offence	Penalty

Have any of the owners of this property been refused a similar licence in the last 2 years?	YES	NO
If the answer to the question above is YES, please give details:		

Section 10 – Checklist of Required Enclosures and Actions First and New Application

16. An application will only be deemed competent where all necessary information is submitted together with the relevant fee.

This checklist must be completed as part of your application and the relevant documents enclosed.

Document	Guidance Note	Comment	Enclosed
Plan of the property	5(a)		
Fire Safety Checklist	5(h) and 32 to 37		
Copy of Property Insurance	52		
Copy of Public Liability Insurance	52		
Current NICEIC or SELECT Electrical Installation Condition Report	5(c) and 42 to 45		
Current Portable Appliance Test (PAT) Certificate	5(c) and 42 to 45		
Gas Safety Certificate (if applicable)	5(d) and 46 to 48		

Legionella Risk Assessment	5(f)		
Planning permission Reference Number (for premises within a control area or where requested by the licensing authority)	13 & 15		
Application Fee	4		
Public Notice displayed	4(a)		
Energy Performance Certificate (EPC)	26		
Proof of consent from owner (if applicable)	1(e)		
Evidence of operation as a short-term let on or before 1 October 2022 (for existing hosts applying during transitional period)	5(g)		

The guidance notes referred to above and below form part of Dundee City Council's "Guidance Notes and Standards for Shared Accommodation" which is available from the Private Sector Services Unit, 5 City Square, Dundee, DD1 3BA (reception at 3 City Square) or downloadable from the website at: <https://www.dundee.gov.uk/service-area/neighbourhood-services/communities-safety-and-protection/licensing/dundee-city-councils-short-term-lets-licensing>

Section 11 – Checklist of Required Enclosures and Actions Renewal Application

Document	Guidance Note	Comment	Enclosed
Fire safety Checklist	5(h) and 32 to 37		
Copy of Property Insurance	52	Current certificate and previous two years certification required.	
Copy of Public Liability Insurance	52	Current certificate and previous two years certification required.	
Current NICEIC or SELECT Electrical Installation Condition Report	5(c) and 42 to 45	Certification to be current and cover the preceding period of licence.	
Current Portable Appliance Test (PAT) Certificate	5(c) and 42 to 45	Current certificate and previous two years certification required.	
Gas Safety Certificate (if applicable)	5(d) and 46 to 48	Current certificate and previous two years certification required.	
Application Fee	4		
Public Notice displayed	4(a)		
Energy Performance Certificate (EPC)	26		

Section 12 – Checklist of Required Enclosures and Actions Variation Application

Document	Guidance Note	Change of ownership prior to Licensing	Change of day to day manager	Change of Occupancy	Physical change to property	Enclosed

		Committee (New Application only)				
Plan of the property	5(a)			Required	Required	
Fire Safety Checklist	5(h) and 32 to 37	Required	Required	Required	Required	
Copy of Property Insurance	52	Required				
Copy of Liability Insurance	52	Required				
Planning Change of Use Consent (if applicable)	15			Required	Required	
Building Standards Warrant and Completion Certificate (if applicable)	14				Required	
Energy Performance Certificate (EPC)	26				Required	
Application Fee	4	Required	Required	Required	Required	

Section 13 – Applicants Declaration

I have: Please click to confirm	
Identified the owners and those involved in the day-to-day management of my premises	
Ensured that to the best of my knowledge all those named on my application are fit and proper persons	
Prepared information that will be available to guests at the premises including: (a) a certified copy of the licence and the licence conditions, (b) fire, gas and electrical safety information, (c) details of how to summon the assistance of emergency services, (d) a copy of the gas safety report, (e) a copy of the Electrical Installation Condition Report, and (f) a copy of the Portable Appliance Testing Report.	
Applied for planning permission (if required).	
Noted the requirement to display my licence number and EPC rating on listings for my premises	
Checked if any additional licence conditions apply to me / my premises	
Proof that furniture and furnishings/the furniture and furnishings guests have access to comply with fire safety regulations	
Read and understood the mandatory conditions that will apply to my licence	
Read and understood the additional conditions that will apply to my licence	

My premises – please click to confirm (or leave blank if N/A)	
Meets current statutory guidance for provision of fire, smoke and heat detection	
Meets statutory guidance for carbon monoxide alarms	
Meets the required regulations for private water supplies (for premises with a private water supply i.e not provided by Scottish Water)	

Meets obligations with regard to the Tolerable and Repairing standard (applicable to dwellinghouses)	
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Dundee City 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.

I DECLARE THAT THE PARTICULARS GIVEN BY ME ON THIS FORM ARE CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I HAVE READ THE GUIDANCE NOTES REFERRED TO AND I UNDERSTAND THE MANDATORY CONDITIONS THAT APPLY TO SHORT-TERM LETS. I FURTHER ACKNOWLEDGE THAT I UNDERSTAND IT IS A CRIMINAL OFFENCE TO OPERATE AN STL PRIOR TO A LICENCE BEING GRANTED.

I WILL COMPLY WITH THE REQUIREMENT TO DISPLAY A SITE NOTICE IN ACCORDANCE WITH PARAGRAPH 2 OF SCHEDULE 1 OF THE COVIC GOVERNMENT (SCOTLAND) ACT 1982

Signature of Applicant day to day manager or Agent* (*delete as necessary)	
Date	

The individual signing this application should be an applicant or alternatively the agent or day to day manager identified in this application.

Name (BLOCK CAPITALS)			
Position (if signing on behalf of applicant)			
Address		Postcode	

Section 14 – Notes

This application should be lodged electronically, by email to licensing.board@dundeecity.gov.uk together with the supporting documents as attachments to the email. Payment along with all required documents must be received before the application is deemed to be competent. The fee is non-refundable other than where an application is withdrawn before being determined or refused in which case a partial refund will be made (refer to Guidance Notes and Standards for Accommodation, Note 4).

1. In terms of the Civic Government (Scotland) Act 1982 (Licensing of Short-term Lets) Order 2022, a Notice in the prescribed form must be prominently displayed at or as near to the property as possible so that it can be conveniently read from the public footpath, for a period of 21 days from the date the application is lodged with the local authority. *(Copy Notice enclosed)*.
2. The Certificate of Compliance, forming part of this application, must be completed and submitted as an attachment to an email addressed to licensing.board@dundeecity.gov.uk The certificate should be submitted after the expiry of the 21 day period (see note 2 above).
3. Refer to “Short-term Lets Guidance Notes and Standards for Accommodation” for further information.
4. Details of the fee scales are provided in the guidance notes (refer to Guidance Notes and Standards for Accommodation, Note 4).
5. Payment of fees can be by Cheque, Card or BACS transfer. Cheques should be made payable to Dundee City Council and posted to **Electoral Services & Licensing Officer, Support Services, 21 City Square, Dundee, DD1 3BY** with the details of the STL address on the back of the cheque. If making payment by card or BACS transfer, please contact licensing.board@dundeecity.gov.uk for details when submitting the application.
6. Anyone who can require a Licensing Authority to give reasons for a licensing decision (both objectors and applicants) can appeal to the Sheriff against it by summary application. The appeal must be lodged within 28 days. The Sheriff can uphold an appeal only if the authority erred in law, based their decision on an incorrect material fact, acted contrary to natural justice, or exercised their decision in an unreasonable manner.

If you are in a position where you are considering an appeal to the Sheriff you should consult a Solicitor or Citizens Advice Bureau for further information.

Enquiries should be made to the **Senior Electoral Services & Licensing Officer, Support Services, 21 City Square, Dundee, DD1 3BY**. For further information on **Appeals, call (01382) 434403**.

Should you require any further assistance in completing this application, please contact: **Dundee City Council’s STL Team on 01382 436842, visit or write to the Private Sector Services Unit (STL Team), 5 City Square, Dundee, DD1 3BA**.

Section 15 – Additional Applicants

Please indicate relevant section

Section 5	
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Section 6	
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Section 7	
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Title	Surname	First Name
Middle Name(s)	Maiden Name (if applicable)	Date of Birth

Place of Birth		Male	Female
Home Address		Postcode	
Home Telephone Number	Mobile Telephone Number	Work Telephone Number	
Email Address			
Landlord Registration Number			
Will this applicant be carrying out day to day management of the STL?		YES	NO

Address (history for last 5 years). Please provide your home address history for the last 5 years with no gaps or overlaps, starting with the most recent. Please confirm the dates you resided at these properties:	Postcode	Date from (month/year)	Date to (month/year)

Title	Surname	First Name	
Middle Name(s)	Maiden Name (if applicable)	Date of Birth	
Place of Birth		Male	Female
Home Address		Postcode	
Home Telephone Number	Mobile Telephone Number	Work Telephone Number	
Email Address			
Landlord Registration Number			
Will this applicant be carrying out day to day management of the STL?		YES	NO

Address (history for last 5 years) Please provide your home address history for the last 5 years with no gaps or overlaps, starting with the most recent.	Postcode	Date from (month/year)	Date to (month/year)
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Please confirm the dates you resided at these properties:			

Section 16 – Privacy Notice

The information you submit on this application form will be processed by Dundee City Council, City Square, Dundee, DD1 3BY. You can contact us on 01382 434000 or for data protection issues by email at infogov@dundeecity.gov.uk. This is also the email address to contact the council’s Data Protection Officer, Ian Smail.

The Civic Government (Scotland) Act 1982 (Licensing of Short-term Lets) Order 2022 requires that hosts/owners and operators must be licensed and be assessed as fit and proper, where they use a property as a Short-term Let.

The information hosts/owners and their operators or agents provide is prescribed by legislation and it is a requirement to provide this information if you wish to operate a Short-term Let.

Failure to provide the required information may mean that we are unable to determine compliance with relevant legislation and therefore issue a licence, in which case the individuals or business may not comply with relevant legislation and may be operating illegally.

Persons are under an obligation to provide assistance and information when officers are exercising power for which they are duly authorised. An offence is committed if this requirement is breached. This does not require a person to answer any questions or give information which may incriminate them.

Information held will have been provided by the host/owner and or their operator/agent, either electronically or in writing and transferred to our data management systems. We may add notes to a record as part of our administration processes.

We will use your details to process your STL Licence application. The information provided will be shared with other council departments, Elected Members, Police Scotland and Scottish Fire & Rescue Service. It may also be shared where required by law.

Your details will be accessed by council staff who need to do so in order to provide this service. The data (with the exception of details of any convictions) will also be kept in a register which is open to public inspection. The information may be shared with other Government Agencies such as the Department for Work and Pensions, HMRC and third party organisations such as Sheriff Officers, Solicitors and Credit Reference Agencies.

In general, the Council does not transfer personal data outside the UK and on the rare occasions when it does so we will ensure you are alerted to this fact. Given the purpose and limited nature of the personal information held, the Council will not transfer your data outside the UK.

Hosts and operators are required to renew their licence every three years or shorter period as granted by the Licensing Committee. Reminders are issued by email to the host/owner or operator and any appointed agent. We may also contact you and your agent to advise of legislative changes or changes in local policy.

The council maintains a records retention and disposal schedule which sets out how long we hold different types of information for. The Council will hold your information for 3 years, from the date the licence is surrendered, refused or revoked.

For this purpose you have the right to be forgotten under certain circumstances and can access this right at any time. Should you wish to access this right, please contact the Data Protection Officer.

You have the right to request access to and rectification or erasure of personal data held by the council and can request that we restrict processing or object to processing.

We do not use profiling or automated decision-making for this purpose.

If you are unhappy with the way we have processed your personal data you have the right to complain to the Information Commissioner's Office:

Information Commissioner's Office

Wycliffe House

Water Lane

Wilmslow

Cheshire SK9 5AF

Helpline: 0303 123 1113

Website: <https://ico.org.uk/>

but you should raise the issue with our Data Protection Officer first.

NOTICE

**Short-term Let
Application for Licence**

NOTICE IS HEREBY GIVEN that application has been made on to Dundee City Council for Licence of a Short-term Let in respect of the premises.

at

by Name

Address

Postcode

Type of Licence

Secondary Letting

Home Sharing

Home Letting

Home Sharing & Home Letting

Day to Day Manager/Agents details (if different from applicant)

Name

Address

Postcode

Any objections or representations in relation to the application should be made to the Head of Democratic and Legal Services, Dundee City Council, 21 City Square, Dundee, DD1 3BY or electronically to licensing.board@dundee.gov.uk generally within **28 days** of the above mentioned date. Objections and representations should be made in accordance with the following provisions, namely:

1. Any objection or representation relating to an application for the renewal of a licence shall be entertained by the Licensing Authority if, but only if, the objection or representation:
 - a. is in writing;
 - b. specifies the grounds of the objection or, as the case may be, the nature of the representation;
 - c. specified the name and address of the person making it;
 - d. is signed by him or on his behalf;
 - e. was made to them within 28 days of whichever is the later or, as the case may be, latest of the following dates:
 - i. where public notice of the application was given in a newspaper, the date when it was first so given;
 - ii. where Dundee City Council have required the applicant to display the Notice again from a specified date; that date;
 - iii. in any other case, the date when the application was made to them.
2. Notwithstanding (1)(e) above, it shall be competent for a Licensing Authority to entertain an objection or representation received by them before they may take a final decision upon the application to which it relates if they are satisfied that there is sufficient reason why it was not made in the time required.
3. An objection or representation shall be made for the purposes of (1) above if it is delivered by hand within the time there specified to the Licensing Authority or posted (by registered or recorded post) so that in the normal course of post it might be expected to be delivered to them within that time.
4. Dundee City Council shall send a copy of the objection or representation to the applicant.

CERTIFICATE OF COMPLIANCE

Short-term Let -

Application for Licence



I being the applicant/agent for a Licence for a

Short-term Let, hereby certify that a NOTICE has been posted at or near the

premises at

from

to

containing such information as is required by paragraph Paragraph 2 of Schedule 1 of the Civic Government (Scotland) Act 1982.

*Where the said Notice was removed, obscured or defaced during the above mentioned period, I took reasonable steps for its protection and replacement as follows:

(give details and circumstances)

I have removed the NOTICE following it being displayed for 21 days

Signature

Date

**delete if not applicable*

This Certificate must be returned to the Senior Electoral Services & Licensing Officer, Support Services, 21 City Square, Dundee, DD1 3BY, only after the 21 day notice period is over or electronically to licensing.board@dundee.gov.uk . If calling in person please visit 21 City Square.