



# Salford City Council

## Landlord Accreditation Scheme

Ref:

### Application for membership

**This form can be completed for single or joint membership:**

**Single Membership** – A single named landlord on the membership; when only a single person owns the properties listed.

**Joint Membership** – More than one name on the membership; when more than one person owns the properties listed.

Type of membership being applied for: **Single**  **Joint**

#### Landlord details

Title:	Surname:	First names:	
Business name:			
Address:			
		Postcode:	
Tel:	Fax:	Mobile:	
Email:		Website:	

If you are applying for a joint membership, please list the names of all the other persons to be included on the membership, who jointly own the properties listed on the property portfolio. Where a Joint Membership is applied for all future information and contact will be made using the Landlord Details given above.

#### Joint owner details (1)

Title:	Surname:	First names:	
Address:			
		Postcode:	
Tel:	Fax:	Mobile:	
Email:			

#### Joint owner details (2)

Title:	Surname:	First names:	
Address:			
		Postcode:	

#### Joint owner details (3)

Title:	Surname:	First names:	
Address:			
		Postcode:	

#### Details of any managing agent

Company name:			
Specific contact name:			
Address:			
		Postcode:	
Tel:	Fax:	Mobile:	
Email:		Website:	

## Tenancy management

Please indicate which tenancy deposit scheme you use:

The Deposit Protection Service (custodial scheme)

The Tenancy Deposit Scheme (insurance scheme)

Mydeposits (insurance-based scheme)

I do not take deposits

Are you a member of a professional Landlords Organisation? Yes  No

If yes which one \_\_\_\_\_

Please indicate which type of tenancy agreement used for lettings

Landlord Accreditation Scheme agreement

Landlord Organisation agreement - please state

Other (please provide a copy)

### Furniture safety:

Any furniture supplied in the property (or properties) under the terms of the tenancy agreement(s), must meet the Furniture and Furnishings (Fire) (Safety) Regulations 1998.

### Fire Safety:

For single household occupation a minimum of one 10 year battery life smoke detector per floor is required however hardwired smoke detectors with battery back up are recommended. HMO\* properties will require higher levels of fire protection (contact for details).

### Document checklist:

Listed below are the documents required to be submitted with this application form for each property listed. For additional requirements such as fire safety, please refer to the Code of Standards.

#### Tenancy Agreement:

Please enclose a sample copy of the tenancy agreement or, acknowledgement that you are/will be using one of the above listed Tenancy Agreements for the property (or properties) to be accredited. (Tenancy Agreements supplied will be checked for compliance with housing legislation and that minimum contractual requirements are included, which address issues including anti-social behaviour, neighbour nuisance, repair and maintenance)

#### Landlord Annual Gas Safety Certificate:

Please enclose a valid annual gas safety certificate provided by a Gas Safe registered engineer for each property listed.

#### Periodic Electrical Report:

Please enclose a valid Periodic Electrical Inspection Report provided by an approved contractor (such as NICEIC) for each property listed.

**Energy Performance Certificate (EPC):** Please attach a valid EPC for each property listed where the tenancy came into effect after 1 October 2008.

## Property details

### What is a HMO?\*

HMO stands for House in Multiple Occupation, which means a building, or part of a building, such as a flat, that:

- is occupied by more than one household who shares an amenity, such as a bathroom, toilet or cooking facilities
- is occupied by more than one household in a converted building – but not entirely self-contained flats (whether or not some amenities are shared)
- is converted self contained flats, but does not meet the requirements of the 1991 Building Regulation.

A household is:

- members of the same family (including relatives, couples and same sex couples)
- other relationships, such as fostering, carers and domestic staff.

Please contact us for further guidance on determining whether your property is an HMO.

Please complete the following details about all of the property(ies) you let in Salford. Attach additional sheets if required.

Property details				
Address:				
				Postcode:
<b>Property type:</b>	Mid terrace <input type="checkbox"/>	End terrace <input type="checkbox"/>	Semi-detached <input type="checkbox"/>	Detached <input type="checkbox"/> Self contained flat <input type="checkbox"/>
Number of storeys (including basements and attics):				
<b>Type of let:</b>	Single	Family	HMO*	
Gas installation - Yes <input type="checkbox"/> No <input type="checkbox"/>	Number of lettings at property			Age

Property details				
Address:				
				Postcode:
<b>Property type:</b>	Mid terrace <input type="checkbox"/>	End terrace <input type="checkbox"/>	Semi-detached <input type="checkbox"/>	Detached <input type="checkbox"/> Self contained flat <input type="checkbox"/>
Number of storeys (including basements and attics):				
<b>Type of let:</b>	Single	Family	HMO*	
Gas installation - Yes <input type="checkbox"/> No <input type="checkbox"/>	Number of lettings at property			Age

Property details				
Address:				
				Postcode:
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Number of storeys (including basements and attics):				
<b>Type of let:</b>	Single	Family	HMO*	
Gas installation - Yes <input type="checkbox"/> No <input type="checkbox"/>	Number of lettings at property			Age

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Number of storeys (including basements and attics):				
<b>Type of let:</b>	Single	Family	HMO*	
Gas installation - Yes <input type="checkbox"/> No <input type="checkbox"/>	Number of lettings at property			Age

Property details				
Address:				
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<b>Property type:</b>	Mid terrace <input type="checkbox"/>	End terrace <input type="checkbox"/>	Semi-detached <input type="checkbox"/>	Detached <input type="checkbox"/> Self contained flat <input type="checkbox"/>
Number of storeys (including basements and attics):				
<b>Type of let:</b>	Single	Family	HMO*	
Gas installation - Yes <input type="checkbox"/> No <input type="checkbox"/>	Number of lettings at property			Age

**NB:** failure to list all properties that you rent in Salford may result in termination of your application or any subsequent accreditation. The Landlord Accreditation team will arrange to carry out sample property inspections as part of the application process.

\*What is a HMO property - see page 2.

## Fit and proper assessment

Have you, the property owner, been convicted of any offence involving:	Fraud or dishonesty	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Violence	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Drugs offences	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Offences under Schedule 3 of the Sexual Offenders Act 2003	Yes <input type="checkbox"/> No <input type="checkbox"/>

**Sentences of imprisonment exceeding 30 months can never be treated as spent and must be disclosed**

however long ago they were imposed. Please give details of unspent convictions. You may be contacted to provide further information in confidence.

Have any joint owners who are listed on this application been convicted of any of the above offences? Yes  No

If you have answered Yes you will be contacted to provide further information in confidence.

Have you or any joint owners listed on this application been found by a tribunal or court to have practised unlawful discrimination on the grounds of sex, colour, race, ethnic or national origins or disability in or in connection with the carrying out of any business? Yes  No

If you have answered Yes you will be contacted to provide further information in confidence.

Have you or any joint owners listed on this application any contravention (or non-compliance of) any enactment relating to planning, housing, public health, environmental health or landlord and tenant law, which led to civil or criminal proceedings resulting in a judgement being made against you? Yes  No

If you have answered Yes you will be contacted to provide further information in confidence.

**Have you or any joint owners of the property listed on this application ever:**

Failed to comply with a Housing Act notice (requiring works etc) served by the local authority? Yes  No

Had works in default been carried out by the local authority on a property? Yes  No

Acted in contravention of any relevant approved code of practice (i.e. a code of practice Issued by the government relating to the management of a privately rented property)? Yes  No

Been refused a licence for a privately rented property? Yes  No

Breached the conditions of a licensed property? Yes  No

Been subject to a Control Order (Housing Act 1985, s379)? Yes  No

Been subject to an Interim Management Order? Yes  No

Been subject to a Final Management Order? Yes  No

If you have answered Yes you will be contacted to provide further information in confidence.

## Public Register

Please note that once accredited your membership number and name will be added to the Accredited Landlord List available on the council's website. All information published on a website may be accessed worldwide by the public. Address and contact details will not be disclosed.

## Compliance with the scheme

The Landlord Accreditation team will carry out routine, ad hoc property assessments to ensure compliance with the Code of Standards. Membership is for a period of five years.

## Declaration

I declare that I have read and understood Salford City Council's Code of Standards for membership of the Landlord Accreditation Scheme (LAS). All properties under my ownership, which are let to tenants whilst I hold membership of the Landlord Accreditation Scheme will meet the terms and conditions of the Code of Standards, subject to any transitional arrangements agreed by Salford City Council.

I further declare that my conduct will be in accord with the provisions of the Code of Standards and recognise that failure to comply will lead to disciplinary procedures. I acknowledge Salford City Council's rights over the use of the LAS and council's logo.

I confirm that I have sought consent from joint owner/s named on this application and been given authority to submit this application and be the main contact for all dealing concerning the application.

I confirm that all the information given in this application form is true and accurate at the time of application, to the best of my knowledge.

Signed:

Date:

Please return the completed and signed application form and documentation to:

**Landlord Accreditation Scheme (LAS)**

**Sustainable Regeneration**

Civic Centre  
Chorley Road  
Swinton  
Salford  
M27 5BY

**Landlord Accreditation team  
Sustainable Regeneration**

Civic Centre  
Chorley Road  
Swinton  
Salford  
M27 5BY

**Telephone: 0161 793 3270**

**email: landlord.accreditation@salford.gov.uk**

**www.salford.gov.uk/landlord-accreditation**

This document can be provided in large print, audio, electronic and Braille formats. Please contact the Landlord Accreditation Team at Salford City Council, telephone number 0161 793 3270

إذا احتجت للمساعدة في فهم هذه النشرة , برجاء الاتصال بفريق المساواة في مجلس سالفورد,  
هاتف رقم 0161 793 3270

এই পুস্তিকাটি বোঝার জন্য যদি আপনার সাহায্যের প্রয়োজন হয় তাহলে সেলফোর্টে কাউন্সিলের ইকুয়ালিটি টিমের সঙ্গে যোগাযোগ করুন টেলিফোন নম্বর 0161 793 3270

如果您有關於本宣傳頁的任何問題，請聯繫 Salford 理事會的 Equalities 團隊，電話號碼為 0161 793 3270

ਜੇ ਆ ਥੀਓਰੇਟ ਸਮਝਣਾ ਮੋਟ ਤਮਨੇ ਮਦਦਨੀ ਜ਼ਰੂਰਤ ਭੋਯ, ਕ੍ਰਪੋ ਕਰੀ ਓਕਵਾਇਟੀਜ਼ ਟੀਮ ਸਕੋਰਡ ਡਾਇਰੈਕਸ਼ਨੋਂ ਟੈਲਿਫੋਨ ਨੰਬਰ 0161 793 3270 ਪਰ ਸੰਪਰਕ ਕਰੋ।

ਜੇ ਤੁਹਾਨੂੰ ਇਸ ਲੀਫਲੈਟ ਨੂੰ ਸਮਝਣ ਵਿਚ ਸਹਾਇਤਾ ਦੀ ਜ਼ਰੂਰਤ ਹੈ, ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਲਫੋਰਡ ਕੌਂਸਲ (Salford council) ਵਿਚ ਇਕੁਅਲਿਟੀ ਟੀਮ (Equalities Team) ਨਾਲ ਫੋਨ ਨੰਬਰ 0161 793 3270 'ਤੇ ਸੰਪਰਕ ਕਰੋ।

اگر آپ کو اس لیف لیٹ کے سمجھنے میں مدد کی ضرورت ہو تو براہ کرم اکیٹیویٹیز ٹیم کو سالفورد کونسل سے اس ٹیلی فون نمبر 0161 793 3270 پر رابطہ قائم کر سکتے ہیں۔

Ce prospectus peut vous être fourni en gros caractères, sur cassette, et en format électronique et en braille. Si vous avez besoin d'aide pour avoir une traduction de ce prospectus, veuillez contacter l' « Equalities Team » à Salford City Council (la Mairie de Salford) au 0161 793 3270.

Tento leták je možné získat ve zvukové podobě, elektronické podobě, vytištěný větším fontem písma a v Brailleovu písmu pro nevidomé.

Pokud potřebujete pomoc přeložit tento leták, prosíme, spojte se s 'The Equalities Team' na Salfordském městském úřadě (Salford City Council) na 0161 793 3270.

Tę broszurkę możemy dostarczyć w wydaniu dużym drukiem, w wydaniu audio, w wydaniu elektronicznym i w wydaniu w języku Braille'a.

Jeżeli potrzebujesz pomocy, aby przetłumaczyć tę broszurkę, proszę o skontaktowanie się z Equalities Team w Salford City Council 0161 793 3270.

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**Salford City Council**