



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

**APPLICATION FOR SHORT-TERM LET LICENCE**

**Type of Application** (please indicate the type of application you wish to apply for by ticking the appropriate box and providing any relevant information in the boxes below)

- New / First Application for Short-Term Let, property not let prior to 01/10/2022
- New / First Application for Existing Short-Term Let, previously let prior to 01/10/2022 \* (please note that evidence may be requested\*)
- Renewal Application

<b>Please complete in block capitals</b>		
<b>Section 1 – Premises Details –</b>		
It is important that the property address that you seek a Licence for is exactly the same address that appears on all of the appropriate supporting documents and certificates.		
<i>(Separate Form required for each property. If multiple rooms in the same property please use same form)</i>		
1(a)	<b>Name of Premises and/or House/Flat Number (if applicable)</b>	
(b)	<b>Street and Post Town Address</b>	
(c)	<b>Postcode</b>	

**Section 2 - Applicant Details –**

An application to a local authority for a Short-Term Let Licence should be made by the host(s) or operator(s) of the short-term let. Should the licence be granted the person(s) named in sections 2a 2b or 2c will be the named licence holder(s) and will appear on the public register.

**Complete sections 2a or 2b –** If you applying as an individual and/or joint applicants (Individual Go to 2a /joint applicants – Go to 2a & 2b)

**Complete section 2c –** If you are applying as corporate entity (e.g. company, partnership, trust or charity)

2(a)	<b>To be completed if a natural person</b>	First Name(s)	Surname
	Full Name of Applicant		
	Former Name(s)		
	Date of Birth and Place of Birth		
	Home Address, including postcode		
	Contact Telephone Number & E-mail Address	Home	
		Business	
		Mobile	
		E-mail	
2(b)	<b>Joint Applicant's details</b>	First Name(s)	Surname
	Full Name of Applicant		
	Former Name(s)		

	Date of Birth and Place of Birth	
	Home Address, including postcode	
	Contact Telephone Number & E-mail Address	Home Business Mobile E-mail

2(c)	<b>To be completed if not a natural person</b> Full Name of Company or Partnership  Company No. / Charity No. ( <i>if applicable</i> )	
	Address of Registered Principal Office	
	Contact Telephone Number & E-mail Address	Business  Mobile  E-mail

Full name, address, date of birth and place of birth of all Directors, Company Secretary, Partners or other persons responsible for its management ( <i>continue on a separate sheet if necessary</i> )		
Name	Personal Address & Postcode	Date and Place of Birth

**Section 3 – Owners Details –**  
 Details of any joint owner(s) of the premises or persons (other than the applicant) who will derive financial benefit from the operation of the premises.  
 Full Name, Address, Place and Date of Birth for each (*continue on a separate sheet if necessary*)

Name	Personal Address & Postcode	Date and Place of Birth

<b>Section 4 – Agents Details –</b>	
<b>Has an agent been appointed for the application process only</b>	<b>Yes / No</b>
Name of Person and / or organisation (if applicable)	
Full Name of individual responsible for day to day management	
Date of Birth and Place of Birth	
Contact Address	
Contact Telephone Number & E-mail Address	Business  Mobile  E-mail
Is this main correspondence address	Yes / No
Is this the main contact for access to the property	Yes / No
Will this individual carry out day to day management of the short-term let?	Yes / No

Please provide details of all agents. If the agent is a body please provide details of all director(s), trustees or other persons concerned in the management of the body (if more than 3, please copy the following page and complete as necessary) Please Note: The name and address of each of the directors, partners and/or other persons concerned in the management of the body must be provided		
<b>Name</b>	<b>Personal Address &amp; Postcode</b>	<b>Date and Place of Birth</b>

<b>Section 5 – Type of Accommodation –</b>	
<b>What type of accommodation will be used for the short-term let</b>	<b>Select one</b>
Licence Type	Secondary Letting <input type="checkbox"/> Home Letting <input type="checkbox"/> Home Sharing <input type="checkbox"/> Home Letting and Home Sharing <input type="checkbox"/>
Type of property (ie. detached house, semi-detached house, terraced house, flat / maisonette)  Number of Bedrooms  Maximum Number of occupants you hope to accommodate with the property at any one time	
Unconventional Accommodation (please state what type of accommodation eg. Yurts, Glamping Pods, Wigwams etc)	
Rooms - Number of Rooms	

	<b>House Share - Shared With</b>  Owner <input type="checkbox"/> Students <input type="checkbox"/> Other <input type="checkbox"/>
	Maximum number of nights available for let during the year.  Periods available for Let (all year, seasonal (eg. May to Sept))

**Section 6 – Convictions, Licence History and Accreditations –**

Please give details of all convictions for which a Court has imposed on any person named on the application form. Failure to disclose convictions may lead to a refusal to grant a Licence.

If the applicant is a limited company or partnership, details of convictions of all parties specified in the application form are required.

If you have not been convicted by a Court or received any fixed penalties write “**NONE**”.

If you are in doubt about your answer, consult your Solicitor for advice.

Date of Offence	Date of Conviction	Name and Place of Court	Nature of Offence	Penalty/Sentence Imposed

Has anyone named in this application ever had a licence refused or revoked in the UK ?  
 Yes/No – if yes, please provide details

Date Refused or Revoked	Licence Type and Organisation Name

Is this property accredited by any other body – Name of Inspecting Body	Yes / No (If yes, please provide details below)

I/We declare that I/we shall for a period of 21 days commencing with the date hereof, display at or near the premises so that it can conveniently be read by the public, a notice complying with the requirements of Paragraph 2(3) of Schedule 1 of the Civic Government (Scotland) Act 1982.

**I/We declare that the particulars given by me/us on this form are correct to the best of my/our knowledge and belief.**

Signature of Applicant or Agent .....

Address .....

.....

.....

(Position of applicant in Company/Partnership if not otherwise stated)

.....

Date .....

National Fraud Initiative – Scottish Borders 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 accessed from the council's website.

**NB Any person who in or in connection with the making of this application makes any statement which he/she knows to be false, or recklessly makes any statement which is false in a material particular, shall be guilty of an offence and liable, on summary conviction, to a fine not exceeding level 4 on the standard scale.**

Before lodging your application please carefully read through all documentation available to download at [www.scotborders.gov.uk](http://www.scotborders.gov.uk)

If additional information is supplied on a separate sheet(s), please ensure make sure they are securely attached to the application.

If you require any further advice regarding the licensing scheme please contact the Licensing Team on 01835 826662 or by email [STLlicensing@scotborders.gov.uk](mailto:STLlicensing@scotborders.gov.uk)

**The completed application and all the supporting documentation (as detailed on the pre-application checklist) can be submitted by :-**

- 1. email to [STLlicensing@scotborders.gov.uk](mailto:STLlicensing@scotborders.gov.uk) (this is the preferred option); or**
- 2. alternatively by post to - Licensing Unit, Scottish Borders Council, Council Headquarters, Newtown St. Boswells, Melrose TD6 0SA.**

If posting, we recommend using "Recorded/Mailed signed for delivery" to ensure safe delivery, tracking and receipting of your application documentation to Scottish Borders Council, especially if including original certificates etc.

Payment of the application fee can be made by payment over the phone by debit or credit card (01835 826662) or by cheque making payment to 'Scottish Borders Council'.