



WARWICK DISTRICT COUNCIL
STUDENT HOUSE ACCREDITATION SCHEME

APPLICATION FOR PROPERTY ACCREDITATION

1. THE PROPERTY

ADDRESS :
.....
.....POSTCODE:

2. THE APPLICANT(S)

NAME(S) :
ADDRESS(ES) :
.....POSTCODE :
TELEPHONE NUMBER(S) :
INTEREST IN PROPERTY :Owner/ Agent/ Manager/ Other

3. THE OWNER(S) (if different from above)

NAME(S) :
ADDRESS(ES) :
.....POSTCODE:
TELEPHONE NUMBER(S) :

4. THE AGENT (if applicable and not covered under 2. above)

NAME :
ADDRESS :
.....POSTCODE:
TELEPHONE NUMBER:
PURPOSE OF AGENT: Letting / Full Management / Other

5. COMPANY /CORPORATE BODY

(complete only if application submitted on behalf of a company or corporate body)

COMPANY TITLE :
ADDRESS OF REGISTERED OFFICE :
.....POSTCODE:
TELEPHONE NUMBER:
YOUR POSITION IN COMPANY:

6. PROPERTY DETAILS

NO. OF STORIES BASEMENT GROUND FIRST SECOND THIRD
(Tick all that apply)

Room Type	Basement	Ground	First	Second	Third
Bedrooms (number of)					
Kitchens or Kitchen-Diners					
Living or Living-Dining Rooms					
Bath/Shower Rooms with WC					
Bath/Shower Rooms without WC					
Separate WC's					

7. DECLARATION

QUALIFYING CRITERIA

I confirm that to the best of my knowledge :-

- I have had no convictions for illegal eviction or harassment of tenants within the last 5 years
- I have had no convictions for violence or intimidating behaviour within the last 5 years
- I have had no convictions for mortgage or housing benefit fraud or breach of grant conditions within the last 5 years
- I have not been prosecuted for failing to comply with any statutory notice served by the Council within the last 5 years

PHYSICAL STANDARDS

I confirm that I have read and understood the requirements for physical standards, and to the best of my knowledge, the property named in 1. above meets those standards.

MANAGEMENT CODE

I confirm that I have read and understood the requirements for the management code, and I agree to abide by the terms of that Code.

PLANNING AND BUILDING REGULATIONS

I confirm that to the best of my knowledge, the property named in 1. above complies with Planning law and Building Regulations, both in terms of its use and in respect of works which I have had undertaken to it.

Signed:

Date:

Print Full Name:

8. ENCLOSURES

The following documents are enclosed in support of this application (tick as applicable) :-

Gas Safety Certificate (if gas supply)	
NICEIC Periodic Inspection Report for Electric Wiring	
Fire Alarm / Emergency Lighting Certificate (if applicable)	
Furniture Undertaking Form (if furnished)	
Star Rating Application Form (optional)	
Electrical Portable Appliance Testing (PAT) Report (if applicable)	

Return to : Environmental Health, PO Box 2176, Riverside House, Milverton Hill, Leamington Spa
CV32 5QF