INVERCLYDE COUNCIL

APPLICATION FOR TRANSFER OF A SHORT TERM LET LICENCE Civic Government (Scotland) Act 1982 as amended

This application form must be completed in BLOCK CAPITALS (preferably in Black Ink). **ALL SECTIONS OF THE FORM MUST BE COMPLETED WITHOUT EXCEPTION.** The completed form must be returned to the Customer Service Centre, Municipal Buildings, Clyde Square, Greenock PA15 1LY.

Please read the Policy Statement carefully before applying to transfer a Licence.

For Officia	al Use
STL Licence Number:	
Type of STL:	
Date Received:	
Date Paid:	
Receipt No:	

Where there is insufficient space to add the requested details please attach a separate sheet

1.Details of Short-term Let Premise
Please provide the Short-term Let licence number
Please provide the name and address of the Short-term Let premise
Details of Short-term Let
Please note only the short term let can submit a transfer of Short-term
2. Please confirm who is applying for the transfer of the Short-term Let Licence
Where an agent is applying for the transfer of the Short-term Let licence, please provide agent's name, date of birth, address and contact details.
the Short-term Let the the name and the Short-term Let term Let term Let transfer of Short-term confirm who is transfer of the Short-term Let licence, agent's name, date of

3	3. To be completed by the Licenc	e holder or agent acting on behalf of Licence holder
С	Oo you own the property?	Yes □ No □
a p o	f not, please provide name(s) and address(es) of each owner and produce a declaration from each owner or a person authorised to act on their behalf, that they consent to the application.	
В	3. Joint Owner	Is there a Joint Owner Yes □ No □
a p o	f yes, please provide name(s) and address(es) of each owner and produce a declaration from each owner or a person authorised to act on their behalf, that they consent to the application.	
F	Full Name of Joint Owner	
F	Home Address	Postcode
Т	elephone Number	
Е	Email Address	
С	Date of Birth	
P	Place of Birth	
A	Are further owners to be added	Yes □ No □ If YES attach a separate sheet
4	l. Transferee Details	
	Full Name of Individual/Company/Partnership)	
ŀ	Home Address (last 5 years)	Destanda
N	Mobile Number	Postcode
Е	Email Address	
	Date of Birth	
F	Place of Birth	

5. Day to Day Management				
Day to Day Management: This person's name will appear on the Short-term Let Licence as the nominated person for the company. Should this person leave the company a variation form will require to be submitted along with the appropriate fee.				
Is transferee to carry out day to day management?	Yes □ No □	Yes – Complete section below		
		No – Go to Question 6		
Individual's Details (Day to Day M	lanagement)			
Full Name				
Address (last 5 years)				
		Postcode		
Business Hours Telephone Number				
Mobile Number				
Email Address				
Date of Birth				
Place of Birth				
6. Previous Licence Applications				
Does the transferee currently hold a Short-term Let Licence anywhere else in Scotland, if so, please provide the licence number?		Yes □ No □		
Has there been any changes made to the property since the last application?				
7. Details of Convictions and Offences	applicant or any per note that these converged to the Government of the Government o	ulars of any convictions or offences against the erson(s) named in questions 3,4 and 5. Please privictions and any future convictions may be eneral Purposes Board, the Council's Civic ittee and may be dealt with in public. In the are spent under the Rehabilitation of 4 do not have to be included byt may also, in tances, be referred to by the Committee.		

Name	Date	Court	Crime/Offence	Sentence

The information you have provided on this Application form, and from supporting documentary evidence where applicable, will be processed by Inverclyde Council (the "data controller") for the purposes of the General Data Protection Regulation and the Data Protection Act 2018 (UK GDPR) in order to process your Licensing Application.

For the purpose of dealing with your application, we will share your information in accordance with the Civic Government (Scotland) Act 1982, other licensing legislation and with relevant internal services of Inverclyde Council. The Council may also check information provided by you, or information about you provided by a third party such as Scottish Fire &Rescue Service and Police Scotland with other information held by us. We may also get information from those third parties or share your information with them in order to check its accuracy, prevent or detect crime, protect public funds or where required bylaw.

Please note that you should read this service specific Privacy Notice in conjunction with the council's Full Privacy Statement which is accessible on the council's website at: https://www.inverclyde.gov.uk/site-basics/privacy/services-privacy-notice/legal-property-services

I declare that the particulars given by me on this form are true. I consent to the sharing of my personal information for the purposes set out above.

Signature	of		
Applicant	(or	Date	
agent)			
	_		
Name (BLOCK CAPITALS	S)		

e following documents should be submitted with the transfer plication:-		VIEWED	Expiry Date	
		Υ	N	
•	Short term let licence to which the application relates or if not possible, a statement of reasons for failure to produce the licence.			
•	A declaration from each joint owner or a person authorised to act on their behalf, or where the applicant is an agent, confirmation from the Licence Holder that they consent to the application.			

Please send the completed application form and fee to:-

Inverclyde Council, Legal, Democratic, Digital & Customer Services, Municipal Buildings, Clyde Square, Greenock PA15 1LY or by email to licensing.section@inverclyde.gov.uk

Payment

Applications will not be processed until the appropriate application fee is paid.

Payment ca	n be made by one of the following options (please tick which option you are using):
	Credit/debit card – by calling Inverciye Council on 01475 717171. Please quote the type of licence you are applying for, and quote the licence number.
	Cheque - made payable to Inverclyde Council Council. Please send cheque with application form to Inverclyde Council, Legal, Democratic, Digital & Customer Services, Municipal Buildings, Clyde Square, Greenock PA15 1LY.
	By BACS – Please quote the licence type, as reference: Account Name - Inverclyde Council Account Sort Code - 80-91-25 Account Number - 00438747

STL transfer - Jan 2025