

Licence No.

2013/00266/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

15 Edinburgh Road Brighton BN2 3HY

Ward

St. Peter's And North Laine

Name & Address of Licence Holder	
John Standing, 6 Barrowfield Close Hove BN3 6TP	
Name & Address of Person Managing	
,	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 4	
Number of Rooms Total Number of Rooms 6	
a) Sleeping b) Living Rooms	
a) Sleeping b) Living Noonis	
Number of Self Contained Flats: 0 Number of Non Self Cont. Fla	ts: 0
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers c) W.C.s	
C) VV.O.3	
Licence Details	
Commencement date: 20/03/2014 Duration of licence:	22/10/2018
20/00/2014 Datation of hochec.	22/10/2010
Maximum number of persons or households permitted to occupy HMO under conditions	of licence:
Households 6 Persons 6	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	

Summary of conditions of licence

Fire Instructions Notice, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Notice providing information



#### Licence No.

#### 2013/00563/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 56 Park Crescent Road Brighton BN2 3HS

Ward

St. Peter's And North Laine

Name & Address of Licence	e Holder		
Mr & Mrs Ian & Jo Bunday, 15-	17 Middle Street Brighton	BN1 1AL	
Name & Address of Person	n Managing		
Brighton Accommodation Agenda	cy, 74 Lewes Road Bright	on BN2 3HZ	
D ( D ) (			
Property Description		<u> </u>	
Short description of licensed	•		
Property Type = SHARED HOU	SE, No of Units = 1, Occu	upancy = 5, No of Storeys = 4	
Number of Rooms	Total Number of R	dooms 5	
a) Sleeping	b) Livinç	g Rooms	
Number of Self Contained Fla	ots: 0	Number of Non Self Cont. Fla	nts: 0
Shared Amenities	Number Descrip	tion	
a) Kitchen			
b) Bathrooms/Showers c) W.C.s			
c) w.o.s			
Licence Details			
	20/20/20/	<b></b>	20/20/20/2
Commencement date:	20/02/2014	Duration of licence:	20/09/2018
Maximum number of persons	or households permitte	ed to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Tiouseriolus	1 6130113		
Information referred to a re	esidential property trib	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Additional Facilities, Electrical Works, Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Other Fire works, Structural fire works, Ventilation



#### Licence No.

#### 2013/01213/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

10 Coldean Lane Brighton BN1 9GD

Ward

Hollingdean And Stanmer

Name & Address of Licence	e Holder		
Gary Ablewhite, 16 Court Close	Brighton BN1 8YG		
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys, e	tc)	
Property Type = SHARED HOL	JSE, No of Units = 7, Oc	cupancy = 7, No of Storeys = 3	
N	T. (.15)	<b>5</b>	
Number of Rooms	Total Number of		
a) Sleeping	b) Livii	ng Rooms	
Number of Self Contained Fla	sto:	Number of Non Self Cont. Fla	to:
Number of Self Contained Fia	ots:	Number of Non Self Cont. Fla	ts: 0
Shared Amenities	Number Descri	iption	
a) Kitchen		•	
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	13/03/2014	Duration of licence:	11/02/2019
Commencement date.	13/03/2014	buration of licence.	11/02/2013
Maximum number of persons	or households permit	ted to occupy HMO under conditions	of licence:
Households 7	Persons 7		
Information referred to a re	esidential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic	ence		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire works, Structural fire works



#### Licence No.

#### 2013/01382/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

13 Pevensey Road Brighton BN2 3AG

Ward

Hanover And Elm Grove

Name & Address of Licence Holder	
Mr Howard Bardsley, 61 Sherwood Road Seaford BN25 3ED	
Name & Address of Person Managing	
G K White & Company Ltd, 165 Lewes Road Brighton BN2 3LD	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms Total Number of Rooms 6  a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self C	cont. Flats: 0
Shared Amenities  A) Kitchen  b) Bathrooms/Showers  c) W.C.s	
Licence Details	
Commencement date: 16/07/2013 Duration of licence:	13/03/2018
Maximum number of persons or households permitted to occupy HMO under cor	nditions of licence:
Households 5 Persons 5	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference nu	mber
Summary of conditions of licence	oo Mandatany oo ada

HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/01510/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

17 Bernard Road Brighton BN2 3ER

Ward

Hanover And Elm Grove

Name & Address of Licence I	Holder		
Mill House Enterprises Ltd, Mill Ho	use Henfield Common	South Henfield BN5 9RS	
Name & Address of Person N	lanaging		
G4 Lets, 2 Hythe Road Brighton Bl	N1 6JS		
Property Description			
Short description of licensed HM			
Property Type = SHARED HOUSE	, No of Units = 1, Occu	pancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of Ro	poms 7	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Flats:	0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s	umber Descript	tion	
Licence Details			
Γ			
Commencement date:	22/07/2013	Duration of licence:	26/02/2018
Maximum number of persons or	households permitted	d to occupy HMO under conditions	of licence:
Households 7 Pe	rsons 7		
Information referred to a resi	dential property trib	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/01512/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

55 Totland Road Brighton BN2 3EP

Ward

Hanover And Elm Grove

Name & Address of Licence	o Holder	
IVIIII HOUSE Enterprises Ltd, Mill I	House Henfield Common South Henfield BN5 9RS	
Name & Address of Person	Managing	
G4 Lets, 2 Hythe Road Brighton	BN 1 032	
Property Description		
Short description of licensed	HMO (No of storevs, etc)	
-	SE, No of Units = 1, Occupancy = 7, No of Storeys = 3	
Troporty Type – OFFARED FIOO	oc, No of Office - 1, Occupancy - 1, No of Octobeys - 5	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flat	ts: 0 Number of Non Self Cont. Flat	s: 0
Shared Amenities	Number Description	
Shared Amenities a) Kitchen	Number Description	
	Number Description	
a) Kitchen	Number Description	
a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description	
a) Kitchen b) Bathrooms/Showers	Number Description	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details		26/02/2018
a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description  22/07/2013 Duration of licence:	26/02/2018
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:		
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons	22/07/2013 Duration of licence: or households permitted to occupy HMO under conditions	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons	22/07/2013 Duration of licence:	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons  Households 7	22/07/2013 Duration of licence:  or households permitted to occupy HMO under conditions  Persons 7	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons  Households 7	22/07/2013 Duration of licence: or households permitted to occupy HMO under conditions	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons  Households 7	22/07/2013 Duration of licence:  or households permitted to occupy HMO under conditions  Persons 7	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, HMO Lic - Gas Safety



#### Licence No.

#### 2013/01513/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

53 Hollingbury Road Brighton BN1 7JB

Ward

Hollingdean And Stanmer

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO -Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, HMO Lic - Gas Safety



#### Licence No.

#### 2013/01518/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

14 The Drove Brighton BN1 5AF

Ward

Withdean

Name & Address of Licen	ce Holder		
Ms Luisa Barber, 164 Nevill Ro	oad Hove BN3 7QE		
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HO	USE, No of Units = 1, Occup	ancy = 6, No of Storeys = 4	
Number of Rooms	Total Number of Ro	oms 6	
a) Sleeping	b) Living	Rooms	
		¬	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities	Number Descripti	on	
a) Kitchen	Number Descripti	on .	
b) Bathrooms/Showers			
c) W.C.s			
,			
Licence Details			
Common compant data:	24/07/2013	Duration of licence:	26/02/2018
Commencement date:	24/07/2013	Duration of ficence:	20/02/2010
Maximum number of persons	s or households permitted	to occupy HMO under conditions	of licence:
Households 6	Persons 6		
Tiouseriolus	0		
Information referred to a r	esidential property tribu	ınal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Works, Structural Fire Works



#### Licence No.

#### 2013/01520/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

48 Old Shoreham Road Hove BN3 6GF

Ward

Goldsmid

Name & Address of Licenc	e Holder		
Mr Gamal Khalil, 5 The Upper D			
Name & Address of Persor	n Managing		
Mr Ryan Zhu, Houseen Letting	& Property Services 56 Lan	sdowne Place Hove BN3 1FG	
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOU	SE, No of Units = 1, Occup	ancy = 5, No of Storeys = 4	
Number of Rooms	Total Number of Ro	oms 5	
a) Sleeping	b) Living I		
a) clooping	5) Living 1	toome	
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Fla	ts: 0
Trained of Con Contained Fig.		Trainibor of from Cont. Fla	0
Shared Amenities	Number Description	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
License Details			
Licence Details			
Commencement date:	24/03/2015	Duration of licence:	06/03/2018
Maximum number of persons	or households permitted	to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Information referred to a re	esidential property tribu	ınal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Additional Facilities, Electrical reports, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, Loft Insulation, Structural Fire Works, gas certificates



#### Licence No.

#### 2013/01521/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

1 St Pauls Street Brighton BN2 3HR

Ward

St. Peter's And North Laine

Name & Address of Licence	Holder		
Mr Alex Beyfus, 1 St Pauls Street	Brighton BN2 3HR		
Name & Address of Person I	Managing		
Mr Dan Lyons, Brighton Accommo	odation Agency 74 Lew	es Road Brighton BN2 3HZ	
Property Description			
Short description of licensed H	MO (No of storeys, etc	<b>:</b> )	
Property Type = SHARED HOUSI	E, No of Units = 1, Occi	upancy = 5, No of Storeys = 4	
Number of Rooms	Total Number of R	dooms 5	
a) Sleeping	b) Livin	g Rooms	
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flat	s: 0
Shared Amenities N	lumber Descrip	otion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	26/07/2013	Duration of licence:	24/02/2018
Maximum number of persons of	r housaholds normitta	ed to occupy HMO under conditions	of licence:
maximum number of persons of	i nousenolus perinitte	ed to occupy rimo under conditions	or incerice.
Households 5 Pe	ersons 5		
Information referred to a res	idential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

#### Summary of conditions of licence

Additional Facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Works, Structural Fire Works



#### Licence No.

#### 2013/01590/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

72 Upper Lewes Road Brighton BN2 3FF

Ward

St. Peter's And North Laine

Name & Address of Licence	Holder		_
Mr Sanjeev Dhuna, 48 Woodland			
Wil Sanjeev Dhuna, 40 Woodiand	DIIVE HOVE BING ODE		
Name & Address of Person M	Managing		
S J Lettings Ltd, 52 Lewes Road E			
Property Description			
Short description of licensed HI	MO (No of storeys, etc)		
Property Type = SHARED HOUSE	≣, No of Units = 1, Occupar	ncy = 5, No of Storeys = 3	
N	T. (. I. N (. D		
Number of Rooms	Total Number of Roor		
a) Sleeping	b) Living Ro	ooms	
		7	_
Number of Self Contained Flats	. 0	Number of Non Self Cont. Flats	s: 0
Chanad Amanidia	lumbar Dagarintia.		
	umber Description		
a) Kitchen			
b) Bathrooms/Showers c) W.C.s			
C) W.O.S			
Licence Details			
Ī		Γ	
Commencement date:	02/05/2013	Duration of licence:	19/03/2018
Maximum number of persons or	households permitted to	occupy HMO under conditions o	of licence:
Households 5 Pe	ersons 5		
Information referred to a res	idential property tribur	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/01593/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

15 Ringmer Drive Brighton BN1 9HW

Ward

Moulsecoomb And Bevendean

Name & Address of Licence	Holder		
Ms Tara Whittington, 38 Hendon	Street Brighton BN2 0EG		
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Occupa	ancy = 6, No of Storeys = 3	
Number of Deams	Total Number of Day		
Number of Rooms	Total Number of Roc		
a) Sleeping	b) Living F	Rooms	
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Fla	ts: 0
Number of Self Contained Flats	0	Number of Non Self Cont. Fla	is. 0
Shared Amenities N	Number Description	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	17/06/2013	Duration of licence:	24/02/2018
Maximum number of persons o	r households permitted	to occupy HMO under conditions	of licence:
Households 6 P	ersons 6		
Information referred to a res	idential property tribu	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Structural Works, Structural Fire Works



#### Licence No.

#### 2013/01597/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

230 Elm Grove Brighton BN2 3DA

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder		
Mr Steve Foley, 35 Brangwyn	Drive Brighton BN1 8XB		
Name & Address of Perso	n Managing		
John Hilton Estate Agents, 12	7 Lewes Road Brighton B	BN2 3LG	
Property Description			
Short description of license	d HMO (No of storeys, e	etc)	
Property Type = SHARED HO	USE, No of Units = 1, Oc	ccupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 9	
[]			
a) Sleeping ###	b) Liv	ing Rooms 2	
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities		ription	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	2		
Licence Details			
		1	
Commencement date:	22/07/2013	Duration of licence:	28/02/2018
Maximum number of person	s or households permit	tted to occupy HMO under conditions of	licence:
	-	- · ·	
Households 5	Persons 5		
Information referred to a	residential property t	ribunal or Lands Tribunal:	
None	portional property t	insurial of Edition Trisurial.	
Decision of Tribunal		Reference number	
•	IO - Elec Mandatory cond	ds, HMO - Fire Locks, HMO - Fire Mandator	-

Fire EI / GI / Cupboards 1, HMO - Elec Mandatory conds, HMO - Fire Locks, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Kitchen 6, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/01598/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

3 Hillside Brighton BN2 4TA

Ward

Moulsecoomb And Bevendean

Name & Address of Licence	Holder		
Mr Graham Smith, 7 Alms Hill Bo		9H	
Wil Granam Smith, 7 Anns mil bo	unie Cambridge CB23 2	OI I	
Name & Address of Person	Managing		
Mr Dan Lyons, 79 Sutton Drove S			
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Occu	pancy = 7, No of Storeys = 3	
<u> </u>			
Number of Rooms	Total Number of Ro	ooms 7	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities N	Number Descript	tion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Elocitor Botalio			
Commencement date:	16/09/2013	<b>Duration of licence:</b>	07/03/2018
Maximum number of persons o	r hausahalda narmitta	d to occupy HMO under conditions	of licenses
maximum number of persons o	r nousenoius permittet	to occupy Himo under conditions	of ficerice.
Households 7 P	ersons 7		
Information referred to a res	idential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
0			

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/01599/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

Flat At 85 Ditchling Road Brighton BN1 4SD

Ward

St. Peter's And North Laine

Name & Address of Licence	e Holder		
D & L Property Investments, 26	Hove Park Way Hove BN3	B 6PT	
Name & Address of Person	Managing		
Mr Dan Lyons, 79 Sutton Drove	Seaford BN25 3NN		
December 1981			
Property Description	HMO (No of storous, sto)		
Short description of licensed I			
Property Type = SHARED HOUS	SE, NO OF UNITS = 1, Occup	pancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Ro	ooms 5	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Flat	s: 0	Number of Non Self Cont. Flat	s: 0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Descript	ion	
Licence Details			
Commencement date:	22/07/2013	Duration of licence:	07/03/2018
Maximum number of persons	or households permitted	I to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Information referred to a re	sidential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/01602/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

69 Ewhurst Road Brighton BN2 4AL

Ward

Moulsecoomb And Bevendean

Name & Address of Licence	Holder		
Mr Glynn Parsons, 74 Havelock F			
IVII GIYIIII Faisons, 74 Havelock F	Road Brighton Biv i OGF		
Name & Address of Person	Managing		
Mr Dan Lyons, 21 Bramber Road			
Will Dail Lyono, 21 Brainboi Road	Ocalora Biveo 1710		
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Occup	pancy = 6, No of Storeys = 3	
	· .	<u> </u>	
Number of Rooms	Total Number of Ro	ooms 6	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities	Number Descript	ion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Common comont data:	25/11/2013	Duration of licence:	07/03/2018
Commencement date:	25/11/2013	Duration of licence:	07/03/2018
Maximum number of persons of	r households permitted	to occupy HMO under conditions	of licence:
Households 6 P	ersons 6		
Information referred to a res	idential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

#### Summary of conditions of licence

Additiona facilities, Additional facilities, Electrical Reports, Gas Certificates, General - Furniture, General - Property maintenance, General - changes in property, General - rubbish, General - written agreements, Management of fire precautions, Other Fire Works



#### Licence No.

#### 2013/01603/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

19 Washington Street Brighton BN2 9SR

Ward

Hanover And Elm Grove

Name & Address of Licence	Holder		_
Mr Craig Dwyer-Smith, 26 Hove F			
ivii Graig Dwyer-Siriitii, 20 Hove i	ark way nove bivo or i		
Name & Address of Person	Managing		
Mr Dan Lyons, 79 Sutton Drove S			
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Occu	pancy = 5, No of Storeys = 3	
<u> </u>			
Number of Rooms	Total Number of Ro	ooms 5	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Flats	: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities	Number Descript	ion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
_	10/01/00/1		27/20/20/2
Commencement date:	16/01/2014	Duration of licence:	07/03/2018
Maximum number of persons o	r households permitted	d to occupy HMO under conditions	of licence:
Households 5 P	ersons 5		
Information referred to a res	idential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Not Assigned



#### Licence No.

#### 2013/01607/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

21 Upper Wellington Road Brighton BN2 3AN

Ward

Hanover And Elm Grove

Name & Address of Licence	e Holder			
Mr Terry Hermon, 2 Sandringhar	m Avenue London SW20	8JY		
Name & Address of Person	Managing			
Mr Dan Lyons, 79 Sutton Drove	Seaford BN25 3NN			
Property Description				
Short description of licensed I	HMO (No of storeys, etc	·)		
Property Type = SHARED HOUS				
Troporty Type Official Proof	32, 110 01 01 mo 1, 0000	aparity of No or otoroyo o		
Number of Rooms	Total Number of R	ooms 7		
a) Sleeping	b) Livin	g Rooms		
Number of Self Contained Flat	s: 0	Number of Non Self Cont. Fla	ts: 0	
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Descrip	tion		
Licence Details				
Commencement date:	25/09/2013	Duration of licence:	07/04/2018	
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
Households 6	Persons 6			
Information referred to a re	sidential property tri	ounal or Lands Tribunal:		
None				
Decision of Tribunal		Reference number		
		TOTOTOTO Hambot		

#### Summary of conditions of licence

Additional Facilities, Electrical Reports, Gas Certificates, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Works



#### Licence No.

#### 2013/02027/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 75 Hollingdean Terrace Brighton BN1 7HB

Ward

Hollingdean And Stanmer

ame & Address of Licence Holder
am Ghibaldan, 28A Royal Circus Edinburgh EH3 6SS
ame & Address of Person Managing
ambridge Residential, 117-118 Western Road Hove BN3 1DB
way auto. Danauju ti au
roperty Description
hort description of licensed HMO (No of storeys, etc)
roperty Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3
umber of Rooms Total Number of Rooms 6
Sleeping b) Living Rooms
umber of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
hared Amenities Number Description
Kitchen Bathrooms/Showers
W.C.s
cence Details
ommoncoment date: 26/11/2014
ommencement date: 26/11/2014 Duration of licence: 24/09/2018
aximum number of persons or households permitted to occupy HMO under conditions of licence:  24/09/2018
aximum number of persons or households permitted to occupy HMO under conditions of licence:
aximum number of persons or households permitted to occupy HMO under conditions of licence:
aximum number of persons or households permitted to occupy HMO under conditions of licence:  ouseholds 6 Persons 6
aximum number of persons or households permitted to occupy HMO under conditions of licence:  ouseholds 6 Persons 6  formation referred to a residential property tribunal or Lands Tribunal:

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Works



#### Licence No.

#### 2013/02030/HMO/PS

#### **REGISTER ENTRY FOR** (Address of licensed HMO)

34 Sussex Terrace Brighton BN2 9QJ

Ward

Queen's Park

Name & Address of Licence Holder	
Mr Stephen Pavey, Spruce Investments Ltd 15-19 Pound Lane Epsom Surrey KT19 8	RY
Name & Address of Person Managing	
Cambridge Residential, 117-118 Western Road Hove BN3 1DB	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	}
Number of Rooms Total Number of Rooms 6	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Contained Flats:	Cont. Flats: 0
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers	
c) W.C.s	
Linear Details	
Licence Details	
Commencement date: 10/06/2013 Duration of licence	e: 18/03/2018
Maximum number of persons or households permitted to occupy HMO under co	nditions of licence:
Households 5 Persons 5	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
None Decision of Tribunal Reference nu	umber

Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Bathroom 4, HMO - Licensing Bedrooms, HMO - Licensing Kitchen 6, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Works, Structural Fire Works



#### Licence No.

#### 2013/02035/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

19 Hollingbury Park Avenue Brighton BN1 7JG

Ward

Hollingdean And Stanmer

Name & Address of Licence	Holder		
Mr & Mrs Jeremy & Emma Barrett	, Rushett House Rus	hett Lane Norton Nr Faversham Kent M	E13 0SG
Name & Address of Person N	Managing		
G4 Lets, 2 Hythe Road Brighton B	N1 6JS		
Property Description			
Short description of licensed HI	MO (No of storeys, e	etc)	
Property Type = SHARED HOUSE	Ξ, No of Units = 1, Oc	ccupancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 9	
a) Sleeping	b) Liv	ing Rooms	
Number of Self Contained Flats	: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities N	lumber Descr	ription	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	15/11/2013	Duration of licence:	03/04/2018
Commencement date.	13/11/2013	Duration of licence.	03/04/2010
Maximum number of persons or	r households permit	tted to occupy HMO under conditions	of licence:
Households 7 Pe	ersons 7	]	
nousenous / Pe	130115 /	J	
Information referred to a resi	idential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licen-	ce		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/02042/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

17 Shanklin Road Brighton BN2 3LP

Ward

Hanover And Elm Grove

Name & Address of Licence Ho	older		
Mr Paul Commerford, 33 Dundee Co	ourt 73 Wapping High Stre	et London E1W 2YG	
Name & Address of Person Ma	inaging		
G4 Lets, 2 Hythe Road Brighton BN	1 6JS		
Property Description			
Short description of licensed HMC	O (No of storeys, etc)		
Property Type = SHARED HOUSE,	No of Units = 1, Occupano	y = 7, No of Storeys = 4	
Number of Deams	Total Number of Doom	- 40	
Number of Rooms	Total Number of Rooms		
a) Sleeping	b) Living Roc	oms	
Number of Self Contained Flats:	0	Number of Non Self Cont. Flats:	0
	mber Description		
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	15/11/2013	Duration of licence:	03/04/2018
Mandan and a second and a			
Maximum number of persons or h	lousenolas permittea to	occupy HMO under conditions of	licence:
Households 7 Pers	sons 7		
Information referred to a reside	ential property tribuna	l or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summany of conditions of license			

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/02050/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

51 Bevendean Road Brighton BN2 4FN

Ward

Moulsecoomb And Bevendean

Name & Address of Licence	e Holder			
Perth Securities Ltd, 2 Goldstone	e Street Hove BN3 3RJ			
Name & Address of Person				
Greenfend Ltd, T/as Cambridge	Residential 117 Wester	n Road Hove BN3 1DB		
Property Description				
Short description of licensed I	HMO (No of storevs. et	c)		
Property Type = SHARED HOUS	-			
		., .,,		
Number of Rooms	Total Number of	Rooms 6		
a) Sleeping	b) Livir	ng Rooms		
Number of Self Contained Flat	0	Number of New Solf Cont. Flat	0	
Number of Self Contained Flat	s: 0	Number of Non Self Cont. Flat	s: 0	
Shared Amenities	Number Descri	ption		
a) Kitchen				
b) Bathrooms/Showers				
c) W.C.s				
Licence Details				
0	04/07/0040	Demotion of the case	04/04/0040	
Commencement date:	24/07/2013	Duration of licence:	04/04/2018	
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
Households 5	Persons 5			
Information referred to a re	sidential property tr	ibunal or Lands Tribunal:		
None				
Decision of Tribunal		Reference number		

Summary of conditions of licence

Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Works, Structural Fire Works



#### Licence No.

#### 2013/02055/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

53 Bevendean Road Brighton BN2 4FN

Ward

Moulsecoomb And Bevendean

Name & Address of Licence Holder	
Perth Securities Ltd, 2 Goldstone Street Hove BN3 3RJ	
Name & Address of Person Managing	
Greenfend Ltd, T/as Cambridge Residential 117 Western Road Hove BN3 1DB	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms Total Number of Rooms 6	
a) Sleeping b) Living Rooms	
2, 2g	
Number of Self Contained Flats: 0 Number of Non Self Cont.	Flats: 0
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers	
c) W.C.s	
Licence Details	
Commencement date: 24/07/2013 Duration of licence:	04/04/2018
Maximum number of persons or households permitted to occupy HMO under condition	ons of licence:
Households 5 Persons 5	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	r

Summary of conditions of licence

Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Works, Structural Fire Works



Licence No.

2013/02058/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

24 Arundel Street Brighton BN2 5TH

Ward

Rottingdean Coastal

Name & Address of Licen	ce Holder		
Mr Steve Foley, 4 Warmdene	Avenue Brighton BN	1 8UD	
Name & Address of Perso	on Managing		
John Hilton Estate Agents, 12	7 Lewes Rd Btn BN2	2LG	
Property Description			
Short description of licensed	d HMO (No of store	ys, etc)	
Property Type = SHARED HO	USE, No of Units = 1	1, Occupancy = 6, No of Storeys = 3	
N	<b>T</b> ( 1 N )		
Number of Rooms	Total Numbe		
a) Sleeping ###	b)	) Living Rooms 4	
Number of Self Contained Fl	ats:	0 Number of Non Self Cont. Flats:	1
Shared Amenities	Number De	escription	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	3		
Licence Details			
Licence Details			
Commencement date:	22/07/2013	Duration of licence:	11/06/2018
			•
Maximum number of person	s or households pe	ermitted to occupy HMO under conditions of I	icence:
Households 6	Persons 6		
Information referred to a	residential proper	rty tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie			
HMO - Elec Mandatory conds,	HMO - Fire Mandato	ory conds, HMO - Furniture Mandatory conds, Hl O - Licensing Kitchen 6, HMO - Property Chges l	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Kitchen 1, HMO - Licensing Kitchen 6, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/02060/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

1 Whippingham Street Brighton BN2 3LL

Ward

Hanover And Elm Grove

Name & Address of Licence	e Holder		
Mr John Wigram, Pinchers Coo		hook Hampshire GU30 7JY	
<u> </u>	·	<u> </u>	
Name & Address of Person	n Managing		
G4 Lets, 2 Hythe Road Brighton	n BN1 6JS		
Property Description			
Short description of licensed			
Property Type = SHARED HOU	JSE, No of Units = 1, Occu	pancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of R	ooms 8	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Fla	its: 0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities	Number Descript	tion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	14/06/2013	Duration of licence:	23/02/2018
Maximum number of persons	or households permitte	d to occupy HMO under conditions	of licence:
	<b>5</b>		
Households 6	Persons 6		
Information referred to a re	esidential p <u>roperty trib</u>	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

#### Summary of conditions of licence

Additional Facilites, Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Other Fire Works, Rubbish, Structural Fire Works, Ventilation



#### Licence No.

#### 2013/02067/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

76 Bernard Road Brighton BN2 3EQ

Ward

Hanover And Elm Grove

Name & Address of Licence Holder	r	
Mr Thomas Cramer, The Piggery Vexour	Farm Hampkins Hill Road Chiddingstone Edenbridge Tl	N8 7BB
Name & Address of Person Managi	ing	
Dan Lyons, Brighton Accommodation Age	ency 79 Sutton Drove Seaford BN25 3NN	
Property Description	of stances ato)	
Short description of licensed HMO (No		
Property Type = SHARED HOUSE, No of	f Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms Total	al Number of Rooms 7	
a) Sleeping	b) Living Rooms	
	· · · · · · · · · · · · · · · · · · ·	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats	: 0
Shared Amenities Number	Description	
a) Kitchen		
b) Bathrooms/Showers		
c) W.C.s		
Licence Details		
Licence Betails		
Commencement date: 04	/12/2013 Duration of licence:	07/04/2018
Maximum number of persons or house	eholds permitted to occupy HMO under conditions o	f licence:
		i licelice.
Households 6 Persons	6	
1		
	al property tribunal or Lands Tribunal:	
None Decision of Tribunal	Deference number	
Decision of Tribunal	Reference number	
Summary of conditions of licence		

Electrical Reports, Fire Alarms, Fire EI / GI / Cupboards 2, Gas Certificates, HMO - Fire Doors 8, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Not Assigned, Other Fire Works



#### Licence No.

#### 2013/02088/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

39 Southall Avenue Brighton BN2 4BA

Ward

Moulsecoomb And Bevendean

	11414	occinio / tita Dovertacani
Name & Address of Licen	ce Holder	
Dr Joel Peck, 12 Portugal Plac	e Cambridge Cambridgeshire CB5 8AF	
Name & Address of Perso	n Managing	
S J Lettings Ltd, 52 Lewes Roa	d Brighton BN2 3HW	
Property Description		
Short description of licensed	HMO (No of storeys, etc.)	
	JSE, No of Units = 1, Occupancy = 7, No of Storeys = 3	
Troporty Type – Ornand Direct	7. 140 di Ginta – 1, Geodpaney – 7, 140 di Giologia – 0	
Number of Rooms	Total Number of Rooms 12	
a) Sleeping ###	b) Living Rooms 6	
Number of Self Contained Fla	ats: 0 Number of Non Self Co	ont. Flats: 1
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	2	
c) W.C.s	3	
Lieuwe Betelle		
Licence Details		
Commencement date:	22/07/2013 Duration of licence:	10/03/2018
Maximum number of persons	or households permitted to occupy HMO under cond	ditions of licence:
Households 7	Persons 7	
Information referred to a r	esidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference num	nber
Summary of conditions of lic Additional Facilities, HMO - Ele	ence c Mandatory conds, HMO - Fire Mandatory conds, HMO	- Furniture

Additional Facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/02101/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

13 St Martins Street Brighton BN2 3HJ

Ward

St. Peter's And North Laine

Name & Address of Licence	Holder		
Mr Tom Ghibaldan, 9 Carden Cr	escent Brighton BN1 8	TQ	
Name & Address of Person	Managing		
Greenfend Ltd T/a Cambridge R	esidential, 117 - 118 W	estern Road Hove BN3 1DB	
Dronauty Description			
Property Description  Short description of licensed I	IMO (No of storovs o	atc)	
Property Type = SHARED HOUS	-	·	
Property Type – SHARED HOUS	SE, NO OI OIIIIS – 1, OC	ccupancy – 5, No of Storeys – 5	
Number of Rooms	Total Number of	Rooms 6	
a) Sleeping	b) Liv	ing Rooms	
Number of Self Contained Flat	s: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s	Number Descr	ription	
Licence Details			
Common compant data:	20/04/2045	Duration of linears	04/04/2040
Commencement date:	28/01/2015	Duration of licence:	04/04/2018
Maximum number of persons	or households permit	tted to occupy HMO under conditions	of licence:
Households 5 F	Persons 5		
Information referred to a res	sidential property t	ribunal or Lands Tribunal:	
None  Decision of Tribunal		Reference number	
		Reference number	
Summary of conditions of lice	nce		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/02369/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

23 St Martins Place Brighton BN2 3LE

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder		
Hardwick Hartley Partnership,		3 2DJ	
· ·			
Name & Address of Perso	n Managing		
,			
<b>.</b>			
Property Description			
Short description of licensed		- 11 - 40.	
Property Type = SHARED HOU	JSE, No of Units = 1, Occup	ancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Ro	oms 5	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Flat	s: 0
Shared Amenities	Number Descripti	on	
<ul><li>a) Kitchen</li><li>b) Bathrooms/Showers</li></ul>			
c) W.C.s			
,			
Licence Details			
Commencement date:	24/07/2013	Duration of licence:	08/04/2018
Johnnencement date.	24/01/2010	Bullution of ficefice.	00/04/2010
Maximum number of persons	s or households permitted	to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Information referred to a r	esidential property tribu	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
0			

Summary of conditions of licence

Additional Facilities, Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Works, Structural Fire Works, Ventilation



#### Licence No.

#### 2013/02372/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

99 Whippingham Road Brighton BN2 3PF

Ward

Hanover And Elm Grove

Name & Address of Licence	Holder		
Mr James Ford, The Mill Mill Land		onden Kent TN12 RDR	
ivii James i Old, The iviiii iviiii Land	Finalusione Road Florsin	ionden Kent 1112 obb	
Name & Address of Person	Managing		
Mr Dan Lyons, 79 Sutton Drove S			
<u> </u>			
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Occup	pancy = 7, No of Storeys = 3	
N	T. (11)		
Number of Rooms	Total Number of Ro	ooms 7	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Flat	ts: 0
01 1 4	n de la companya de	•	
	Number Descript	ion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
_	10/00/00/7	<b>-</b>	20/20/20/2
Commencement date:	12/03/2015	Duration of licence:	03/03/2018
Maximum number of persons of	r households permitted	I to occupy HMO under conditions	of licence:
Households 7 P	ersons 7		
Information referred to a res	idential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
0			

Summary of conditions of licence

Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/ Repairs, Structural Fire Works



#### Licence No.

#### 2013/02396/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

17 Lewes Road Brighton BN2 3HP

Ward

St. Peter's And North Laine

Name & Address of Licence	a Holder		
Mr James Ford, Flat 190 Princes		ondon N11 3FR	
TWI DUTINGS FOR A, FIGURE 100 F TITLOGG	33 T dik Marior Royal Brive I	LONGON WIT OF IX	
Name & Address of Person	Managing		
Mr Dan Lyons, Brighton Accomn		er Road Seaford BN22 1AG	
Property Description			
Short description of licensed I	HMO (No of storeys, etc)		
Property Type = SHARED HOUS	SE, No of Units = 1, Occupa	ncy = 8, No of Storeys = 4	
Number of Rooms	Total Number of Roo	ms 8	
a) Sleeping	b) Living R	looms	
		¬	
Number of Self Contained Flat	s: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities	Number Description	n	
a) Kitchen	Number Description	11	
b) Bathrooms/Showers			
c) W.C.s			
,			
Licence Details			
<b>0</b>	47/00/0040	D. office of Process	00/00/0040
Commencement date:	17/09/2013	Duration of licence:	03/03/2018
Maximum number of persons	or households permitted t	o occupy HMO under conditions	of licence:
Households 8	Persons 8		
Information referred to a re	sidential property tribu	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Additional Facilities, Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Works, Structural Fire Works



#### Licence No.

#### 2013/02401/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Hanover House 1 Hanover Place Brighton BN2 9SD

Ward

Hanover And Elm Grove

			_
Name & Address of Licence	Holder		
Mr Clifford Burr, Beechlands Sickle	ehatch Lane Maynard	ds Green Heathfield TN21 0BX	
Name & Address of Person N	lanaging		
Baron Estates, 9 East Street Arca	de Brighton BN1 1HF	२	
Property Description			
Short description of licensed HI	MO (No of storeys, e	etc)	
Property Type = SHARED HOUSE	E, No of Units = 1, Oc	ccupancy = 5, No of Storeys = 4	
Number of Rooms	Total Number of	Rooms 5	
a) Sleeping	b) Livi	ing Rooms	
Number of Self Contained Flats:	0	Number of Non Self Cont. Flats	s: 0
Shared Amenities N	umber Descr	ription	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Licence Details			
Commencement date:	19/09/2013	Duration of licence:	21/04/2018
L		J L	
Maximum number of persons or	households permit	ted to occupy HMO under conditions o	of licence:
Households 5 Pe	ersons 5		
•		1	
Information referred to a resi	dential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licen	~~		
Summary of conditions of ficering	- <del>C</del>		

Gas Certificates, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other fire works, Structural fire works



#### Licence No.

#### 2013/02432/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

52 Queens Park Road Brighton BN2 0GL

Ward

Queen's Park

Name & Address of Licence	Holder		
Ms Leyla Yegen, First Floor Flat		Brighton BN2 0GL	
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed F	-		
Property Type = SHARED HOUS	SE, No of Units = 5, Occ	cupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of I	Rooms 5	
a) Sleeping	b) Livir	ng Rooms	
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Flat	s: 0
Shared Amenities	Number Descri	ption	
a) Kitchen			
b) Bathrooms/Showers c) W.C.s			
C) W.O.S			
Licence Details			
Commencement date:	27/06/2013	Duration of licence:	18/04/2018
Maximum number of persons of	or households permitt	ed to occupy HMO under conditions	of licence:
Households 5 P	Persons 5		
Tiouseriolus 5	5		
Information referred to a res	sidential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Additional Facilities, Fire alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Bathroom 4, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Other fire works, Structrural Fire Works



#### Licence No.

#### 2013/02434/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

54 Queens Park Road Brighton BN2 0GL

Ward

Queen's Park

Name & Address of Licenc	e Holder		
Ms Leyla Yegen, First Floor Flat	50 Queens Park Road Brig	hton BN2 0GL	
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOU	SE, No of Units = 5, Occupa	ancy = 5, No of Storeys = 3	
Number of Beauty	Total Noveles of Day	<b>F</b>	
Number of Rooms	Total Number of Roo		
a) Sleeping	b) Living F	Rooms	
Number of Self Contained Flat	ts: 0	Number of Non Self Cont. Flats	: 0
Shared Amenities	Number Description	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commonosment data:	27/06/2013	Duration of licence:	18/04/2018
Commencement date:	27/06/2013	Duration of licence:	10/04/2010
Maximum number of persons	or households permitted	to occupy HMO under conditions o	f licence:
Households 5	Persons 5		
Information referred to a re	sidential property tribu	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Additional Facilities, Additional facilities, Fire alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/repairs, Other fire works, Structural Fire Works



#### Licence No.

#### 2013/02633/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

12 Brewer Street Brighton BN2 3HH

Ward

St. Peter's And North Laine

Name & Address of Licence Holder		
Mrs & Mr Linda & Steve Harmer-Strange, T/a Grosvenor Properties Tu	dor Grange 13 The Upper Dr	ive Hove
Name & Address of Person Managing		
,		
Property Description		
Short description of licensed HMO (No of storeys, etc)		
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, N	o of Storeys = 3	
Number of Rooms Total Number of Rooms 1		
a) Sleeping b) Living Rooms		
, , <u>, , , , , , , , , , , , , , , , , </u>		
Number of Self Contained Flats: 0 Number	er of Non Self Cont. Flats:	1
		L
Shared Amenities Number Description		
a) Kitchen		
b) Bathrooms/Showers c) W.C.s		
0) W.O.3		
Licence Details		
Commencement date: 26/07/2013 Dura	ation of licence:	30/03/2018
Maximum number of persons or households permitted to occupy	HMO under conditions of li	cence:
Households 5 Persons 5		
1 6130113		
Information referred to a residential property tribunal or La	nds Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



# Licence No.

# 2013/02737/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

12 Bedford Square	
Brighton	
BN1 2PN	

Ward

Regency

Name & Address of Licen	ce Holder		
M Nicholas Heanen, 21A Bedf		2PI	
Withiolog Ficalien, 21A Deal	ord Oquare Brighton Bivi	21 L	
Name & Address of Perso	on Managing		
1141110 4714411000 011 0100	, managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, et	tc)	
•		cupancy = 10, No of Storeys = 5	
Troperty Type – Official Fro		supurity = 10, 140 of Cloreys = 5	
Number of Rooms	Total Number of I	Rooms 10	
a) Sleeping ###	b) Livir	ng Rooms 2	
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities	Number Descri	ption	
a) Kitchen	2		
b) Bathrooms/Showers	4		
c) W.C.s	2		
Licence Detaile			
Licence Details			
Commencement date:	27/06/2013	Duration of licence:	31/03/2018
Maximum number of person	s or households permitt	ed to occupy HMO under conditions	of licence:
Households 10	Persons 10		
Information referred to a	residential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie	cence		
HMO - Elec Mandatory conds,	HMO - Fire Locks, HMO -	- Fire Mandatory conds, HMO - Furnitur	
conds, HMO - Gas Mandatory	,	Kitchen 6, HMO - Property Chges Mand	atory conds,

HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



# Licence No.

### 2013/02743/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Top Floor Flat 14 Egremont Place Brighton BN2 0GA

Ward

Queen's Park

Name & Address of Licence Holder	
Mr Nicholas Monti, 140 Longhill Road Brighton BN2 7BD	
Name & Address of Person Managing	
,	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms Total Number of Rooms 6	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Fl	ats: 0
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers	
c) W.C.s	
License Details	
Licence Details	
Commencement date: 26/07/2013 Duration of licence:	24/02/2018
Maximum number of persons or households permitted to occupy HMO under conditions	s of licence:
Households 6 Persons 6	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
•	

Summary of conditions of licence

Enlargement of bedrooms, Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Other Fire Works, Structural Fire Works, Structural Works



# Licence No.

#### 2013/02744/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 47 St Mary Magdalene Street Brighton BN2 3HU

Ward

St. Peter's And North Laine

lame & Address of Licence Holder
1r Alfred Haagman, 91 Holland Road Hove BN3 1JP
lame & Address of Person Managing
avilion Properties Ltd, 128-129 Lewes Road Brighton BN2 3LG
Department Department on
Property Description Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3
lumber of Rooms Total Number of Rooms 5
) Sleeping b) Living Rooms
lumber of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
hared Amenities  ) Kitchen  ) Bathrooms/Showers  ) W.C.s
icence Details
Commencement date: 15/08/2013 Duration of licence: 14/04/2018
laximum number of persons or households permitted to occupy HMO under conditions of licence:
louseholds 5 Persons 5
nformation referred to a residential property tribunal or Lands Tribunal:
lone
Pecision of Tribunal Reference number

Additional facilities, Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO -Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO -Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works, additional facilities, other fire works, structural fire works, structural fire works



# Licence No.

### 2013/02772/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 249 Queens Park Road Brighton BN2 9XJ

Ward

Hanover And Elm Grove

Name & Address of Licence Holder					
Mr Trevor Stacey, South Lodge Castlehill Rotherfield TH6 3RR					
MI Trevol Stacey, South Louge Castletilli Rotherheid Tho SRR					
Name & Address of Person Managing					
Mr Dan Lyons, T/A Brighton Accommodation Agency 79 Sutton Drove Seaford BN25 3NN					
, , , , , , , , , , , , , , , , , , ,					
Property Description					
Short description of licensed HMO (No of storeys, etc)					
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 8, No of Storeys = 3					
Number of Rooms Total Number of Rooms 8					
a) Sleeping b) Living Rooms					
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0					
Shared Amenities  A) Kitchen  b) Bathrooms/Showers  c) W.C.s					
Licence Details					
Commencement date: 09/12/2015 Duration of licence: 19/02/2019					
Maximum number of persons or households permitted to occupy HMO under conditions of licence:					
Households 8 Persons 8					
Information referred to a residential property tribunal or Lands Tribunal:					
None					
Decision of Tribunal Reference number					

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



# Licence No.

### 2013/02833/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 6 Ditchling Road Brighton BN1 4SF

Ward

St. Peter's And North Laine

Nome 9 Address of License Holder	
Name & Address of Licence Holder	
Mr Stav Mason, 32 Port Hall Place Brighton BN1 5PN	
No O Address of Dones of Managers	
Name & Address of Person Managing	
,	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 4	
Number of Rooms Total Number of Rooms	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont.	Flats: 0
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers	
c) W.C.s	
Licence Details	
Commencement date: 24/07/2013 Duration of licence:	27/02/2018
M. I	
Maximum number of persons or households permitted to occupy HMO under condition	ons of licence:
Households Persons 5	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Ventilation



# Licence No.

### 2013/02838/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 40 Providence Place Brighton BN1 4GE

Ward

St. Peter's And North Laine

Name & Address of Licence	Holder		
Mr Ian Pennicard, 11 Copse Hill	Singinion Biv i 5GA		
Name & Address of Person	Managing		
Name & Address of Ferson	Managing		
,			
Property Description			
Short description of licensed H	IMO (No of storevs. etc)		
Property Type = SHARED HOUS			
Troperty Type - STIAINED TIOUS	L, NO OF OTHES - 1, Occup	dancy = 3, No or Storeys = 3	
Number of Rooms	Total Number of Ro	ooms 5	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Flat	s: 0
Shared Amenities	Number Descript	ion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Licence Details			
Commencement date:	20/08/2013	Duration of licence:	09/04/2018
Maximum number of persons of	or households permitted	I to occupy HMO under conditions	of licence:
Households 5 P	Persons 5		
Information referred to a res	sidential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summany of conditions of lices			

Additional facilities, Electrical works, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO -Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Heating, Structural fire works



# Licence No.

### 2013/02839/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

13 Lucraft Road Brighton BN2 4PN

Ward

Moulsecoomb And Bevendean

Name & Address of Licence	Holder		
Mr David Hoffbrand, 64 Langdale			
Name & Address of Person N	Managing		
MTM Property Services Ltd, 108A	Lewes Road Brighton	BN2 4AE	
Property Description			
Short description of licensed HI	MO (No of storeys, etc	s)	
Property Type = SHARED HOUSE	E, No of Units = 1, Occu	upancy = 8, No of Storeys = 3	
Number of Rooms	Total Number of R	ooms 8	
a) Sleeping	b) Living	g Rooms	
Number of Self Contained Flats:	0	Number of Non Self Cont. Flat	s: 0
Shared Amenities N	umber Descrip	tion	
a) Kitchen	uniber Descrip	don	
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
	40/00/0040	D. offers (II)	00/05/0040
Commencement date:	16/09/2013	Duration of licence:	06/05/2018
Maximum number of persons or	households permitte	d to occupy HMO under conditions	of licence:
Hawaahalda 0 Ba			
Households 8 Pe	ersons 8		
Information referred to a resi	dential property tril	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

#### Summary of conditions of licence

Fire alarm work, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Bedrooms, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other fire works, Structural fire works



# Licence No.

### 2013/03002/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

13 St Pauls Street Brighton BN2 3HR

Ward

St. Peter's And North Laine

Name & Address of Licence	Holder		
Mr & Mrs Ian & Joanne Bunday, 1		hton BN1 1AL	
in a mo ian a coamic Banaay, i	o 11 imaalo oli ool bilg		
Name & Address of Person I	Managing		
Brighton Accommodation Agency	, 74 Lewes Road Bright	on BN2 3HZ	
Property Description			
Short description of licensed H	MO (No of storeys, etc	<del>:</del> )	
Property Type = SHARED HOUS	E, No of Units = 1, Occu	upancy = 6, No of Storeys = 4	
Number of Decre-	Tatal Namehouse CD		
Number of Rooms	Total Number of R		
a) Sleeping	b) Living	g Rooms	
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flat	:s: 0
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s	lumber Descrip	tion	
Licence Details			
Commencement date:	03/10/2013	Duration of licence:	13/05/2018
Maximum number of persons o	r households permitte	d to occupy HMO under conditions	of licence:
Households 6 Po	ersons 6		
Information referred to a res	idential property trib	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Not Assigned, Structural fire works, Ventilation, additional facilities, other fire works, structural fire works



# Licence No.

### 2013/03005/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

103 Lansdowne Place Hove BN3 1FN

Ward

Brunswick And Adelaide

Name & Address of Licence Holder				
Ms Heng Wong, 2 Northease Gardens Hove BN3 8PR				
Name & Address of Person Managing				
Q Lets, 194 Lewes Road Brighton BN2 3LA				
Property Description				
Short description of licensed HMO (No of storeys, etc)				
Property Type = SHARED HOUSE, No of Units = 10, Occupancy = 10, No of Storeys = 5				
Number of Rooms Total Number of Rooms 10				
a) Sleeping b) Living Rooms				
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0				
Shared Amenities Number Description				
a) Kitchen				
b) Bathrooms/Showers				
b) Bathrooms/Showers c) W.C.s				
Licence Details				
W.C.s	3			
Licence Details	3			
Licence Details  Commencement date: 10/09/2013 Duration of licence: 03/06/2018  Maximum number of persons or households permitted to occupy HMO under conditions of licence:	3			
Licence Details  Commencement date: 10/09/2013 Duration of licence: 03/06/2013	3			
Licence Details  Commencement date: 10/09/2013 Duration of licence: 03/06/2018  Maximum number of persons or households permitted to occupy HMO under conditions of licence:	3			
Licence Details  Commencement date: 10/09/2013 Duration of licence: 03/06/2013  Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households 10 Persons 10	3			
Licence Details  Commencement date: 10/09/2013 Duration of licence: 03/06/2013  Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households 10 Persons 10  Information referred to a residential property tribunal or Lands Tribunal:	3			

Additional Facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Heating 5, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Works, structural fire works



# Licence No.

### 2013/03007/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

2 Widdicombe Way Brighton BN2 4TG

Ward

Moulsecoomb And Bevendean

Name & Address of Lice	nce Holder	
Mr Paul Cousins, Flat 2 8 Ch	ichester Terrace Brighton BN2 1FG	
Name & Address of Pers		
S J Lettings Ltd, 52 Lewes R	oad Brighton BN2 3HW	
Property Description		
	ed HMO (No of storeys, etc)	
Property Type = SHARED H	OUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 8	
a) Sleeping ###	b) Living Rooms 1	
Number of Self Contained	Flats: 0 Number of Non Self Cont. Flats:	1
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description  1 1 1 1	
Licence Details		
Common and data:	A0/00/2042	04/02/2049
Commencement date:	10/09/2013 Duration of licence:	04/03/2018
Maximum number of perso	ns or households permitted to occupy HMO under conditions of I	icence:
Households 5	Persons 5	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of HMO - Elec Mandatory cond	licence s, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HI	MO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs



# Licence No.

### 2013/03043/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

47 Ventnor Villas Hove BN3 3DB

Ward

Central Hove

Name & Address of Licen	ce Holder		
Mr Chris Unitt, Basement Flat		3 3DB	
Name & Address of Perso	n Managing		
,			
Branarty Description			
Property Description  Short description of licensed	HMO (No of storeys, etc.)		
Property Type = SHARED HO	-	ancy = 9. No of Storeys = 5	
Troperty Type – OFFARED FIO	50L, 140 of Office – 5, Occup	aricy = 9, No or Otorcys = 5	
Number of Rooms	Total Number of Ro	oms 9	
a) Sleeping	b) Living	Rooms	
	-		
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Descripti	on	
Licence Details			
_			
Commencement date:	06/08/2013	Duration of licence:	22/04/2018
Maximum number of person	s or households permitted	to occupy HMO under conditions	of licence:
Households 9	Persons 9		
Information referred to a I	esidential property tribu	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other fire works, Structural fire works



# Licence No.

### 2013/03047/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

51 Hartington Road Brighton BN2 3LJ

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder		
Mr George Layton, 8 Lyndale		2 2PY	
Name & Address of Perso	n Managing		
,			
D			
Property Description	LUMO (No of otomo	etc)	
Short description of license	•	•	
Property Type = SHARED HO	USE, No of Units = 1	1, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Numbe	er of Rooms 6	
a) Sleeping 6	b	) Living Rooms 1	
Number of Self Contained Fl	ats:	0 Number of Non Self Cont. Fla	ats: 0
Shared Amenities	Number D	escription	
a) Kitchen	2		
b) Bathrooms/Showers c) W.C.s	2		
5, 11.5.5			
Licence Details			
Commencement date:	13/09/2013	Duration of licence:	21/05/2019
Commencement date:	13/09/2013	Duration of licence:	21/05/2018
Maximum number of person	s or households pe	ermitted to occupy HMO under conditions	s of licence:
Households 6	Persons 6	3	
<u> </u>	<u> </u>		
Information referred to a	residential proper	rty tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie		ory conds. HMO - Furniture Mandatory cond	le HMO - Gae

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works, Ventilation



# Licence No.

### 2013/03061/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

15 Nyetimber Hill Brighton BN2 4TL

Ward

Moulsecoomb And Bevendean

Name & Address of Licence	e Holder		
Mr George Layton, 8 Lyndale Av	enue London NW2 2PY		
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed I	HMO (No of storeys, etc		
Property Type = SHARED HOUS			
N	Tatal Name to a CD		
Number of Rooms	Total Number of Ro		
a) Sleeping	b) Living	Rooms	
Number of Self Contained Flat	s: 0	Number of Non Self Cont. Flat	s: 0
Trainibor or oon contained riac	<u> </u>	Number of Nem con contain at	<b>5</b>
Shared Amenities	Number Descript	ion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
•	10/00/0010	<b>5</b>	04/05/0040
Commencement date:	13/09/2013	Duration of licence:	21/05/2018
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
Households 6	Persons 6		
Information referred to a re	sidential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Additional Facilities, Electrical Works, Fire alarm, structural & other fire wks, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



# Licence No.

#### 2013/03348/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

37 Hertford Road Brighton BN1 7GG

Ward

Hollingdean And Stanmer

Name & Address of Licence Holder	
Mr Dan Williams, 16 Beresford Close Saltford Bristol BS31 3HU	
Name & Address of Person Managing	
Pembertons (Brighton) Ltd, 108 Dyke Road Brighton BN1 3TE	
Dronorty Dogovintion	
Property Description Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Property Type – STIANED HOUSE, No of Office – 1, Occupancy – 3, No of Storeys – 3	
Number of Rooms Total Number of Rooms 5	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Con	nt. Flats: 0
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s	
Licence Details	
Commencement date: 13/04/2015 Duration of licence:	04/06/2018
Maximum number of persons or households permitted to occupy HMO under condi	tions of licence:
Households 5 Persons 5	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference numbers	oer
Summary of conditions of licence	

Aditional facilities, HMO - Elec Mandatory conds, HMO - Fire General 1, HMO - Fire General 2, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Management/repairs, Other fire works, Structural fire works, Ventilation



# Licence No.

#### 2013/03354/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

2 Scott Road Hove BN3 5HN

Ward

Wish

Name & Address of Licen	ice Holder		
Mr Mark Dyer, 76 Old Shoreha	am Road Hove BN3 6HL		
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storevs. etc)		
Property Type = SHARED HO		ancv = 5. No of Storevs = 3	
Number of Rooms	Total Number of Ro	oms 5	
a) Sleeping	b) Living I	Rooms	
Normalis and Colf Countries of F	1-4	November of New Oalf Court Flat	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flat	<b>s</b> : 0
Shared Amenities	Number Description	on	
a) Kitchen	-		
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
0	47/04/0044	Donation of linear	04/00/0040
Commencement date:	17/01/2014	Duration of licence:	04/06/2018
Maximum number of person	s or households permitted	to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Information referred to a	residential property tribu	ınal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Additional Facilities, Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Works, Structural Fire Works



# Licence No.

### 2013/03404/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

134 Westbourne Street Hove BN3 5FB

Ward

Westbourne

Name & Address of Licence Holder	
Mr Stuart Horwood, Old Brambles House Fletching Common BN8 4JH	
<del>-</del>	
Name & Address of Person Managing	
Ms Veera Vilpponen, 64 St James's Street, Brighton, BN2 1PJ	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 6, Occupancy = 6, No of Storeys = 3	
Number of Rooms Total Number of Rooms 6	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	s: 0
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers c) W.C.s	
Licence Details	
00/00/0040 Pureling of linear	04/04/0040
Commencement date: 28/08/2013 Duration of licence:	24/04/2018
Maximum number of persons or households permitted to occupy HMO under conditions of	of licence:
Households 6 Persons 6	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	

Electrical works, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / repairs, Not Assigned, structural fire works



# Licence No.

### 2013/03421/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

First To Third Floor Flat 179 Church Road Hove BN3 2AB

Ward

Central Hove

Name & Address of Licen	ce Holder		
Mr Frag Elbaccush, 90 New Ch	nurch Road Hove BN3 4JA	<b>\</b>	
Name & Address of Perso	n Managing		
,			
D			
Property Description	LUMO (No of storous sto		
Short description of licensed	•		
Property Type = SHARED HOL	JSE, NO OT UNITS = 1, OCCL	upancy = 5, No of Storeys = 5	
Number of Rooms	Total Number of R	dooms 5	
a) Sleeping	b) Livin	g Rooms	
Number of Self Contained Fla	ats: 0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities a) Kitchen b) Bathrooms/Showers	Number Descrip	otion	
c) W.C.s			
Licence Details			
Commencement date:	11/10/2013	Duration of licence:	05/06/2018
Maximum number of persons	or households permitte	ed to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Information referred to a r	esidential property tril	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Additional facilities, Fire alarm works, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/repairs, Other fire works, Structural fire works, Ventilation



# Licence No.

#### 2013/03504/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

18A Dyke Road Brighton BN1 3JA

Ward

St. Peter's And North Laine

Name & Address of Licence	Holder		
Deanway Properties Ltd, 5 Tongo	dean Road Hove BN3 6QB		
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed F	IMO (No of storeys, etc)		
Property Type = SHARED HOUS	SE, No of Units = 5, Occupan	cy = 5, No of Storeys = 4	
Number of Rooms	Total Number of Room	ns 5	
a) Sleeping	b) Living Ro	oms	
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Flats	s: 0
Number of Sen Contained Flats	<b>.</b> 0	Number of Non Self Cont. Flats	s. <u>U</u>
Shared Amenities	Number Description		
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
		Γ	
Commencement date:	25/10/2013	Duration of licence:	13/05/2018
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
Households 5 P	Persons 5		
Information referred to a res	sidential property tribuna	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
O			

#### Summary of conditions of licence

Additional facilities, Fire alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Structural fire works



# Licence No.

### 2013/03509/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 68 Tisbury Road Hove **BN3 3BB** 

Ward

Central Hove

Name & Address of Licence	Holder		
Mrs M A Al -Bahrani, The Paddoc	ks Malthouse Lane Hurspie	rpoint BN6 9JZ	
Name & Address of Person I	Managing		
,			
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 6, Occupar	acy = 6, No of Storeys = 4	
	<b>-</b>	_	
Number of Rooms	Total Number of Roon	ns 6	
a) Sleeping	b) Living Ro	ooms	
		_	,
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flats	: 0
	lumber Description	ı	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	25/10/2013	Duration of licence:	03/04/2018
Maximum number of persons o	r households nermitted to	occupy HMO under conditions o	f licence:
		socupy rime under containone c	
Households 6 Pe	ersons 6		
Information referred to a res	idential property tribun	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licen	00		

Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs



# Licence No.

### 2013/03512/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

5 Addison Road Hove BN3 1TN

Ward

Goldsmid

Name & Address of Licence Holder	
Ms Anita Maczka, 12 Addison Road Hove BN3 1TN	
Name & Address of Person Managing	
Gabriela Duplain, 8 Melville Road Hove BN3 1TH	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 5, Occupancy = 5, No of Storeys = 3	
Number of Rooms Total Number of Rooms 5	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Fla	ts: 0
Number of Self Contained Flats.	is. U
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers	
c) W.C.s	
Licence Details	
Licence Details	
Commencement date: 08/09/2015 Duration of licence:	12/05/2018
Maximum number of persons or households permitted to occupy HMO under conditions	of licence:
Households 5 Persons 5	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of licence	

HMO - Elec Mandatory conds, HMO - Fire Doors 1, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Not Assigned, Structural fire works, other fire works, structural fire works, structural fireworks



# Licence No.

### 2013/03605/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

18 Vere Road Brighton BN1 4NR

Ward

St. Peter's And North Laine

N			
Name & Address of Licence			
Mr David Fowler, 5 Clifford Road	Droitwich Spa Worcs Wi	R9 8UR	
Name & Address of Person	Managing		
,			
Down to Down to the			
Property Description	WO (1) . 5		
Short description of licensed H	-		
Property Type = SHARED HOUS	E, No of Units = 1, Occu	pancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Ro	ooms 6	
a) Sleeping	b) Living		
a) Sieeping	b) Living	TOOMS	
Normalis and Calif Campballing of Flater		North or of North Cold Court Flor	
Number of Self Contained Flats	0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities	Number Descript	tion	
a) Kitchen	tullibel Descript		
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
	10/00/00 10	<b>5</b>	0.4/0.5/0.40
Commencement date:	18/09/2013	Duration of licence:	21/05/2018
Maximum number of persons of	r households permitte	d to occupy HMO under conditions	of licence:
	_		
Households 6 P	ersons 6		
Information referred to a res	ridential property trib	unal or Lands Tribunal:	
None	ndential property trib	dinar or Lanus Inibunai.	
Decision of Tribunal		Reference number	
Decision of Lunduigi		Keierence number	
• · · · · · · · · · · · · · · · · · · ·			

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Ventilation



# Licence No.

#### 2013/03607/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

136 Lewes Road Brighton BN2 3LG

Ward

Hanover And Elm Grove

Name & Address of Licence H	lolder		
Mr Abbas Ahmed, 10-12 Lewes Ro	ad Brighton BN2 3HP		
Name & Address of Person M	anaging		
,			
Property Description			
Short description of licensed HM	O (No of storeys, etc	:)	
Property Type = SHARED HOUSE	, No of Units = 1, Occı	upancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of R	ooms 6	
a) Sleeping		g Rooms	
	~,		
Number of Self Contained Flats:	0	Number of Non Self Cont. Flat	:s: 0
	ımber Descrip	tion	
a) Kitchen b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	07/04/2015	Duration of licence:	13/06/2018
Maximum number of persons or	households permitte	ed to occupy HMO under conditions	of licence:
•			
Households 6 Pe	rsons 6		
Information referred to a resid	dential property tril	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licence	e		

Additional facilities, HMO - Elec Mandatory conds, HMO - Fire General 1, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Loft insulation, Management/Repairs, Not Assigned, Other fire works, Structural Fire Works, Structural fire works, Ventilation, other fire works



# Licence No.

### 2013/03651/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

110A St Georges Road Brighton BN2 1EA

Ward

Queen's Park

Name & Address of Licen			
110 St Georges Road Ltd, 2 G	oldstone Street Hove BN3 3RJ		
Name & Address of Perso	n Managing		
Greenfend Ltd T/a Cambridge	Residential, 117 - 118 Westerr	Road Hove BN3 1DB	
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HO	JSE, No of Units = 1, Occupar	ncy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Roon	ns 5	
	b) Living Ro		
a) Sleeping	b) Living Kc	JOHIS	
N		] N - 1 (N 0-160 4 Flate	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Flats	: 0
Shared Amenities	Number Description		
a) Kitchen	Number Description	•	
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commonoment data	26/11/2012	Duration of licence:	02/05/2019
Commencement date:	26/11/2013	Duration of licence:	02/05/2018
Maximum number of persons	s or households permitted to	occupy HMO under conditions o	f licence:
Households 5	Persons 5		
1 lousellolus	1 0130113		
Information referred to a r	esidential property tribun	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic	eonco		

Additional Facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



# Licence No.

### 2013/03658/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

21-24 Montpelier Road Brighton BN1 2LQ

Ward

Regency

Name & Address of Licence Holder
Harman (Plant Hire) Ltd, Unit 6 The Hyde Business Park Bevendean Brighton BN2 4JE
Name & Address of Person Managing
Mrs Vivien Sayers, Unit 6 The Hyde Business Park Bevendean Brighton BN2 4JE
Pura un de la Para minetia de
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 49, Occupancy = 49, No of Storeys = 5
Number of Rooms Total Number of Rooms 49
a) Sleeping b) Living Rooms
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
Shared Amenities Number Description
a) Kitchen
a) Kitchen b) Bathrooms/Showers
a) Kitchen
a) Kitchen b) Bathrooms/Showers
a) Kitchen b) Bathrooms/Showers c) W.C.s
a) Kitchen b) Bathrooms/Showers c) W.C.s
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 30/10/2013 Duration of licence: 09/05/2018
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 30/10/2013 Duration of licence: 09/05/2018  Maximum number of persons or households permitted to occupy HMO under conditions of licence:
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 30/10/2013 Duration of licence: 09/05/2018
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 30/10/2013 Duration of licence: 09/05/2018  Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households 49 Persons 49
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 30/10/2013 Duration of licence: 09/05/2018  Maximum number of persons or households permitted to occupy HMO under conditions of licence:
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 30/10/2013 Duration of licence: 09/05/2018  Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households 49 Persons 49  Information referred to a residential property tribunal or Lands Tribunal:

Fire alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Works, Other fire works, Structural fire works, other fire works



# Licence No.

### 2013/03663/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

47 Islingword Road Brighton BN2 9SF

Ward

Hanover And Elm Grove

·	<u> </u>			
Name & Address of Licence	Holder			
Ms Beatrice Birtwell, 47 Belgrave	Street Brighton BN2 9NS	5		
Name & Address of Person	Managing			
,				
Property Description				
Short description of licensed H	MO (No of storeys, etc)			
Property Type = SHARED HOUS	E, No of Units = 1, Occup	pancy = 7, No of Storeys = 3		
. , , .	· · · · · ·			
Number of Rooms	Total Number of Ro	ooms 6		
a) Sleeping	b) Living	Rooms		
Number of Self Contained Flats	<b>:</b> 0	Number of Non Self Cont. Flat	es: 0	
Shared Amenities	Number Descript	ion		
a) Kitchen				
b) Bathrooms/Showers				
c) W.C.s				
L'anna Batalla				
Licence Details				
Commencement date:	04/12/2013	Duration of licence:	29/05/2018	
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
Households 7 P	ersons 7			
Information referred to a res	idential property trib	unal or Lands Tribunal:		
None				
Decision of Tribunal		Reference number		
		rtorororioo mambor		

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Not Assigned



# Licence No.

### 2013/03894/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

40 Stephens Road Brighton BN1 7ER

Ward

Hollingdean And Stanmer

Name & Address of Licen	ce Holder		
Mr Tim Connor, 15 Mount Plea		ield BN5 9ER	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	i HMO (No of storeys, etc)		
Property Type = SHARED HO	JSE, No of Units = 1, Occup	ancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Ro	oms 5	
a) Sleeping	b) Living I	Rooms	
, , ,	, 3		
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Flat	es: 0
Shared Amenities	Number Description	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	18/10/2013	Duration of licence:	24/06/2018
Maximum number of persons	s or households permitted	to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Information referred to a r	esidential property tribu	ınal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



# Licence No.

### 2013/03955/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

4 Egremont Place Brighton BN2 0GA

Ward

Queen's Park

Name & Address of Licence Holder
Wrs & Mr Linda & Steve Harmer-Strange, T/a Grosvenor Properties Tudor Grange 13 The Upper Drive Hove
DNS ECD
Name & Address of Person Managing
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3
Number of Rooms Total Number of Rooms 6
a) Sleeping b) Living Rooms
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1
Shared Amenities Number Description
a) Kitchen
b) Bathrooms/Showers
b) W.C.s
Licence Details
Commencement date: 01/11/2013 Duration of licence: 10/07/2018
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Households 6 Persons 6
nformation referred to a residential property tribunal or Lands Tribunal:
None
Decision of Tribunal Reference number

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Not Assigned, Ventilation



# Licence No.

### 2013/03963/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

17 White Street Brighton BN2 0JH

Ward

Queen's Park

Name & Address of Licence Holder  Mr & Mrs Linda & Steve Harmer-Strange, T/a Grosvenor Properties Tudor Grange 13 The Upper	Drive Hove			
Name & Address of Person Managing				
,				
Property Description				
Short description of licensed HMO (No of storeys, etc)				
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3				
Number of Rooms Total Number of Rooms 6 a) Sleeping b) Living Rooms				
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	s: 0			
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s				
Licence Details				
Commencement date: 01/11/2013 Duration of licence:	10/07/2018			
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
Households 6 Persons 6				
Information referred to a residential property tribunal or Lands Tribunal:				
None				
Decision of Tribunal Reference number				
Common of conditions of licenses				

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Special Conditions



# Licence No.

### 2013/04199/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

36 Camelford Street Brighton BN2 1TQ

Ward

Queen's Park

Name & Address of Licence	Holder		
Maria & Phillip Samouel, Ladyland		ne Horley Surrey RH6 2 IA	
mana & r milip Samouel, Lauyland	TI AIIII WEAUT GIEEN LA	THE FIGURE SUITES IN TO OUT	
Name & Address of Person I	Managing		
	, anaging		
,			
Property Description			
Short description of licensed H	MO (No of storeys, etc	:)	
Property Type = SHARED HOUSI	E, No of Units = 1, Occu	upancy = 8, No of Storeys = 4	
Number of Rooms	Total Number of R	ooms 8	
a) Sleeping	b) Living	g Rooms	
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities N	lumber Descrip	tion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
License Botane			
Commencement date:	29/11/2013	<b>Duration of licence:</b>	20/04/2018
Maximum number of persons of	r housahalds narmitta	d to occupy HMO under conditions	of licence:
maximum number of persons of	nousenoius permitte	d to occupy rimo under conditions	of ficerice.
Households 8 Pe	ersons 8		
Information referred to a res	idential property trik	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



# Licence No.

#### 2013/04214/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

St Helens Rest Home 33 Mile Oak Road Portslade BN41 2PF

Ward

South Portslade

Name & Address of Licence	e Holder			
Mr Russell Pinsent, 23 Tongdea				
Name & Address of Person	Managing			
Mr Dan Lyons, 21 Bramber Road	J Seaford BN25 1AG			
Duran auto Dananiu tian				
Property Description	JMO (No of storous, sto)			
Short description of licensed I	-			
Property Type = SHARED HOUS	SE, NO OF UNITS = 7, Occup	pancy = 7, No of Storeys = 3		
Number of Rooms	Total Number of Ro	ooms 7		
a) Sleeping	b) Living	Rooms		
Number of Self Contained Flat	<b>s</b> : 0	Number of Non Self Cont. Flat	s: 0	
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Descript	ion		
Licence Details				
	00/44/0040		47/07/0040	
Commencement date:	29/11/2013	Duration of licence:	17/07/2018	
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
Households 7	Persons 7			
Information referred to a re	sidential property trib	unal or Lands Tribunal:		
None				
Decision of Tribunal		Reference number		

Summary of conditions of licence

Additional facilities, Fire alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Other fire works, Structural fire works



# Licence No.

### 2013/04241/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 41 Florence Road Brighton BN1 6DL

Ward

**Preston Park** 

Name & Address of Licence	e Holder	
Mr Selmane Medjerab, 41 Flore	nce Road Brighton BN1 6DL	
Name & Address of Persor	n Managing	
,		
Property Description		
Short description of licensed	HMO (No of storeys, etc)	
•	SE, No of Units = 2, Occupancy = 10, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 5	
a) Sleeping	b) Living Rooms	
Number of Self Contained Fla	ts: 0 Number of Non Self Cont. Flats	: 0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description	
Linear British		
Licence Details		
Commencement date:	07/01/2014 Duration of licence:	19/07/2018
Commencement date:	07/01/2014 Duration of licence: or households permitted to occupy HMO under conditions o	
Commencement date:  Maximum number of persons		
Commencement date:  Maximum number of persons  Households 10	or households permitted to occupy HMO under conditions o	
Commencement date:  Maximum number of persons  Households 10	or households permitted to occupy HMO under conditions o	
Commencement date:  Maximum number of persons  Households 10  Information referred to a referred to	or households permitted to occupy HMO under conditions o	

**Summary of conditions of licence**Additional Facilities, Enlargement of Bedrooms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Structural Fire Works, Ventilation



# Licence No.

#### 2013/04435/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 44 Rutland Gardens Hove BN3 5PB

Ward

Westbourne

Name & Address of Licence	e Holder		
Ms Sepideh Dehdashti Haghi, 4		R 5DR	
ins Sepiden Dendashii Hagili, 4	4 Italiana Gardens Hove Divis	) JI D	
Name & Address of Person	n Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOU	SE, No of Units = 1, Occupan	cy = 8, No of Storeys = 3	
Number of Rooms	Total Number of Roon	ns 8	
a) Sleeping	b) Living Ro	ooms	
Nl		] N	
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Flats	s: 0
Shared Amenities	Number Description	1	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	02/05/2014	Duration of licence:	25/02/2018
	02/03/2011		20,02,2010
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
Households 8	Persons 8		
Information referred to a re	esidential property tribun	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lies	200		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs



# Licence No.

### 2013/04445/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 223 Elm Grove Brighton BN2 3EL

Ward

Hanover And Elm Grove

Name & Address of Licenc	e Holder	
Mr Barry Cocum, 4 Beacon Hill		
, , , , , , , , , , , , , , , , , , , ,	3 3	
Name & Address of Persor	ı Managing	
,		
Property Description		
Short description of licensed	HMO (No of storeys, etc)	
Property Type = SHARED HOU	SE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 5	
a) Sleeping 5	b) Living Rooms 1	
Normalism of Oalf Oamtains of Florida	Associated Alexander College County	-1-4
Number of Self Contained Fla	ts: 0 Number of Non Self Cont. I	Flats: 0
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	1	
c) W.C.s		
Licence Details		
Commencement date:	10/04/2015 Duration of licence:	01/08/2018
commencement date.	Juiding of hoofies.	01/00/2010
Maximum number of persons	or households permitted to occupy HMO under conditio	ns of licence:
Households 5	Persons 5	
	<del>-</del>	
	esidential property tribunal or Lands Tribunal:	
	esidential property tribunal or Lands Tribunal:	
Information referred to a re	esidential property tribunal or Lands Tribunal: Reference number	

Electrical works, Enlargement of kitchens, Fire alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/repairs, Structural fire works, Ventilation, additional facilities, loft insulation, other fireworks, structural fire works, structural fireworks



# Licence No.

### 2013/04824/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

44 Viaduct Road Brighton BN1 4ND

Ward

St. Peter's And North Laine

Name & Address of Lice	ce Holder	
	range Infinite 27 Grange Road Singapore 23970	0
Name & Address of Pers	on Managing	
S J Lettings Ltd, 52 Lewes Ro	ad Brighton BN2 3HW	
Property Description		
Short description of license	, , ,	
Property Type = SHARED HC	USE, No of Units = 1, Occupancy = 5, No of Sto	reys = 3
Number of Rooms	Total Number of Rooms 5	
a) Sleeping	b) Living Rooms	
Number of Self Contained F	lats: 0 Number of No	on Self Cont. Flats: 0
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Commencement date:	07/01/2014 <b>Duration of</b>	licence: 21/08/2018
Marrian and a second	a ar have hald manneitted to a council INO	nder conditions of licenses
waximum number of persor	s or households permitted to occupy HMO u	nder conditions of licence:
Households 5	Persons 5	
Information referred to a	residential property tribunal or Lands Tr	bunal:
None		
Decision of Tribunal	Refer	ence number
Summary of conditions of li	cence HMO - Fire Mandatory conds HMO - Furniture	Mandatory conds HMO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Ventilation



# Licence No.

### 2013/04833/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 21 Viaduct Road Brighton BN1 4NB

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
Sanjeev Dhuna, 48 Woodland			
Sanjeev Dhuna, 46 Woodiand	DIIVE HOVE BINS ODL		
Name & Address of Perso	n Managing		
S J Lettings Ltd, 52 Lewes Ro			
3 J Lettings Ltd, 32 Lewes No.	ad Brighton Biv2 31100		
Property Description			
Short description of licensed	d HMO (No of storeys, etc	:)	
· Property Type = SHARED HO	•	•	
Troporty Type Office 2010	, 110 of office 1, 0000	aparity 6, 116 of otology 1	
Number of Rooms	Total Number of R	cooms 7	
a) Sleeping 6	b) Livin	g Rooms 1	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities	Number Descrip	tion	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	30/01/2014	Duration of licence:	20/08/2018
commencement date.	30/01/2014	Duration of ficerice.	20/00/2010
Maximum number of person	s or households permitte	d to occupy HMO under conditions	of licence:
Households 6	Persons 6		
nousellolus	reisons 0		
Information referred to a	residential property tri	bunal or Lands Tribunal:	
None	, , , , , , , , , , , , , , , , ,		
Decision of Tribunal		Reference number	
Summary of conditions of lie	ence		

Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Works, Structural Fire Works, Ventilation



# Licence No.

### 2013/04836/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

139 Lewes Road Brighton BN2 3LG

Ward

Hanover And Elm Grove

Name & Address of Licence Holder		
Mr Craig Dwyer-Smith, 26 Hove Park Way Hove BN3 6PT		
Name & Address of Person Managing		
Mr Dan Lyons, 21 Bramber Road Seaford BN22 1AG		
D		
Property Description Short description of licensed HMO (No of storeys, etc)		
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3		
Number of Rooms 7		
a) Sleeping b) l	Living Rooms	
Number of Self Contained Flats: 0	Number of Non Self Cont. Flats:	0
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s	scription	
Licence Details		
Commencement date: 13/12/2013	Duration of licence:	13/08/2018
Maximum number of persons or households permitted to occupy HMO under conditions of licence:		
Households 6 Persons 6		
Information referred to a residential property tribunal or Lands Tribunal:		
None		
Decision of Tribunal	Reference number	
Common of conditions of license		

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2013/04988/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

25 Bedford Place Brighton BN1 2PT

Ward

Regency

Name & Address of Licence Holder		
	odon E44 OTD	
Heathfell Ltd, 42 Preston Drive Wanstead Lon	ndon E11 21B	
Name & Address of Person Managing		
Mr R P Stevens, 51 Wilbury Cresence Hove E	RN3 6E I	
WILLY OLEVENS, 31 WINDLY OF SCHOOL HOVE L	5140 01 0	
Property Description		
Short description of licensed HMO (No of s	storeys, etc)	
Property Type = SHARED HOUSE, No of Uni		
	e, escapancy e, no or exercise	
Number of Rooms Total N	umber of Rooms 9	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	0
Shared Amenities Number	Description	
a) Kitchen		
b) Bathrooms/Showers		
c) W.C.s		
Licence Details		
40/04/	D 41 - 41	00/05/0040
Commencement date: 10/01/2	2014 Duration of licence:	06/05/2018
Maximum number of persons or household	ds permitted to occupy HMO under conditions of I	icence:
Households 9 Persons	9	
Information referred to a residential pr	roperty tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence		

Additional Facilities, Additional facilities, Additional facilities, Electrical works, Fire alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Structural fire works



#### Licence No.

#### 2013/04994/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

18 Campbell Road Brighton BN1 4QD

Ward

Preston Park

Name & Address of Licen	ice Holder		
Mr Nicholas Wurr, 20 Upper W	Vellington Road Brighton BN2 3AN		
Name & Address of Perso	on Managing		
MTM Property Services Ltd, 1	08A Lewes Road Brighton BN2 4AE		
Property Description			
Short description of license	• • • •		
Property Type = SHARED HO	PUSE, No of Units = 1, Occupancy = , N	No of Storeys = 3	
Number of Rooms	Total Number of Rooms 9	)	
a) Sleeping	b) Living Rooms		
	, ,		
Number of Self Contained F	lats: 0 Num	ber of Non Self Cont. Flats:	1
Shared Amenities	Number Description		
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	2		
Licence Details			
Commencement date:	27/03/2014 <b>D</b> u	uration of licence:	20/08/2018
Maximum number of person	s or households permitted to occup	by HMO under conditions of	icence:
		•	
	Persons		
Households 0	1 0130113		
		ands Tribunal:	
	residential property tribunal or L	ands Tribunal:	
Information referred to a		ands Tribunal:	

**Summary of conditions of licence**Additional Facilities, Electrical works, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO -Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO -Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Manangement / Repairs



#### Licence No.

#### 2013/05000/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

35 Uplands Road Brighton BN1 7FA

Ward

Hollingdean And Stanmer

Name & Address of Licenc	o Holder		
Mr David Tamplin, 50 Honey Cr			
TWI David Tamplin, 50 Honey Ch	Jit Hangleton Hove BN3 6EZ		
Name & Address of Persor	n Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOU	SE, No of Units = 1, Occupan	cy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Roon	ns 6	
a) Sleeping	b) Living Ro	oms	
Number of Self Contained Fla	ts: 0	Number of New Solf Cont. Elete	.: 0
Number of Self Contained Fla	18:	Number of Non Self Cont. Flats	. 0
Shared Amenities	Number Description		
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	29/11/2013	Duration of licence:	02/09/2018
Maximum number of persons	or households permitted to	occupy HMO under conditions o	f licence:
	-		
Households 6	Persons 6		
Information referred to a re	sidential property tribun	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lies			

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other fire safety works, Structural fire works



#### Licence No.

#### 2013/05049/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 2 Marlow Road Brighton BN2 5NB

Ward

**East Brighton** 

Name & Address of Licence	Holder		
Mr Simon Maguire, 3-6 Ship Stre	et Brighton BN1 1AD		
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 5, Occup	ancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Ro		
a) Sleeping	b) Living	Rooms	
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Fla	ts: 0
Number of Self Contained Flats	0	Number of Non Sen Cont. Fla	0
Shared Amenities I	Number Descripti	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
_			
Commencement date:	04/12/2013	Duration of licence:	02/09/2018
Maximum number of persons of	or households permitted	to occupy HMO under conditions	of licence:
Households 6 P	_		
	ersons 6		
Information referred to a res		unal or Lands Tribunal:	
Information referred to a res		unal or Lands Tribunal:	
		unal or Lands Tribunal:  Reference number	

Electrical Works, Fire - Under Stairs 1, Fire Alarms, General, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Doors 1, HMO - Fire Doors 3, HMO - Fire Doors 5, HMO - Fire Emergency Lighting 3, HMO - Fire General 1, HMO - Fire Locks, HMO - Fire Mandatory conds, HMO - Fire Notices 1, HMO - Fire Test Certificates, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - General 1, HMO -General 2, HMO - General 6, HMO - General 7, HMO - General Building Regs, HMO - General Electrical 1, HMO - General Electrical 2, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / repairs, Structural Fire Works, Structural fire works, Ventilation, structural fire works





#### Licence No.

#### 2013/05051/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

42 Trafalgar Road Portslade BN41 1GR

Ward

South Portslade

Name & Address of Licence Hold	ler	
Mr Robin Askwith, 41 Stonecross Road	Brighton BN2 4PQ	
Name & Address of Person Mana	ging	
,		
Property Description		
Short description of licensed HMO (N	No of storevs, etc.)	
	of Units = 5, Occupancy = 5, No of Storeys = 3	
Property Type – STIANED HOUSE, NO	of offits = 3, Occupancy = 3, No of Storeys = 3	
Number of Rooms To	otal Number of Rooms 6	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	0
Shared Amenities Number	er Description	
a) Kitchen b) Bathrooms/Showers		
c) W.C.s		
Licence Details		
Commencement date:	19/11/2013 Duration of licence:	02/09/2018
Maximum number of persons or hou	seholds permitted to occupy HMO under conditions of I	icence:
Households 5 Person	s 5	
Information referred to a resident	tial property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence Fire - Under Stairs 1 Fire FL/GL/Cuph	opards 6, HMO - Elec Mandatory conds, HMO - Fire Alarm S	Systems 3

Fire - Under Stairs 1, Fire EI / GI / Cupboards 6, HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 3, HMO - Fire Blanket, HMO - Fire Doors 5, HMO - Fire Emergency Lighting 1, HMO - Fire Mandatory conds, HMO - Fire Notices 1, HMO - Fire Walls 1, HMO - Fire Walls 3, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Not Assigned



#### Licence No.

#### 2013/05097/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

40 Hillside Brighton BN2 4TA

Ward

Moulsecoomb And Bevendean

Name & Address of Licence	Holder		
Mr Ian Ginn, 19 Malthouse Way 0			
wii ian Giiin, 19 Maiinouse Way C	DOURSHINGE DINT SET		
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Occu	pancy = 5, No of Storeys = 3	
Normals are of Document	Tatal Namehay (D	<b>F</b>	
Number of Rooms	Total Number of Ro		
a) Sleeping	b) Living	Rooms	
Number of Self Contained Flats	o: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities	Jumber Descript	ion	
a) Kitchen	Number Descript		
b) Bathrooms/Showers			
c) W.C.s			
C) W.O.3			
Licence Details			
_	22/22/22/2		10/00/00/0
Commencement date:	08/09/2015	Duration of licence:	10/09/2018
Maximum number of persons o	r households permitted	d to occupy HMO under conditions	of licence:
Households 5 P	ersons 5		
	الماد معادما الماد	al and and Tribunal	
	adential property trib	unaror Lands Tribunai:	
		Poference number	
Decision of Tribunal		Reference number	
nformation referred to a res None Decision of Tribunal	idential property trib	unal or Lands Tribunal:	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/05102/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

Flat At 82 Preston Road Brighton BN1 6AE

Ward

**Preston Park** 

Name & Address of Licenc	e Holder		
Mrs Gill Taylor, Kingsbury Estat	e 431 Ditchling Road Brigl	nton BN1 6XB	
Name & Address of Persor	Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys, etc		
Property Type = SHARED HOU	•		
Number of Rooms	Total Number of Ro	ooms 6	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Flats:	0
Shared Amenities	Number Descript	tion	
a) Kitchen			
b) Bathrooms/Showers c) W.C.s			
0) 11.0.3			
Licence Details			
Commencement date:	14/04/2014	Duration of licence:	19/08/2018
Maximum number of persons	or households permitte	d to occupy HMO under conditions of	licence:
		a to occupy Timo under conditions of	ncence.
Households 6	Persons 6		
nformation referred to a re	sidential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	Elec Mandatory conds, H	MO - Elec Mandatory conds, HMO - Fire urniture Mandatory conds. HMO - Furnitu	ıre

Fire alarms, Fire alarms, HMO - Elec Mandatory conds, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire works, Other Fire works, Structural fire works





#### Licence No.

#### 2013/05212/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

32 Stanley Road Brighton BN1 4NJ

Ward

St. Peter's And North Laine

ame & Address of Licence Holder
ls Megan Macrorie, Flat 5 50 Highcroft Villas Brighton BN1 5PT
ame & Address of Person Managing
righton Accommodation Agency, 74 Lewes Road Brighton BN2 3HZ
June 19 and 19 a
roperty Description hort description of licensed HMO (No of storeys, etc)
roperty Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3
umber of Rooms Total Number of Rooms 5
) Sleeping b) Living Rooms
umber of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
hared Amenities Number Description
) Kitchen ) Bathrooms/Showers
) Datificottis/Stiowers
) W.C.s
icence Details
) W.C.s
icence Details
icence Details commencement date:  21/01/2014  Duration of licence:  16/09/2018
icence Details  commencement date: 21/01/2014 Duration of licence: 16/09/2018  laximum number of persons or households permitted to occupy HMO under conditions of licence:
icence Details  commencement date: 21/01/2014 Duration of licence: 16/09/2018  laximum number of persons or households permitted to occupy HMO under conditions of licence:
icence Details commencement date:  21/01/2014  Duration of licence:  16/09/2018  laximum number of persons or households permitted to occupy HMO under conditions of licence:  ouseholds  5  Persons  5
icence Details  commencement date: 21/01/2014 Duration of licence: 16/09/2018  laximum number of persons or households permitted to occupy HMO under conditions of licence:  ouseholds 5 Persons 5  information referred to a residential property tribunal or Lands Tribunal:

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Structural Fire Works



#### Licence No.

#### 2013/05265/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

1 Granville Road Hove BN3 1TG

Ward

Goldsmid

Name & Address of Licence	Holder		
Mr Matthew Sorokin, 77A Rutland	l Road Hove BN3 5FE		
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 8, Occupa	ancy = 3, No of Storeys = 3	
		_	
Number of Rooms	Total Number of Roo	ms 3	
a) Sleeping	b) Living R	looms	
Number of Self Contained Flats	0	Number of Non Self Cont. Flats	s: 0
Shared Amenities N	Number Descriptio	n	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	17/03/2014	Duration of licence:	18/09/2018
Maximum number of persons of	r households permitted (	o occupy HMO under conditions o	f licence:
maximum number of persons o	i nousenoius perinitteu t	o occupy rimo under conditions o	i licelice.
Households 3 P	ersons 3		
Information referred to a res	idential property tribu	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of ligan			

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Kitchen 6, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Ventilation



#### Licence No.

#### 2013/05268/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

52 Viaduct Road Brighton BN1 4ND

Ward

St. Peter's And North Laine

Name & Address of Licence	e Holder		
Mr & Mrs M Jafari, 8 Chalfont Dr	ive Hove BN3 6QR		
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed I	HMO (No of storeys, etc)		
Property Type = SHARED HOUS	SE, No of Units = 1, Occupan	cy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Room	ns 5	
a) Sleeping	b) Living Ro	oms	
Number of Self Contained Flat	s: 0	Number of Non Self Cont. Flats	s: 0
Trainibor of Con Containou Flat	<u> </u>	Trained of Non-Con-Cont. Flate	, 0
Shared Amenities	Number Description		
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	08/12/2015	Duration of licence:	09/09/2018
Maximum number of persons	or households permitted to	occupy HMO under conditions of	of licence:
Households 5	Persons 5		
Information referred to a re	sidential property tribun	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
0			

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2013/05270/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 34 Argyle Road Brighton BN1 4QB

Ward

Preston Park

Name & Address of Licence	Holder		
Mr Andrew Au, 11 Beaconsfield V	illas Brighton BN1 6HA		
Name & Address of Person I	Managing		
Ms Leanne Marie Effenberg, 53 D	avey Drive Brighton BN1	7BE	
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Occupa	ancy = 5, No of Storeys = 4	
		_	
Number of Rooms	Total Number of Roo	oms 5	
a) Sleeping	b) Living F	Rooms	
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flats	s: 0
Shared Amenities N	lumber Description	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Licence Details			
Commencement date:	15/04/2015	Duration of licence:	19/09/2018
Maximum number of persons of	r households permitted	to occupy HMO under conditions o	of licence:
		to occupy time under conditions	/
Households 5 Po	ersons 5		
Information referred to a res	idential property tribu	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licen	00		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other fire works



#### Licence No.

#### 2013/05273/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

47 Viaduct Road Brighton BN1 4ND

Ward

St. Peter's And North Laine

Name & Address of Licence	Holder		
Mr Philip Donovan, 8 Nevill Aven	ue Hove BN3 /NA		
Name & Address of Person	Managing		
Name & Address of Person	Managing		
,			
Proporty Description			
Property Description	MO (No of otomove, etc.		
Short description of licensed H			
Property Type = SHARED HOUS	E, No of Units = 1, Occu	ipancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of R	ooms 5	
a) Sleeping	h) Living	Rooms	
a) Sieeping	ט) בועווונָ	J NOOMS	
Number of Self Contained Flats	0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s	Number Descrip	tion	
Licence Details			
Commencement date:	11/02/2014	<b>Duration of licence:</b>	29/09/2018
Maximum number of persons o	r households permitte	d to occupy HMO under conditions	of licence:
Households 5 P	ersons 5		
Information referred to a res	idential property trik	ounal or Lands Tribunal:	
None			
Decision of Tribunal			
Doolololi or Tribuliui		Reference number	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Bedrooms, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Roofs/Chimneys 1, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/05275/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 37 Upper Abbey Road Brighton BN2 0AD

Ward

**East Brighton** 

Name & Address of Licence Holder	
Mr David Phillips, 1A Shek Lung Tsai San Tsuen Po Lo Che Road Sai Kung Hong Kong	
Name & Address of Person Managing	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms 5	
a) Sleeping b) Living Rooms	
Number of Calf Contained Flate.	. 0
Number of Self Contained Flats: 0 Number of Non Self Cont. Flat	s: 0
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers	
W.C.s	
Licence Details	
Commencement date: 07/01/2014 Duration of licence:	19/09/2018
Maximum number of persons or households permitted to occupy HMO under conditions of	of licence:
Households 5 Persons 5	
nformation referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of licence	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other fire works, Structural fire works



#### Licence No.

#### 2013/05277/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

160 Springfield Road Brighton BN1 6DG

Ward

Preston Park

Name & Address of Licence Holder	
Ms Anna Shaw, 73 Hertford Road Brighton BN1 7GG	
Name & Address of Person Managing	
Leo Mortimer, 73 Hertford Road Brighton BN1 7GG	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms Total Number of Rooms 6	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Con	nt. Flats: 0
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers	
c) W.C.s	
Licence Details	
Licence Details	
Commencement date: 05/12/2013 Duration of licence:	18/09/2018
Maximum number of persons or households permitted to occupy HMO under cond	itions of licence:
Households 6 Persons 6	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference num	ber

Summary of conditions of licence

Additional facilities, Electrical works, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other fire works, Structural fire works



#### Licence No.

#### 2013/05436/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

9 Broad Street Brighton BN2 1TJ

Ward

Queen's Park

lame & Address of Licenc	ce Holder		
∕Ir Nicholas Heanen, 21A Bedf	ord Square Brighton BN	N1 2PL	
Name & Address of Perso	n Managing		
Property Description			
Short description of licensed	HMO (No of storeys, o	etc)	
Property Type = SHARED HOU	JSE, No of Units = 8, Oo	ccupancy = 8, No of Storeys = 5	
Number of Rooms	Total Number of	f Rooms 8	
a) Sleeping 8	b) Liv	ving Rooms	
, , , ,	,	<u> </u>	
Number of Self Contained Fla	ats: 2	Number of Non Self Cont. Fla	its: 8
Shared Amenities	Number Desc	ription	
a) Kitchen	5		
o) Bathrooms/Showers	7		
c) W.C.s	7		
icence Details			
Commencement date:	03/01/2014	Duration of licence:	23/09/2018
Johnnencement date.	03/01/2014	Duration of licence.	23/09/2010
Maximum number of persons	or households permi	tted to occupy HMO under conditions	of licence:
Households 8	Persons 8		
•			
nformation referred to a r	esidential property t	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic		conds. HMO - Furniture Mandatory cond	s. HMO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/05501/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

9 Richmond Place Brighton BN2 9NA

Ward

Queen's Park

Name & Address of Licence	e Holder			
Mrs P Mather, 135-137 Dyke Ro				
, ,				
Name & Address of Person	Managing			
,				
Property Description				
Short description of licensed	HMO (No of storeys, et	c)		
Property Type = SHARED HOU	SE, No of Units = 1, Occ	upancy = 6, No of Storeys = 4		
Number of Rooms	Total Number of F	Rooms 6		
a) Sleeping	D) LIVIII	g Rooms		
Number of Self Contained Flat		Number of Non Self Cont. Flat		
Number of Self Contained Flat	ts: 0	Number of Non Self Cont. Fla	ts: 0	
Shared Amenities	Number Descrip	ntion		
a) Kitchen				
b) Bathrooms/Showers				
c) W.C.s				
Licence Details				
Commencement date:	24/01/2014	Duration of licence:	05/09/2018	
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
	_			
Households 6	Persons 6			
Information referred to a re	sidential property tri	bunal or Lands Tribunal:		
None				
Decision of Tribunal		Reference number		

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2013/05505/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

92A Lewes Road Brighton BN2 3HZ

Ward

St. Peter's And North Laine

Name & Address of Licence	te Holder		
Mr Kamber Koluman, 35 Ditchli		SB	
Name & Address of Person	n Managing		
,			
D ( D ) (			
Property Description	LIMO (No of otomore of	-1	
Short description of licensed			
Property Type = SHARED HOL	JSE, No of Units = 5, Occ	upancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of F	Rooms 5	
a) Sleeping	b) Livin	g Rooms	
Number of Self Contained Fla	nts: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities	Number Descrip	otion	
a) Kitchen b) Bathrooms/Showers			
c) W.C.s			
,			
Licence Details			
Commencement date:	17/03/2014	Duration of licence:	04/10/2018
		24.44.0.1 0. 1.00.100.	0 11 10 20 10
Maximum number of persons	or households permitte	ed to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Information referred to a re	esidential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/ Repairs, Other Fire Works, Structural Fire Works



#### Licence No.

#### 2013/05735/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

31 Bentham Road Brighton BN2 9XB

Ward

Hanover And Elm Grove

Name & Address of Licence Holder					
Mr Patrick Williams, 68 Foley Road Claygate Surrey KT10 0ND					
Name & Address of Person Managing					
Mr Ian Wilkinson, T/a Wilkinson Property Services 24 Elm Grove Brighton BN2 3DD					
Property Description					
Short description of licensed HMO (No of storeys, etc)					
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3					
Number of Rooms Total Number of Rooms 7					
a) Sleeping b) Living Rooms					
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0					
Shared Amenities Number Description					
a) Kitchen					
b) Bathrooms/Showers					
c) W.C.s					
Licence Details					
Commencement date: 07/04/2014 Duration of licence: 21/08/2019					
Maximum number of persons or households permitted to occupy HMO under conditions of licence:					
University Demons 0					
Households 6 Persons 6					
Information referred to a residential property tribunal or Lands Tribunal:					
None					
Decision of Tribunal Reference number					
Summary of conditions of licence					

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/05759/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

2 Guildford Street Brighton BN1 3LS

Ward

St. Peter's And North Laine

Name & Address of Licence	Holder		
Mr Reinhardt Slabbert, Hazel Cot		oodingdean Brighton BN2 6DA	
	-	-	
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed H	MO (No of storeys, e	etc)	
Property Type = SHARED HOUS	E, No of Units = 1, Oc	ccupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 5	
a) Sleeping	h) Liv	ing Rooms	
	υ) <u>-</u> ιι		
Number of Self Contained Flats	.: 0	Number of Non Self Cont. Flat	ts: 0
rumber of con contamour late		Number of New Sent Sent. Flat	0
Shared Amenities	lumber Desci	ription	
a) Kitchen		•	
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Electrice Betains			
Commencement date:	10/11/2015	Duration of licence:	09/10/2018
Maximum number of persons of	r households nermit	tted to occupy HMO under conditions	of licence:
			or needlee.
Households 5 P	ersons 5		
Information referred to a res	idential property t	ribunal or Lande Tribunal:	
None	idential property t	ribulial of Lalius Tribulial.	
Decision of Tribunal		Reference number	
Summary of conditions of licen	CE		

Fire - Under Stairs 2, Fire EI / GI / Cupboards 2, Fire EI / GI / Cupboards 3, Fire alarms, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Ceilings 1, HMO - Fire Doors 3, HMO - Fire Emergency Lighting 1, HMO - Fire Mandatory conds, HMO - Fire Notices 1, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Managment/Repairs, Ventilation





Licence No.

2013/05765/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

3 Terminus Road Brighton BN1 3PD

Ward

St. Peter's And North Laine

Nama O Addus a stili	an Haldau		
Name & Address of Licen			
Mr Rama Rahimi, 4 Terminus	Road Brighton BN1 3PD		
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, e	etc)	
Property Type = Not Assigned	, No of Units = 1, Occupa	ancy = 9, No of Storeys = 5	
		•	
Number of Rooms	Total Number of	Rooms 6	
a) Sleeping 6	b) Liv	ing Rooms	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities	Number Descr	ription	
a) Kitchen	6		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commonoment data	17/03/2014	Duration of licenses	19/10/2019
Commencement date:	17/03/2014	Duration of licence:	18/10/2018
Maximum number of person	s or households permit	ted to occupy HMO under conditions	of licence:
	_	1	
Households 9	Persons 9		
Information referred to a	residential property t	ribunal ar Landa Tribunal	
	residential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	cence		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Cleaning, HMO - Licensing Kitchen 6, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/05782/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

81 Redvers Road Brighton BN2 4BF

Ward

Moulsecoomb And Bevendean

ame & Address of Lice	nce Holder		
	urt Road Rottingdean BN2 7I	DL	
·			
ame & Address of Pers	son Managing		
ndrick Property Services L	td, Carlton House 28-29 Car	rlton Terrace Brighton BN41 1UR	
operty Description			
ort description of licens	ed HMO (No of storeys, etc	<b>;</b> )	
operty Type = SHARED H	OUSE, No of Units = 1, Occu	upancy = 5, No of Storeys = 3	
ımber of Rooms	Total Number of R	ooms 9	
[]			
Sleeping ###	D) LIVING	g Rooms 4	
	Flata	Normalis on a fill and October 11	4
mber of Self Contained	Flats: 0	Number of Non Self Cont. Fla	ats: 1
ared Amenities	Number Descrip	tion	
Kitchen	1	alon .	
Bathrooms/Showers	1		
W.C.s	1		
<b>-</b>			
cence Details			
mmencement date:	17/03/2014	Duration of licence:	13/08/2018
ximum number of perso	ns or households permitte	d to occupy HMO under conditions	of licence:
ouseholds 5	Persons 5		
ormation referred to a	residential property trib	bunal or Lands Tribunal:	
ne			
cision of Tribunal		Reference number	
	s, HMO - Fire Mandatory cor	nds, HMO - Furniture Mandatory cond	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs



#### Licence No.

#### 2013/05903/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

10 Islingword Street Brighton BN2 9UR

Ward

Hanover And Elm Grove

Name & Address of Licence	e Holder			
Mrs Linda Jablonski, 17 Montagu	ue Road London SW19	1TB		
Name & Address of Person	Managing			
MTM Property Services Ltd, 108	A Lewes Road Brighton	BN2 4AE		
Dronauty Description				
Property Description  Short description of licensed I	HMO (No of storays, at	·c)		
Property Type = SHARED HOUS	-			
Troperty Type – OFFARED FIOOR	5E, 140 01 011113 - 1, 000	suparity = 3, No or otoreys = 4		
Number of Rooms	Total Number of	Rooms 5		
a) Sleeping	b) Livir	ng Rooms		
Number of Self Contained Flat	s: 0	Number of Non Self Cont. Flat	s: 0	
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Descri	ption		
Licence Details				
Commencement date:	25/03/2014	Duration of licence:	17/10/2018	
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
Households 5	Persons 5			
Information referred to a re	sidential property tr	ibunal or Lands Tribunal:		
None				
Decision of Tribunal		Reference number		

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, fire alarms, loft insulation, other fire works, structural fire works



#### Licence No.

#### 2013/05904/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

89A Rose Hill Terrace Brighton BN1 4JL

Ward

St. Peter's And North Laine

Name & Address of Licence H	lolder		
Mr Roger Kay, 87 Church Road Ho	ve BN3 2BB		
Name & Address of Person Ma	anaging		
,			
Property Description			
Short description of licensed HM	O (No of storeys, etc	:)	
Property Type = SHARED HOUSE,	No of Units = 1, Occu	upancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of R	ooms 6	
a) Sleeping		g Rooms	
-,pg	J,,		
Number of Self Contained Flats:	0	Number of Non Self Cont. Fla	ts: 0
	mber Descrip	tion	
a) Kitchen b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	24/07/2014	Duration of licence:	24/10/2018
Maximum number of persons or l	households permitte	ed to occupy HMO under conditions	of licence:
		.,	
Households 6 Per	sons 6		
Information referred to a resid	lential property tril	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licence	_		

Additional Facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Kitchen 1, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management Repairs, Management/Repairs, Other Fire Works, Structural Fire Works, Ventilation



#### Licence No.

#### 2013/06110/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

101 Preston Drove Brighton BN1 6EW

Ward

Withdean

Name & Address of Licence	e Holder			
Mr G Griffin, 22 Seasaw Way B				
Name & Address of Perso	n Managing			
,				
Property Description				
Short description of licensed	HMO (No of storeys, et	c)		
Property Type = SHARED HOL	JSE, No of Units = 1, Occ	upancy = 7, No of Storeys = 3		
Number of Rooms	Total Number of I	Rooms 7		
a) Sleeping	D) LIVII	ng Rooms		
Number of Self Contained Fla		Number of Non Self Cont. Flat	0	
Number of Self Contained Fla	its: 0	Number of Non Self Cont. Flat	s: 0	
Shared Amenities	Number Descri	ntion		
a) Kitchen				
b) Bathrooms/Showers				
c) W.C.s				
Licence Details				
Commencement date:	11/10/2016	Duration of licence:	03/10/2018	
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
	_			
Households 7	Persons 7			
Information referred to a re	esidential property tr	bunal or Lands Tribunal:		
None				
Decision of Tribunal		Reference number		

Summary of conditions of licence

Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/ Repairs, Other Fire Works, Structural Fire Works



#### Licence No.

#### 2013/06118/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

29 Devonshire Place Brighton BN2 1QB

Ward

Queen's Park

Name & Address of Licence	e Holder		
Mr Mike Stimpson, 162 Milner F			
Name & Address of Person	n Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOU	SE, No of Units = 12, Occupancy = 12, No of Storeys = 4		
Number of Rooms	Total Number of Rooms 12		
a) Sleeping b) Living Rooms			
a) clooping	5)		
Number of Self Contained Fla	ts: 0 Number of Non Self Cont. Fla	ts: 0	
	Training of real control of	0	
Shared Amenities	Number Description		
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	21/04/2016 Duration of licence:	06/11/2018	
Maximum number of persons	or households permitted to occupy HMO under conditions	of licence:	
Households 12	Persons 12		
Tiousenolus 12			
	esidential property tribunal or Lands Tribunal:		
	esidential property tribunal or Lands Tribunal:		
Information referred to a re	esidential property tribunal or Lands Tribunal:  Reference number		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/06125/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

23 Holland Road Hove BN3 1JF

Ward

Brunswick And Adelaide

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/06127/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

12 Stanford Road Brighton BN1 5DJ

Ward

**Preston Park** 

Name & Address of Licer	nce Holder		
Mr Mike Stimpson, 162 Milner	Road Brighton BN2 4BQ		
Name & Address of Person	on Managing		
,			
Property Description	LUMO (No. of a town and a)		
Short description of license	-		
Property Type = SHARED HC	OUSE, No of Units = 8, Occu	pancy = 8, No of Storeys = 4	
Number of Rooms	Total Number of Ro	ooms 8	
a) Sleeping	b) Living	Rooms	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities	Number Descript	ion	
a) Kitchen			
b) Bathrooms/Showers c) W.C.s			
-,			
Licence Details			
Commencement date:	19/05/2014	Duration of licence:	06/11/2018
Commencement date:	19/05/2014	Duration of licence:	06/11/2016
Maximum number of persor	is or households permitted	d to occupy HMO under conditions	of licence:
Households 8	Persons 8		
•	•		
Information referred to a	residential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs



#### Licence No.

#### 2013/06128/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 35 Buckingham Road Brighton BN1 3RP

Ward

St. Peter's And North Laine

Name & Address of Licence Holder
Mr Mike Stimpson, 162 Milner Road Brighton BN2 4BQ
Name & Address of Person Managing
,
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3
Number of Rooms Total Number of Rooms 5
a) Sleeping b) Living Rooms
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
Shared Amenities Number Description
a) Kitchen b) Bathrooms/Showers
c) W.C.s
Licence Details
Licence Details  Commencement date: 19/05/2014 Duration of licence: 06/11/2018
Commencement date: 19/05/2014 Duration of licence: 06/11/2018  Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Commencement date: 19/05/2014 Duration of licence: 06/11/2018
Commencement date: 19/05/2014 Duration of licence: 06/11/2018  Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Commencement date: 19/05/2014 Duration of licence: 06/11/2018  Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households 5 Persons 5
Commencement date: 19/05/2014 Duration of licence: 06/11/2018  Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households 5 Persons 5  Information referred to a residential property tribunal or Lands Tribunal:

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs



#### Licence No.

#### 2013/06130/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

16 York Avenue Hove BN3 1PH

Ward

Goldsmid

Name & Address of Licence Holder
Mr Mike Stimpson, 162 Milner Road Brighton BN2 4BQ
Will Millio Gampoon, 102 Million Fload Engineri E142 154
Name & Address of Person Managing
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 8, Occupancy = 8, No of Storeys = 3
Number of Rooms Total Number of Rooms 8
a) Sleeping b) Living Rooms
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
Shared Amenities Number Description
Shared Amenities Number Description
a) Kitchen
a) Kitchen b) Bathrooms/Showers c) W.C.s
a) Kitchen b) Bathrooms/Showers
a) Kitchen b) Bathrooms/Showers c) W.C.s
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 19/05/2014 Duration of licence: 06/11/2018
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 19/05/2014 Duration of licence: 06/11/2018
A) Kitchen D) Bathrooms/Showers C) W.C.s  Licence Details  Commencement date: 19/05/2014 Duration of licence: 06/11/2018  Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households 8 Persons 8
A) Kitchen D) Bathrooms/Showers D) W.C.s  Licence Details  Commencement date: 19/05/2014 Duration of licence: 06/11/2018  Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households 8 Persons 8  Information referred to a residential property tribunal or Lands Tribunal:
A) Kitchen D) Bathrooms/Showers C) W.C.s  Licence Details  Commencement date: 19/05/2014 Duration of licence: 06/11/2018  Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households 8 Persons 8

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/06131/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

5 Dorset Gardens Brighton BN2 1RL

Ward

Queen's Park

Name & Address of Licence		
Mr Mike Stimpson, 162 Milner Ro	pad Brighton BN2 4BQ	
Name & Address of Person	Managing	
,		
Property Description		
Short description of licensed F	IMO (No of storeys, etc)	
Property Type = SHARED HOUS	SE, No of Units = 9, Occupancy = 9, No of Storeys = 5	
Number of Rooms	Total Number of Rooms 9	
a) Sleeping	b) Living Rooms	
		-
Number of Self Contained Flats	s: 0 Number of Non Self Cont. Flat	s: 0
Shared Amenities	Number Description	
a) Kitchen		
b) Bathrooms/Showers		
c) W.C.s		
Liconco Dotaile		
Licence Details		
Licence Details  Commencement date:	19/05/2014 Duration of licence:	06/11/2018
Commencement date:		
Commencement date:	19/05/2014 Duration of licence: or households permitted to occupy HMO under conditions	
Commencement date:  Maximum number of persons of		
Commencement date:  Maximum number of persons o	or households permitted to occupy HMO under conditions	
Commencement date:  Maximum number of persons of Households 9 F	or households permitted to occupy HMO under conditions	
Commencement date:  Maximum number of persons of Households 9 F	or households permitted to occupy HMO under conditions of the second sec	
Commencement date:  Maximum number of persons of the description is seen to be described by the description in the description is seen to be described by	or households permitted to occupy HMO under conditions of the second sec	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/06135/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 60 Clarendon Villas Hove BN3 3RA

Ward

Central Hove

Name & Address of Licence	Holder		
Mr Mike Stimpson, 162 Milner Roa	ad Brighton BN2 4BQ		
Name & Address of Person I	Managing		
,			
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUSI	E, No of Units = 10, Occup	ancy = 10, No of Storeys = 4	
Normalis and Discours	Tatal Name 1 and 5	40	
Number of Rooms	Total Number of Room	ms 10	
a) Sleeping	b) Living R	ooms	
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flats	s: 0
	lumber Description	า	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	19/05/2014	Duration of licence:	16/11/2018
Maximum number of persons o	r households permitted to	o occupy HMO under conditions o	of licence:
Hawaahalda 40 5	40		
Households 10 Pe	ersons 10		
Information referred to a res	idential property tribur	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licen			

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/repairs



#### Licence No.

#### 2013/06137/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

42 Buckingham Place Brighton BN1 3PJ

Ward

St. Peter's And North Laine

Name & Address of Licence	Holder		
Mr Mike Stimpson, 162 Milner Ro	ad Brighton BN2 4BQ		
Name & Address of Person I	Managing		
,			
Property Description			
Short description of licensed H	MO (No of storeys, et	tc)	
Property Type = SHARED HOUS	E, No of Units = 10, Oo	ccupancy = 10, No of Storeys = 5	
Number of Rooms	Total Number of	Rooms 10	
a) Sleeping	b) Livir	ng Rooms	
	<del></del>		
Number of Self Contained Flats	: 0	Number of Non Self Cont. Fla	ats: 0
	lumber Descri	ption	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	19/05/2014	Duration of licence:	16/11/2018
Maximum number of persons o	r households permitt	ted to occupy HMO under conditions	s of licence:
	-		
Households 10 Po	ersons 10		
Information referred to a res	idontial property to	ibunal or Lands Tribunal	
	idential property tr	TDUTTAL OF LATIUS TRIBUTTAL.	
None Decision of Tribunal		Reference number	
Decision of Hibunal		Keierence number	
Summary of conditions of licen	Ce		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/repairs



#### Licence No.

#### 2013/06139/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

16 Sutherland Road Brighton BN2 0EQ

Ward

Queen's Park

Name & Address of Licence	Holder		
Mr Mike Stimpson, 162 Milner Ro			
<u> </u>			
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed F	IMO (No of storeys, etc)		
Property Type = SHARED HOUS	SE, No of Units = 5, Occup	pancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Ro	oms 5	
a) Sleeping	b) Living	Rooms	
,	, 3		
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Flat	s: 0
Shared Amenities	Number Descript	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	19/05/2014	Duration of licence:	16/11/2018
Maximum number of persons of	or households permitted	to occupy HMO under conditions	of licence:
_	-	• •	
Households 5 F	Persons 5		
Information referred to a res	sidential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs



#### Licence No.

#### 2013/06140/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

3 Dorset Gardens Brighton BN2 1RL

Ward

Queen's Park

Name & Address of Licen	ce Holder		
Mr Mike Stimpson, 162 Milner	Road Brighton BN2 4BQ		
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	HMO (No of storevs. etc)		
Property Type = SHARED HOU		pancy = 7. No of Storeys = 5	
	, 10 0. 0.mo 1, 000ap	.,	
Number of Rooms	Total Number of Ro	oms 7	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Fla	ats: 0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities	Number Descripti	on	
a) Kitchen			
b) Bathrooms/Showers c) W.C.s			
c)			
Licence Details			
Commencement date:	19/05/2014	Duration of licence:	16/11/2018
W			
Maximum number of persons	or households permitted	to occupy HMO under conditions	of licence:
Households 7	Persons 7		
Information referred to a r	esidential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
0			

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/06141/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

40 Grand Parade Brighton BN2 9QA

Ward

Queen's Park

Name & Address of Licence	o Holder		
Mr Mike Stimpson, 162 Milner R			
Will wrike Surripsort, 102 William R	.oad Brighton Biv2 4BQ		
Name & Address of Persor	n Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOU	SE, No of Units = 7, Occupa	incy = 7, No of Storeys = 5	
		_	
Number of Rooms	Total Number of Roo	ms 7	
a) Sleeping	b) Living F	dooms	
			_
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Flat	s: 0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description	n	
Licence Details			
Commencement date:	19/05/2014	Duration of licence:	16/11/2018
Maximum number of persons	or households permitted	o occupy HMO under conditions	of licence:
Households 7	Persons 7		
Information referred to a re	sidential property tribu	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lies			

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/06235/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

18 Newmarket Road Brighton BN2 3QF

Ward

Hanover And Elm Grove

Name & Address of Licence Holder		
Ms Lindsey Shakoori, 114 Hythe Road Bright	aton BN1 6JS	
Name & Address of Person Managing	J	
,		
Property Description		
Short description of licensed HMO (No of	storovs atc)	
Property Type = SHARED HOUSE, No of Un		
Property Type - SHAKED HOUSE, NO OF OF	ilis – 1, Occupancy – 5, No or Storeys – 3	
Number of Rooms Total N	Number of Rooms 5	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	0
Shared Amenities Number	Description	
a) Kitchen b) Bathrooms/Showers		
c) W.C.s		
Licence Details		
Commencement date: 07/05/	5/2014 Duration of licence:	03/11/2018
orrosi	Duration of ficence.	03/11/2010
Maximum number of persons or househol	olds permitted to occupy HMO under conditions of	licence:
Households 5 Persons	5	
Information referred to a residential p	property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Structural fire works, Ventilation



#### Licence No.

#### 2013/06272/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

16 Upper Lewes Road Brighton BN2 3FJ

Ward

St. Peter's And North Laine

Name & Address of Licence	Holder		
Mr Nicholas Mukherjee, Saxon De		BE	
Will Micholas Makherjee, Gazon Di	JWII Odiliali ECWC3 DIVI 2	.0L	
Name & Address of Person	Managing		
Dilip Mukherjee, Saxon Down Cu			
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Occup	pancy = 9, No of Storeys = 3	
Normalis and Discours	Tatal Namelan of Da		
Number of Rooms	Total Number of Ro		
a) Sleeping	b) Living	Rooms	
			_
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities	Number Descript	ion	
a) Kitchen	vuilibei Descript	Oli	
b) Bathrooms/Showers			
c) W.C.s			
0) W.O.3			
Licence Details			
0	40/00/0044	D. orthografic	40/40/0040
Commencement date:	13/08/2014	Duration of licence:	10/10/2018
Maximum number of persons of	r households permitted	to occupy HMO under conditions	of licence:
Households 9 P	ersons 9		
nouseriolus 9 P	ersons 9		
Information referred to a res	idential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/06281/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

7 St Georges Terrace Brighton BN2 1JH

Ward

Queen's Park

Name & Address of Licence	e Holder		
Fareed Mahomed, 'Leweston' 2	5 Dover Road Sandwich	Kent CT13 OBS	
Name & Address of Persor	Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys, e	tc)	
Property Type = SHARED HOU	SE, No of Units = 6, Oco	cupancy = 6, No of Storeys = 4	
Number of Rooms	Total Number of	Rooms 6	
a) Sleeping		ng Rooms	
a) Sieeping	D) LIVII	ng Rooms	
N		N	
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Flat	s: 0
Chanad Amanitias	Number Descri	india.	
Shared Amenities a) Kitchen	Number Descri	iption	
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	26/08/2014	Duration of licence:	14/11/2018
Commencement date.	20/00/2014	buration of ficerice.	14/11/2010
Maximum number of persons	or households permitt	ted to occupy HMO under conditions o	of licence:
Households 6	Persons 6		
i iouseiloius 0	0		
Information referred to a re	sidential property tr	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice Fire Alarms, Fire Alarms, HMO	nce Elec Mandatory conds	, HMO - Elec Mandatory conds, HMO - F	ire

Fire Alarms, Fire Alarms, HMO - Elec Mandatory conds, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Fire Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Works, Other Fire Works, Structural Fire Works, Structural Fire Works





#### Licence No.

#### 2013/06520/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

84 Brading Road Brighton BN2 3PD

Ward

Hanover And Elm Grove

Name & Address of Licence	Holder		
Mr Mark Shields, Old Conna Barn		ds Green RN6 0LO	
IVII IVIAIK SIIIEIUS, OIU COIIIIA BAITI	Cuckileia Road Goddaid	35 GIEEH DING 9LQ	
Name & Address of Person I	Managing		
G4 Lets, 2 Hythe Road Brighton E			
O+ Lots, 2 Trythe Road Brighton L	741 000		
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 7, Occup	pancy = 7, No of Storeys = 3	
	<u> </u>		
Number of Rooms	Total Number of Ro	oms	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flat	s: 0
Shared Amenities N	lumber Descript	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Licence Details			
Commencement date:	21/03/2014	Duration of licence:	07/10/2018
Maximum number of persons o	r households permitted	to occupy HMO under conditions	of licence:
Households Po	ersons 7		
Information referred to a res	idential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
0			

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/06525/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

51 Elm Grove Brighton BN2 3ET

Ward

Hanover And Elm Grove

Name & Address of Licence Holder	
Mr & Mrs Colina & Jonathan Humphrey, Wood Farm Newtown Road Awbridge Romsey Hants SC	051 OGG
Name & Address of Person Managing	
G4 Lets, 2 Hythe Road Brighton BN1 6JS	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 7, No of Storeys = 4	
Number of Rooms Total Number of Rooms 7	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	: 0
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers	
c) W.C.s	
U WY.O.S	
Licence Details	
T T	
Commencement date: 21/03/2014 Duration of licence:	16/12/2018
Maximum number of persons or households permitted to occupy HMO under conditions o	f licence:
Households 7 Persons 7	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/06529/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

23 Caledonian Road Brighton BN2 3HX

Ward

St. Peter's And North Laine

Name & Address of Licence	e Holder	
Mr & Mrs Jonathan & Colina Hum	mphrey, Wood Farm Newtown Road Awbridge Romsey Hants S051 0GG	
Name & Address of Person	Managing	
G4 Lets, 2 Hythe Road Brighton E	BN1 6JS	
Property Description		
Short description of licensed H	HMO (No of storeys, etc)	
Property Type = SHARED HOUS	SE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flats	ts: 0 Number of Non Self Cont. Flats: 0	
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s	Number Description	
Licence Details		
Commencement date:	23/06/2014 <b>Duration of licence:</b> 09/10/20	)18
Maximum number of persons o	or households permitted to occupy HMO under conditions of licence:	
Households 6 P	Persons 6	
Information referred to a res	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licen	ence	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Kitchen 1, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Ventilation 2, HMO - Repairs Walls 5, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/06530/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 97 Bonchurch Road Brighton BN2 3PJ

Ward

Hanover And Elm Grove

Name & Address of Licence	Holder		
Mr & Mrs Jonathan & Colina Hum	phrey, Wood Farm Newtov	vn Road Awbridge Romsey Hants S	O51 OGG
Name & Address of Person N	<b>l</b> lanaging		
G4 Lets, 2 Hythe Road Brighton B	N1 6JS		
Property Description			
Short description of licensed HI	MO (No of storeys, etc)		
Property Type = SHARED HOUSE	Ξ, No of Units = 1, Occupar	ncy = 6, No of Storeys = 3	
Number of Deams	Total Number of Deer		
Number of Rooms	Total Number of Room		
a) Sleeping	b) Living Ro	ooms	
		<del>-</del> 1	1
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flats	»: 0
	lumber Description	1	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
		_	
Commencement date:	23/06/2014	Duration of licence:	09/10/2018
Maximum number of persons of	r housaholds normittad to	o occupy HMO under conditions o	f licence:
maximum number of persons of	nousenoius permitteu to	occupy nino under conditions of	i licelice.
Households 6 Pe	ersons 6		
Information referred to a resi	idential property tribun	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licen	ce		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/06560/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

215 Elm Grove Brighton BN2 3EL

Ward

Hanover And Elm Grove

Name & Address of Lice	ance Holder	
	6 Arbour Mews School Lane Essex CM20 2FL	
Third Ciolania Cacolagaenta,		
Name & Address of Pers	son Managing	
G4 Lets, 2 Hythe Road Brigh	nton BN1 6JS	
Property Description		
Short description of licens	eed HMO (No of storeys, etc)	
Property Type = SHARED H	OUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 8	
a) Sleeping ###	b) Living Rooms	
, , , , , , , , , , , , , , , , , , , ,	,	
Number of Self Contained	Flats: 0 Number of Non Self Cont. Flats:	1
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	1	
c) W.C.s	1	
Licence Details		
Commonoment data:	01/05/2014 Duration of licence:	16/12/2018
Commencement date:	01/05/2014 Duration of licence:	10/12/2016
Maximum number of perso	ons or households permitted to occupy HMO under conditions of	licence:
Households 5	Persons 5	
	<u> </u>	
Information referred to a	a residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of HMO - Elec Mandatory cond	licence ls, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, H	HMO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Kitchen 6, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Walls 5, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/06563/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

8 Hollingbury Park Avenue Brighton BN1 7JF

Ward

Hollingdean And Stanmer

Name & Address of Licence Holder  Mr & Mrs Araminta & James Rogers, Tudor House Cross Colwood Lane Bolney RH17 5RY  Name & Address of Person Managing  G4 Lets, 2 Hythe Road Brighton BN1 6JS  Property Description  Short description of licensed HMO (No of storeys, etc)  Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 7, No of Storeys = 3
Name & Address of Person Managing G4 Lets, 2 Hythe Road Brighton BN1 6JS  Property Description Short description of licensed HMO (No of storeys, etc)
G4 Lets, 2 Hythe Road Brighton BN1 6JS  Property Description  Short description of licensed HMO (No of storeys, etc)
G4 Lets, 2 Hythe Road Brighton BN1 6JS  Property Description  Short description of licensed HMO (No of storeys, etc)
Property Description Short description of licensed HMO (No of storeys, etc)
Short description of licensed HMO (No of storeys, etc)
Short description of licensed HMO (No of storeys, etc)
Number of Rooms 7
a) Sleeping b) Living Rooms
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
Shared Amenities Number Description
a) Kitchen
b) Bathrooms/Showers
c) W.C.s
Licence Details
Licence Details
Commencement date: 20/06/2014 Duration of licence: 07/10/2018
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Households 7 Persons 7
Information referred to a residential property tribunal or Lands Tribunal:
· · · · · ·
Decision of Tribunal Reference number
Summary of conditions of license
Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households 7 Persons 7  Information referred to a residential property tribunal or Lands Tribunal:  None

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs



#### Licence No.

#### 2013/06609/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

12 Gerard Street Brighton BN1 4NW

Ward

St. Peter's And North Laine

Name & Address of Licence Holder	
Ms Anne Grant, 42 Havelock Road Brighton East Sussex BN1 6GF	
Name & Address of Person Managing	
MTM Property Services Ltd, 108A Lewes Road Brighton BN2 4AE	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No or	of Storeys = 2
Number of Rooms Total Number of Rooms 4	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of	of Non Self Cont. Flats: 0
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers	
c) W.C.s	
Licence Details	
Commencement date: 06/06/2014 Duratio	on of licence: 27/10/2018
Maximum number of persons or households permitted to occupy HM	MO under conditions of licence:
HOUGODOIGO 6 HOMOODO 6	
Households 5 Persons 5	
	s Tribunal:
Information referred to a residential property tribunal or Lands None	s Tribunal:
Information referred to a residential property tribunal or Lands None	s Tribunal: Reference number

Additional Facilities, Electrical Works, Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Other Fire works, Structural fire works, Ventilation



#### Licence No.

#### 2013/06637/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

87 Brading Road Brighton BN2 3PE

Ward

Hanover And Elm Grove

Name & Address of Licence Holder	
Mr & Mrs James & Araminta Rogers, Tudor House Cross Colwood Lane Bolney RH17 5RY	
Name & Address of Person Managing	
G4 Lets, 2 Hythe Road Brighton BN1 6JS	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 7, Occupancy = 7, No of Storeys =	
Number of Rooms Total Number of Rooms	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flat	s: 0
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers	
c) W.C.s	
Licence Details	
Licence Details	
Commencement date: 21/03/2014 Duration of licence:	16/11/2018
Maximum number of persons or households permitted to occupy HMO under conditions	of licence:
Households Persons 7	
Information referred to a residential property tribunal or Lands Tribunal:	
Information referred to a residential property tribunal or Lands Tribunal: None	

HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 7, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Walls 5, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/06638/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

94 Whippingham Road Brighton BN2 3PG

Ward

Hanover And Elm Grove

Name & Address of Licence	Holder		
		I DNE OTH	
Mr & Mrs Peter & Adela Gilbertso	ii, i Squile vvay nerifield	טוע נאום ו אוע טאום ו	
Name & Address of Person	Managing		
G4 Lets, 2 Hythe Road Brighton E			
G4 Lets, 2 Hythe Road Brighton E	DIN 1 003		
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS			
	_,	.,	
Number of Rooms	Total Number of Ro	ooms 7	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Flat	:s: 0
Shared Amenities	Number Descript	ion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	21/03/2014	Duration of licence:	24/07/2018
Maximum number of persons o	r households permitted	I to occupy HMO under conditions	of licence:
Households 7 P	ersons 7		
Information referred to a res	idential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/06640/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

36 Beaconsfield Road Brighton BN1 4QH

Ward

St. Peter's And North Laine

- Tallie de Fladi ou de Election	e Holder	
Dr Simon Malik, Dean House Fa	rm Gatehouse Lane Hassocks BN6 9LE	
Name & Address of Person	Managing	
G4 Lets, 2 Hythe Road Brighton	BN1 6JS	
<b>.</b>		
Property Description	UNO (No of storage sto)	
Short description of licensed H	• • •	
Property Type = SHARED HOUS	SE, No of Units = 1, Occupancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flat	s: 0 Number of Non Self Cont. Flats:	0
Shared Amenities	Number Description	
a) Kitchen		
b) Bathrooms/Showers		
b) Bathrooms/Showers c) W.C.s		
· —		
c) W.C.s  Licence Details		
c) W.C.s	20/08/2014 Duration of licence:	03/07/2018
c) W.C.s  Licence Details  Commencement date:	20/08/2014 Duration of licence: or households permitted to occupy HMO under conditions of	
c) W.C.s  Licence Details  Commencement date:  Maximum number of persons of	or households permitted to occupy HMO under conditions of	
c) W.C.s  Licence Details  Commencement date:  Maximum number of persons of		
c) W.C.s  Licence Details  Commencement date:  Maximum number of persons of the details  Households 7 F	or households permitted to occupy HMO under conditions of	
c) W.C.s  Licence Details  Commencement date:  Maximum number of persons of the details  Households 7 F	or households permitted to occupy HMO under conditions of Persons 7	
c) W.C.s  Licence Details  Commencement date:  Maximum number of persons of the details  Households 7 F  Information referred to a reserved.	or households permitted to occupy HMO under conditions of Persons 7	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/06664/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

61 Newmarket Road Brighton BN2 3QG

Ward

Hanover And Elm Grove

	ce Holder	
Ms Sally Powell, 2 Temple Gar	dens Brighton BN1 3AE	
Name & Address of Perso	n Managing	
Mr James Powell, The Cottage	Rear Of 8 Clifton Terrace Brighton BN1 3HA	
B		
Property Description	LUMO (No. of otograps, etc.)	
Short description of licensed	• • •	
Property Type = SHARED HOL	JSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 5	
a) Sleeping	b) Living Rooms	
Number of Self Contained Fla	ats: 0 Number of Non Self Cont. Flats	s: 0
Shared Amenities	Number Description	
a) Kitchen		
h) Rathroome/Showere		
b) Bathrooms/Showers		
c) W.C.s		
· -		
c) W.C.s  Licence Details		
c) W.C.s	26/08/2014 Duration of licence:	20/11/2018
c) W.C.s  Licence Details  Commencement date:	26/08/2014 Duration of licence:	
c) W.C.s  Licence Details  Commencement date:  Maximum number of persons	s or households permitted to occupy HMO under conditions o	
c) W.C.s  Licence Details  Commencement date:		
c) W.C.s  Licence Details  Commencement date:  Maximum number of persons  Households 5	s or households permitted to occupy HMO under conditions o	
c) W.C.s  Licence Details  Commencement date:  Maximum number of persons  Households 5	s or households permitted to occupy HMO under conditions of Persons 5	
c) W.C.s  Licence Details  Commencement date:  Maximum number of persons  Households 5  Information referred to a	s or households permitted to occupy HMO under conditions of Persons 5	

Summary of conditions of licence
Additional Facilities, Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO -Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO -Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire works, Structural fire works



#### Licence No.

#### 2013/06687/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

46 Western Road Hove BN3 1JD

Ward

Brunswick And Adelaide

Name & Address of Licence I		
Mr M Herandi, 46 Lansdowne Plac	e Hove BN3 1HH	
Name & Address of Person N		
Spark & Sons, 45 Western Road H	ove BN3 1JD	
Property Description		
Short description of licensed HN	IO (No of storeys, etc)	
Property Type = SHARED HOUSE	, No of Units = 2, Occupancy = 6, No of Storeys = 5	
Number of Rooms	Total Number of Rooms 10	
a) Sleeping ###	b) Living Rooms	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	2
	umber Description	
a) Kitchen	2	
b) Bathrooms/Showers c) W.C.s	2	
C) W.O.S		
Licence Details		
Γ		
Commencement date:	10/06/2014 Duration of licence:	28/03/2018
Maximum number of persons or	households permitted to occupy HMO under conditions of lic	cence:
•	,	
Households 6 Pe	rsons 6	
Information referred to a resi	dential property tribunal or Lands Tribunal:	
None	pointal property tribunal of Lands Tribunal.	
Decision of Tribunal	Reference number	
Summary of conditions of licent Additional Facilities, HMO - Elec M	e andatory conds, HMO - Fire Mandatory conds, HMO - Furniture	

Additional Facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Structural Fire works



#### Licence No.

#### 2013/06688/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

Top Flat 48 Lansdowne Place Hove BN3 1HH

Ward

Brunswick And Adelaide

Name & Address of Licence H	lolder	
Mr M Herandi, 46 Lansdowne Place	e Hove BN3 1HH	
Name & Address of Person M	anaging	
Spark & Sons, 45 Western Road He	ove BN3 1JD	
D ( D ) (		
Property Description	0 (1) - 5 - 1 1 )	
Short description of licensed HM	• • •	
Property Type = SHARED HOUSE,	No of Units = 1, Occupancy = 5, No of Storeys = 5	
Number of Rooms	Total Number of Rooms 5	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	0
Shared Amenities Nu	mber Description	
a) Kitchen		
b) Bathrooms/Showers		
c) W.C.s		
,		
Licence Details		
Licence Details		
,	28/04/2014 Duration of licence:	24/04/2018
Licence Details  Commencement date:	28/04/2014 Duration of licence: households permitted to occupy HMO under conditions of	
Licence Details  Commencement date:  Maximum number of persons or	households permitted to occupy HMO under conditions of	
Licence Details  Commencement date:  Maximum number of persons or		
Licence Details  Commencement date:  Maximum number of persons or  Households 5 Per	households permitted to occupy HMO under conditions of	
Licence Details  Commencement date:  Maximum number of persons or  Households 5 Per	households permitted to occupy HMO under conditions of sons	
Licence Details  Commencement date:  Maximum number of persons or  Households 5 Per  Information referred to a resid	households permitted to occupy HMO under conditions of sons	

#### Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Maintenance / repairs, Structural fire works, Ventilation



#### Licence No.

#### 2013/06772/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

18 Broadfields Brighton BN2 4QF

Ward

Moulsecoomb And Bevendean

Name & Address of Licence	e Holder		
Ms Tracy Barker, 34 Derwent A	venue East Barnet Herts	EN4 8LX	
Name & Address of Person	n Managing		
MTM Property Services Ltd, 10	BA Lewes Road Brighton	BN2 4AE	
Duran antic Dana sinting			
Property Description	UMO (No of otorovo oto		
Short description of licensed	•		
Property Type = SHARED HOL	ISE, NO OF UNITS = 1, OCCU	upancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of R	dooms 5	
a) Sleeping	b) Living	g Rooms	
Number of Self Contained Fla	<b>ts</b> : 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities	Number Descrip	tion	
a) Kitchen			
b) Bathrooms/Showers c) W.C.s			
c) w.o.s			
Licence Details			
Commencement date:	22/01/2014	Duration of licence:	15/05/2018
Maximum number of persons	or households permitte	ed to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Households 5	Persons 5		
Information referred to a re	esidential property tril	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
		TOTOTOTIOO HUITIDOT	

**Summary of conditions of licence**Additional facilities, Electrical works, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO -Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO -Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2013/06773/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

16 Ditchling Road Brighton BN1 4SF

Ward

St. Peter's And North Laine

ame & Address of Licen	ce Holder		
outh Coast Developments Ltd	d, 39 Sackville Road Hove	BN3 3WD	
lame & Address of Perso	n Managing		
Property Description			
hort description of licensed	d HMO (No of storeys, etc	·)	
roperty Type = SHARED HO	USE, No of Units = 1, Occu	upancy = 5, No of Storeys = 3	
lumber of Rooms	Total Number of R	ooms 5	
) Sleeping 5	D) Living	g Rooms 1	
lumber of Self Contained Fl	ats: 0	Number of Non Self Cont. Flats:	0
Shared Amenities  ) Kitchen	Number Descrip	tion	
) Bathrooms/Showers	1		
) W.C.s	2		
icence Details			
Commencement date:	26/03/2014	Duration of licence:	16/06/2018
ommoniom dato.	20/00/2011		10/00/2010
laximum number of person	s or households permitte	d to occupy HMO under conditions of I	icence:
louseholds 5	Persons 5		
0			
nformation referred to a	residential property tril	ounal or Lands Tribunal:	
lone			
ecision of Tribunal		Reference number	
Summary of conditions of lic		eneral, HMO - Fire Mandatory conds, HM	O - Fire

Additional facilities, Electrical reports, Gas Certificates, General, HMO - Fire Mandatory conds, HMO - Fire Recessed Lighting, HMO - Furniture Mandatory conds, HMO - General 1, HMO - General 2, HMO - General 6, HMO - General 7, HMO - General Electrical 1, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Ventilation 3, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other fire works



#### Licence No.

#### 2013/06796/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

183 Elm Grove Brighton BN2 3ES

Ward

Hanover And Elm Grove

Name & Address of Licence Holder		
Mr Andrew Kinnear, Orchard Park Farm Lurgasl	hall Petworth GU28 9EU	
Name & Address of Person Managing		
G4 Lets, 2 Hythe Road Brighton BN1 6JS		
Property Description		
Short description of licensed HMO (No of sto	oreys, etc)	
Property Type = SHARED HOUSE, No of Units	= 1, Occupancy = 9, No of Storeys = 3	
Number of Rooms Total Num	mber of Rooms 9	
a) Sleeping	b) Living Rooms	
N. J. C. C. KO. K. C. L. C. L. C.	N	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	0
Shared Amenities Number	Description	
a) Kitchen	Description	
b) Bathrooms/Showers		
c) W.C.s		
Licence Details		
Commencement date: 21/03/20	14 Duration of licence:	25/09/2018
2 1700/20	Burdion of nectice.	20/00/2010
Maximum number of persons or households	permitted to occupy HMO under conditions of l	icence:
Households 9 Persons	9	
5	<u>-</u>	
Information referred to a residential prop	perty tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -Repairs Walls 5, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Kitchen Extract Fan, Management/Repairs



#### Licence No.

#### 2013/06799/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

79 Bates Road Brighton BN1 6PF

Ward

Withdean

Name & Address of Licenc	e Holder		
Mr Andrew Kinnear, Orchard Pa		th CU28 0EU	
Will Allulew Killileal, Olcharu Pa	IK Faith Luigashall Pelwoi	III G026 9E0	
Name & Address of Persor	n Managing		
G4 Lets, 2 Hythe Road Brighton	5 5		
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOU	SE, No of Units = 1, Occup	pancy = 7, No of Storeys = 4	
N	T. (.1 N		
Number of Rooms	Total Number of Ro	oms 7	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Flat	:s: 0
Shared Amenities	Number Descript	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	19/06/2014	Duration of licence:	25/09/2018
Maximum number of persons	or households permitted	to occupy HMO under conditions	of licence:
Households 7	Persons 7		
Information referred to a re	esidential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
O			

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Bedrooms, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/06800/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

74 Clyde Road Brighton BN1 4NP

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
Mr Andrew Kinnear, Orchard P	ark Farm Lurgashall Petwor	th GU28 9EU	
Name & Address of Perso	n Managing		
G4 Lets, 2 Hythe Road Brighton	n BN1 6JS		
Property Description			
Short description of licensed	d HMO (No of storeys, etc)		
Property Type = SHARED HO	USE, No of Units = 1, Occup	pancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Ro	oms 6	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities	Number Descripti	on	
a) Kitchen	Number Descripti	OII	
b) Bathrooms/Showers			
c) W.C.s			
,			
Licence Details			
0	47/00/0044	D. office (Process	00/07/0040
Commencement date:	17/06/2014	Duration of licence:	30/07/2018
Maximum number of persons	s or households permitted	to occupy HMO under conditions	of licence:
Hawaah alda O	<b>D</b>		
Households 6	Persons 6		
Information referred to a r	residential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/06801/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

72 Brading Road Brighton BN2 3PD

Ward

Hanover And Elm Grove

Name & Address of Licence	Holder		
Mr Andrew Kinnear, Orchard Park		th GU28 9FU	
Wil Allulew Millieal, Olchard I air	T aim Eurgashair etwo	III G020 9L0	
Name & Address of Person	Managing		
G4 Lets, 2 Hythe Road Brighton E			
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Occup	pancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of Ro	ooms 7	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Flats	0	Number of Non Self Cont. Flat	s: 0
Shared Amenities N	Number Descript	ion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	21/03/2014	Duration of licence:	25/09/2018
Maximum number of persons o	r households permitted	I to occupy HMO under conditions	of licence:
Households 7 P	ersons 7		
Information referred to a res	idential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Bathroom 12, HMO - Repairs Heating 5, HMO - Repairs Walls 5, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/06802/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

32 Montreal Road Brighton BN2 9UY

Ward

Hanover And Elm Grove

Name & Address of Licence	Holder		
Mr Andrew Kinnear, Orchard Park	Farm Lurgasnali Petwo	orn GU28 9EU	
Nama & Address of Baroon I	Managing		
Name & Address of Person I			
G4 Lets, 2 Hythe Road Brighton B	N1 6JS		
Property Description			
Short description of licensed HI	MO (No of storous, atc		
-	-		
Property Type = SHARED HOUSE	=, No of Units = 1, Occi	ipancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of R	ooms 7	
a) Sleeping	b) Livino	Rooms	
, , ,	,		
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flat	s: 0
Number of Jen Jontained Flats		Number of Non Sen Sont. Flat	3. 0
Shared Amenities N	lumber Descrip	tion	
a) Kitchen	2000116		
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Ī			
Commencement date:	19/06/2014	Duration of licence:	25/09/2018
Maximum number of persons or	r households permitte	d to occupy HMO under conditions	of licence:
Households 7 Pe	ersons 7		
		<del></del>	
Information referred to a resi	idential property tril	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Drainage 2, HMO - Repairs Walls 5, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/06803/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

42 Arundel Street Brighton BN2 5TH

Ward

Rottingdean Coastal

Name & Address of Licen	ce Holder		
Mr Andrew Kinnear, Orchard P	ark Farm Petworth GU28	3 9EU	
N 0.411 CB			
Name & Address of Perso			
G4 Lets, 2 Hythe Road Brighto	n BN1 6JS		
Property Description			
Short description of licensed	I HMO (No of storeys, e	tc)	
-		cupancy = 7, No of Storeys = 4	
Number of Rooms	Total Number of	Rooms 12	
a) Sleeping ###	b) Livi	ng Rooms	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Flats	s: 1
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Descri	iption	
Licence Details			
Commencement date:	12/06/2014	Duration of licence:	15/06/2018
Maximum number of persons	s or households permit	ted to occupy HMO under conditions o	of licence:
Households 7	Persons 7		
Information referred to a r	esidential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic HMO - Elec Mandatory conds.		onds. HMO - Furniture Mandatory conds.	HMO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Bedrooms, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Drainage 1, HMO - Repairs Drainage 2, HMO - Repairs Ventilation 2, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs



#### Licence No.

#### 2013/06804/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

11 Queens Park Road Brighton BN2 0GJ

Ward

Queen's Park

Name & Address of Licence Holder		
Mr Andrew Kinnear, Orchard Park Farm Lurgashall Petworth GU28 9EU		
Name & Address of Person Managing		
G4 Lets, 2 Hythe Road Brighton BN1 6JS		
G4 Lets, 2 Hythe Road Brighton Birt 030		
Property Description		
Short description of licensed HMO (No of storeys, etc)		
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of S	toreys = 3	
Number of Rooms Total Number of Rooms 6	1	
a) Sleeping b) Living Rooms		
Number of Self Contained Flats: 0 Number of N	Non Self Cont. Flats:	0
Shared Amenities Number Description		
a) Kitchen		
b) Bathrooms/Showers		
c) W.C.s		
Licence Details		
10/00/0014		04/07/0040
Commencement date: 19/06/2014 Duration	of licence:	31/07/2018
Maximum number of persons or households permitted to occupy HMO	under conditions of li	cence:
Households 6 Persons 6		
Information referred to a residential property tribunal or Lands 1	ribunal:	
None		
Decision of Tribunal Ref	erence number	
Summary of conditions of licence		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Bedrooms, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/06805/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

29 Bedford Square Brighton BN1 2PL

Ward

Regency

			,
Name & Address of Licen	ce Holder		
Mr Nicholas Heanen, 29 Bedfo	rd Square Brighton BN1 2PI		
	3		
Name & Address of Perso	n Managing		
Name & Address of Ferso	ir managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOL	JSE, No of Units = 11, Occu	pancy = 14, No of Storeys = 5	
. , ,,	, , , , , , , , , , , , , , , , , , , ,		
Number of Rooms	Total Number of Ro	oms 11	
a) Sleeping	b) Living	Rooms	
,pg	2,9		
Number of Self Contained Fla	ats: 0	Number of Non Self Cont. Flats:	0
Shared Amenities	Number Descripti	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
		_	
Commencement date:	21/03/2014	Duration of licence:	08/12/2018
Maximum number of persons	s or households permitted	to occupy HMO under conditions of	licence:
Households 14	Persons 14		
17	. 5.50110		
Information referred to a r	esidential property tribu	ınal or I ands Tribunal:	
	obtachtial property this	mar or Lands Tribunal.	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic	conco		

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/06821/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

9 Addison Road Hove BN3 1TN

Ward

Goldsmid

Licence Details		
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description	
Number of Self Contained F	lats: 0 Number of Non Self Cont. Flats:	1
Number of Rooms a) Sleeping	Total Number of Rooms 10 b) Living Rooms	
Property Type = SHARED HC	OUSE, No of Units = 1, Occupancy = 10, No of Storeys = 3	
Short description of license		
Property Description		
,		
Name & Address of Perso	on Managing	
ivis iviala bilalyav & Jayasille	5 SHIIIVASAH, 11 DUIWASH KUAU MUVE DING OUF	
	e Srinivasan, 11 Burwash Road Hove BN3 8GP	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/06840/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

48 Newmarket Road Brighton BN2 3QF

Ward

Hanover And Elm Grove

Name & Address of Licence Holder		
Mr Robert Heller, C/o 47 Norfolk Square Bri	righton BN1 2PA	
Name & Address of Person Managin	ıg	
Homelets (Brighton) Ltd, 47 Norfolk Square	Brighton BN1 2PA	
Property Description	5.1	
Short description of licensed HMO (No o	• •	
Property Type = SHARED HOUSE, No of L	Jnits = 1, Occupancy = 5, No of Storeys	<u> </u>
Number of Rooms Total	Number of Rooms 5	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flats:	0 Number of Non S	elf Cont. Flats: 0
Shared Amenities Number	Description	
a) Kitchen		
b) Bathrooms/Showers c) W.C.s		
U.O.3		
Licence Details		
	08/2014 Duration of lice	nce: 19/08/2018
Commencement date: 26/0  Maximum number of persons or househouse	olds permitted to occupy HMO under	
Commencement date: 26/0		
Commencement date: 26/0  Maximum number of persons or househouse	olds permitted to occupy HMO under	r conditions of licence:
Commencement date: 26/0  Maximum number of persons or households 5 Persons	olds permitted to occupy HMO under	r conditions of licence:
Commencement date: 26/0  Maximum number of persons or households 5 Persons  Information referred to a residential	olds permitted to occupy HMO under	r conditions of licence:

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2013/06841/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

The Stables Wilbury Grove Hove BN3 3JQ

Ward

Central Hove

Name & Address of Licence Holder			
Ms Vanessa Abbiss, The Stables 8A Wilbury Grove Hove BN3 3JQ			
Name & Address of Person Managing			
,			
Property Description			
Short description of licensed HMO (No of storeys, etc)			
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3			
Number of Rooms Total Number of Rooms 6			
a) Sleeping b) Living Rooms			
Notes to the second			
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	s: 0		
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s			
Licence Details			
Commencement date: 29/04/2014 Duration of licence:	13/12/2018		
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
Households 6 Persons 6			
Information referred to a residential property tribunal or Lands Tribunal:			
None			
Decision of Tribunal Reference number			
O TOTAL CONTROL OF THE CONTROL OF TH			

#### Summary of conditions of licence

Additional facilities, Electrical works, Enlargement of Bedrooms, Enlargement of bedrooms, Fire alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Ventilation



#### Licence No.

#### 2013/06842/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

14 Whippingham Road Brighton BN2 3PG

Ward

Hanover And Elm Grove

Name & Address of Licence	Holder		
Ms Val Taylor, 9 Clover Way Por			
Name & Address of Person	Managing		
G K White & Company Ltd, 165 l	_ewes Road Brighton BN2 3	BLD	
Duamanti Daganintian			
Property Description  Short description of licensed F	IMO (No of storous atc)		
-	-	nov = 6. No of Starova = 2	
Property Type = SHARED HOUS	se, No or Offics = 1, Occupa	ricy = 6, No or Storeys = 3	
Number of Rooms	Total Number of Room	ms 6	
a) Sleeping	b) Living R	ooms	
Number of Self Contained Flats	<b>s</b> : 0	Number of Non Self Cont. Flats:	0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description	n	
Licence Details			
Commencement date:	28/04/2014	Duration of licence:	01/12/2018
Maximum number of persons of	or households permitted t	o occupy HMO under conditions of	licence:
Households 6 F	Persons 6		
Information referred to a res	sidential property tribur	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2013/06888/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

24 Roedale Road Brighton BN1 7GB

Ward

Hollingdean And Stanmer

Name & Address of Liceno			
Brighton Student Development	s Ltd, C/O North Quay Hous	e Sutton Harbour Plymouth PL4 0RA	4
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOL	JSE, No of Units = 1, Occup	ancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of Ro	0	
a) Sleeping	b) Living	Rooms	
		_	
Number of Self Contained Fla	ats: 0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities	Number Descripti	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
	47/05/0040	<b>5</b>	40/40/0040
Commencement date:	17/05/2016	Duration of licence:	10/12/2018
Maximum number of persons	or households permitted	to occupy HMO under conditions	of licence:
Households 7	Persons 7		
Information referred to a r	esidential property tribu	ınal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
0			

Summary of conditions of licence

Fire alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works, Ventilation



#### Licence No.

#### 2013/06891/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

63 Preston Road Brighton BN1 4QE

Ward

**Preston Park** 

Name & Address of Licen	ce Holder			
R & R Developments, 146 Woo	odland Drive Hove BN3 6DE			
Name & Address of Perso	n Managing			
Property Moves Ltd, 109 Churc	ch Road Hove BN3 2AF			
Property Description				
Short description of licensed	I HMO (No of storeys, etc)			
Property Type = SHARED HO	JSE, No of Units = 5, Occupar	ncy = 5, No of Storeys = 3		
		_		
Number of Rooms	Total Number of Roor	ns 5		
a) Sleeping	b) Living Ro	poms		
		_		
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Flats:	0	
Shared Amenities	Number Description	1		
a) Kitchen				
b) Bathrooms/Showers				
c) W.C.s				
Licence Details				
Commencement date:	09/07/2014	Duration of licence:	27/11/2018	
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
		o coupy time under conditions of		
Households 5	Persons 5			
Information referred to a r	esidential property tribun	al or Lands Tribunal:		
None				
Decision of Tribunal		Reference number		
0				

Summary of conditions of licence

Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Works, Structural Fire Works



#### Licence No.

#### 2013/06893/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 3 Coronation Street Brighton BN2 3AQ

Ward

Hanover And Elm Grove

Name & Address of Lice	nce Holder		
Mr Chris Osmond, 274 Cood	en Drive Bexhill On Sea Eas	t Sussex TN39 3AB	
Name & Address of Pers	on Managing		
S J Lettings Ltd, 52 Lewes R	oad Brighton BN2 3HW		
Property Description			
Short description of licens	ed HMO (No of storeys, etc	)	
Property Type = SHARED H	OUSE, No of Units = 1, Occu	ipancy = 4, No of Storeys = 3	
Number of Rooms	Total Number of R	ooms 5	
a) Sleeping 4	b) Living	g Rooms 1	
Number of Self Contained	Flats: 0	Number of Non Self Cont. Flats:	0
Shared Amenities	Number Descrip	tion	
a) Kitchen	1		
o) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
ricelloc Details			
Commencement date:	05/11/2015	Duration of licence:	07/11/2018
Maximum number of perso	ns or households permitte	d to occupy HMO under conditions of	licence:
Households 4	Persons 4		
nformation referred to a	residential property trik	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of Fire Alarm, HMO - Elec Man		indatory conds, HMO - Furniture Mandato	ory conds,

HMO - Gas Mandatory conds, HMO - Licensing Kitchen 4, HMO - Property Chges Mandatory conds, HMO -Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2014/00409/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

43 Stanley Road Brighton BN1 4NH

Ward

St. Peter's And North Laine

Name & Address of Licence			
Miss Alison Trinder, 42 Fitzgera	ld Avenue Seaford BN25 1AZ	•	
Name & Address of Persor	n Managing		
Ms Catherine Bancroft-Rimmer,	Brighton Forum 95 Ditchling	Road Brighton BN1 4ST	
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOU	SE, No of Units = 1, Occupan	cy = 5, No of Storeys = 3	
Number of Dooms	Total Number of Boon	E	
Number of Rooms	Total Number of Roon		
a) Sleeping	b) Living Ro	oms	
		-	
Number of Self Contained Fla	<b>ts</b> : 0	Number of Non Self Cont. Flats	: 0
Shared Amenities	Number Description	l .	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
		Γ	
Commencement date:	24/04/2014	Duration of licence:	28/08/2018
Maximum number of persons	or households permitted to	occupy HMO under conditions o	f licence:
Households 5	Persons 5		
Information referred to a re	sidential property tribun	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice	nco.		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2014/00412/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

111 Queens Park Road Brighton BN2 0GH

Ward

Hanover And Elm Grove

Name & Address of Licence Holder				
Mrs Maria Samouel, Ladyland Farm Meath Green Lane Horley Surrey RH6 8JA				
wild wanta damouel, Eadyland I ann weath Green Earle Honey damey 11/10 60/1				
Name & Address of Person Managing				
,				
Property Description				
Short description of licensed HMO (No of storeys, etc)				
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3				
Number of Rooms Total Number of Rooms 6				
a) Sleeping b) Living Rooms				
Number of Self Contained Flats: 0 Number of Non Self Cont. Flat	ats: 0			
Shared Amenities Number Description				
a) Kitchen				
b) Bathrooms/Showers				
c) W.C.s				
Licence Details				
Commencement date: 20/08/2014 Duration of licence:	27/01/2019			
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
Households 6 Persons 6				
Information referred to a residential property tribunal or Lands Tribunal:				
None				
Decision of Tribunal Reference number				
Summary of conditions of license				

**Summary of conditions of licence**Additional Facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2014/00413/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

103 Queens Park Road Brighton BN2 0GH

Ward

Hanover And Elm Grove

Name & Address of Licence	Holder		
Mr & Mrs M & P Samouel, Ladylar	nd Farm Meath Green I	Lane Horley RH6 8JA	
Name & Address of Person I	Managing		
,			
Property Description			
Short description of licensed HI	MO (No of storays at	~)	
Property Type = SHARED HOUSE		•	
Floperty Type – SHARED HOUSE	L, NO OF OTHES - 1, OCC	upancy – 0, NO OI Storeys – 3	
Number of Rooms	Total Number of R	Rooms 6	
a) Sleeping	b) Livin	g Rooms	
Number of Self Contained Flats	: 0	Number of Non Self Cont. Fla	nts: 0
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s	lumber Descrip	otion	
Licence Details			
1			
Commencement date:	20/08/2014	Duration of licence:	17/12/2018
Maximum number of persons of	r households permitte	ed to occupy HMO under conditions	of licence:
Households 6 Pe	ersons 6		
Information referred to a res	idential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works, Ventilation



#### Licence No.

#### 2014/00482/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

89 Upper Lewes Road Brighton BN2 3FF

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
Mr John Standing, 6 Barrowfie	ld Close Hove BN3 6TP		
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	I HMO (No of storeys, etc)		
Property Type = SHARED HO	USE, No of Units = 1, Occup	pancy = 8, No of Storeys = 3	
Number of Rooms	Total Number of Ro	oms 9	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities	Number Descripti	on.	
a) Kitchen	Number Descripti	on	
b) Bathrooms/Showers			
c) W.C.s			
0) **.0.3			
Licence Details			
Commencement date:	04/09/2014	Duration of licence:	08/12/2018
Maximum number of person	s or households permitted	to occupy HMO under conditions	of licence:
	_		
Households 8	Persons 8		
Information referred to a	residential property tribu	inal or Lands Tribunal:	
Information referred to a R	residential property tribເ	unal or Lands Tribunal:	
Information referred to a I None Decision of Tribunal	residential property tribu	unal or Lands Tribunal:	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2014/00484/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

30 Hollingbury Road Brighton BN1 7JA

Ward

Hollingdean And Stanmer

Name & Address of Licence Holder	
Mrs Louise Vallier, 97 Greenacres Shoreham-by-Sea BN43 5XL	
Mis Louise Vallier, 97 Greenacies Shorenam-by-Sea BN43 SAL	
Name & Address of Person Managing	
,	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms Total Number of Rooms 6	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flat	ts: 1
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s	
Licence Details	
Commencement date: 07/05/2014 Duration of licence:	15/01/2019
Maximum number of persons or households permitted to occupy HMO under conditions	of licence:
Households 6 Persons 6	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Common of accelitions of linears	

Summary of conditions of licence

Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Structural fire works, Ventilation



#### Licence No.

#### 2014/00485/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

27 Upper North Street Brighton BN1 3FG

Ward

Regency

		ward 110	gency
Name & Address of Licence	e Holder		
Mr Edward Charles-Bancroft, KE	M Property Services Alb	ert House 82 Queens Road Brighton E	BN1 3XE
Name & Address of Person			
Nitin Bafna, KEM Property Servi	ces Albert House 82 Que	eens Road Brighton BN1 3XE	
Property Description			
Short description of licensed I		c)	
Property Type = SHARED HOUS	SE, No of Units = 6, Occ	upancy = 7, No of Storeys = 4	
		_	
Number of Rooms	Total Number of R		
a) Sleeping	b) Livin	g Rooms	
Number of Self Contained Flat	s: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities	Number Descrip	otion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	17/04/2014	Duration of licence:	09/09/2018
Maximum number of persons	or households permitte	ed to occupy HMO under conditions	of licence:
Households 7	Persons 7		
Information referred to a re	sidential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice	nce		

Additional facilities, Fire alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2014/00504/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

248 Dyke Road	
Brighton	
BN1 5AE	

Ward

Withdean

Name & Address of Licence	e Holder		
Mr Satish Kainth, 248 Dyke Roa	ad Brighton BN1 5AE		
Name & Address of Person	n Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys, e	etc)	
Property Type = SHARED HOL	JSE, No of Units = 5, Oc	ccupancy = 6, No of Storeys = 3	
. , , , ,	· · · · · · · · · · · · · · · · · · ·		
Number of Rooms	Total Number of	Rooms 5	
a) Sleeping 5	b) Liv	ing Rooms	
Number of Self Contained Fla	its: 1	Number of Non Self Cont. Flat	ts: 5
Shared Amenities	Number Descr	ription	
a) Kitchen	2		
b) Bathrooms/Showers	4		
c) W.C.s	3		
License Deteile			
Licence Details			
Commencement date:	30/04/2014	Duration of licence:	17/12/2018
Maximum number of persons	or households permit	tted to occupy HMO under conditions	of licence:
Households 6	Persons 6		
		1	
Information referred to a re	esidential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice	ence		
Summary of Conditions of his	ance		

Fire alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural



#### Licence No.

#### 2014/00506/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

12 Clyde Road Brighton BN1 4NP

Ward

St. Peter's And North Laine

Name & Address of Licence Holder	
Mr Spencer Orman, 79 Hove Park Road Hove BN3 6LL	
Name & Address of Person Managing	
Brighton Accommodation Agency, 74 Lewes Road Brighton BN2 3HZ	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms Total Number of Rooms 6	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0	)
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers c) W.C.s	
Licence Details	
Commencement date: 20/08/2014 Duration of licence: 23/01/20	)19
Maximum number of persons or households permitted to occupy HMO under conditions of licence:	
Havrahalda C Barrana C	
Households 6 Persons 6	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of license	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Other Fire works



## Licence No.

## 2014/00508/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

25 Southampton Street Brighton BN2 9UT

Ward

Hanover And Elm Grove

		·	
ame & Address of Licer	ce Holder		
Chris Stewart, 44 Grand C	rescent Rottingdean Bri	ghton BN2 7GL	
me & Address of Perso	on Managing		
operty Description			
ort description of license	d HMO (No of storeys,	etc)	
pperty Type = SHARED HC	USE, No of Units = 1, C	Occupancy = 5, No of Storeys = 4	
ımber of Rooms	Total Number o	of Rooms 5	
Sleeping 5	b) Li	ving Rooms 1	
			0
mber of Self Contained F	lats: 0	Number of Non Self Cont. Flats:	0
ared Amenities	Number Desc	cription	
Kitchen	1	, i puoli	
Bathrooms/Showers	2		
W.C.s	2		
sanas Dataila			
cence Details			
mmencement date:	18/05/2016	Duration of licence:	12/01/2019
ximum number of person	s or households perm	litted to occupy HMO under conditions of I	icence:
ouseholds 5	Persons 5		
ormation referred to a	residential property	tribunal or Lands Tribunal:	
ne			
cision of Tribunal		Reference number	
	, HMO - Fire Mandatory	conds, HMO - Furniture Mandatory conds, H	

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2014/00692/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

43 Lansdowne Place Hove BN3 1HF

Ward

Brunswick And Adelaide

Name & Address of Licenc	e Holder		
Mr Matthew Sorokin, Geneva H		ove BN3 5FE	
Name & Address of Persor	Managing		
,			
Bronorty Description			
Property Description Short description of licensed	HMO (No of storeys, etc.)		
Property Type = BEDSIT, No of	-		
Troperty Type - BEBOTT, No or	Office 11, Occupancy –	11, NO 01 01010y3 - 4	
Number of Rooms	Total Number of Ro	ooms 11	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Descript	ion	
Licence Details			
Commencement date:	14/04/2015	Duration of licence:	07/02/2019
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
Households 11	Persons 11		
Information referred to a re	sidential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
0			

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 6, HMO - Fire Doors 1, HMO - Fire Doors 3, HMO - Fire Mandatory conds, HMO - Fire Notices 1, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Not Assigned, Structural fire works, management repairs



#### Licence No.

#### 2014/00705/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

120 Hollingbury Park Avenue Brighton BN1 7JP

Ward

Hollingdean And Stanmer

Name & Address of Licen	ce Holder		
Mr Emil Marwa, 77 Cranley Dri			
Name & Address of Perso	n Managing		
Brighton Accommodation Agen	ıcy, 74 Lewes Road Brightor	n BN2 3HZ	
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOL	JSE, No of Units = 1, Occup	ancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Ro	oms 5	
a) Sleeping	b) Living I	Rooms	
a, 6.66pg	~, <u>_</u> g		
Number of Self Contained Fla	ats: 0	Number of Non Self Cont. Flat	es: 0
Shared Amenities	Number Description	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	16/05/2014	<b>Duration of licence:</b>	10/02/2019
Maximum number of persons	s or households permitted	to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Information referred to a r	esidential property tribu	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2014/00743/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

71 Elm Grove Brighton BN2 3ET

Ward

Hanover And Elm Grove

Name & Address of Licen	ice Holder		
Mr Sanjeev Dhuna, 48 Woodla	and Drive Hove BN3	6DL	
Name & Address of Perso	on Managing		
S J Lettings Ltd, 52 Lewes Ro	ad Brighton BN2 3HV	N	
Property Description			
Short description of license	d HMO (No of store)	ys, etc)	
Property Type = SHARED HO	USE, No of Units = 1	, Occupancy = 6, No of Storeys = 3	
Novel or of Decree	Total November	on of Booms 0	
Number of Rooms	Total Numbe		
a) Sleeping 6	b)	Living Rooms 1	
Number of Self Contained F	lats:	0 Number of Non Self Cont. Flat	s: 1
Shared Amenities	Number De	escription	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	23/04/2014	Duration of licence:	27/11/2018
Maximum number of nercen	o or households no	rmitted to occupy HMO under conditions	of liganos
maximum number of person	s of flousefloids pe	milited to occupy HMO under conditions	or incerice.
Households 6	Persons 6		
Information referred to a	residential proper	ty tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	ec Mandatory conds,	HMO - Fire Mandatory conds, HMO - Furnito MO - Property Chges Mandatory conds, HMO	

Additional Facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Structural fire works



#### Licence No.

#### 2014/00774/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

73 Bonchurch Road Brighton BN2 3PJ

Ward

Hanover And Elm Grove

Nama O Address of Linears	Holdon		
Name & Address of Licence		DN40 ODY	
Mauny Management Services Ltd	, 5 Holly Close Worthin	g BN13 3PX	
Name & Address of Danson	Managinan		
Name & Address of Person			
01 Property Letting Ltd, 64 St Jan	nes's Street Brighton Bl	N2 1PJ	
Bronorty Description			
Property Description  Short description of licensed H	MO (No of storous, at	2)	
-	-		
Property Type = SHARED HOUS	E, No of Units = 1, Occ	upancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of F	Rooms 7	
a) Sleeping	b) Livir	g Rooms	
-,	-,		
Number of Self Contained Flats	:: 0	Number of Non Self Cont. Flat	:s: 0
Number of Gen Contained Flats		Number of Non-Sen Sont. Flat	
Shared Amenities	Number Descrip	otion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
0	00/05/0044	Departies of the same	00/00/0040
Commencement date:	08/05/2014	Duration of licence:	20/02/2019
Maximum number of persons o	r households permitte	ed to occupy HMO under conditions	of licence:
Households 7 P	ersons 7		
Information referred to a res	idential property tri	hunal or Lands Tribunal:	
None	idential property tri	bullat of Latius Tribuilat.	
Decision of Tribunal		Reference number	
Decision of Hibanal		Reference number	
O			

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2014/00778/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

117 Milner Road Brighton BN2 4BR

Ward

Moulsecoomb And Bevendean

Name & Address of Licenc		
Mosaica Properties Ltd, 81-85 H	ligh Street Brentwood CM14 4RR	
Name & Address of Person	ı Managing	
D L Property Services Ltd, 2 As	hford Road Brighton BN1 6LJ	
Property Description		
Short description of licensed	HMO (No of storeys, etc)	
Property Type = SHARED HOU	SE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping	b) Living Rooms	
		T
Number of Self Contained Flat	ts: 0 Number of Non Self Cont. Fla	ats: 0
Shared Amenities	Number Description	
a) Kitchen		
b) Bathrooms/Showers		
c) W.C.s		
Licence Details		
Common common data:	40/05/2046 Pureties of licenses	11/02/2010
Commencement date:	10/05/2016 Duration of licence:	11/02/2019
Maximum number of persons	or households permitted to occupy HMO under conditions	s of licence:
Households 6	Persons 6	
Information referred to a re	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2014/01233/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

Flat 2 39A Queens Road Brighton BN1 3XB

Ward

St. Peter's And North Laine

Name & Address of Licence Holder	
Mr Nicholas Bolton, 29 Bentham Road Brighton BN2 9XB	
Name & Address of Person Managing	
Mrs Kay Bolton, 29 Bentham Road Brighton BN2 9XB	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 5	
Number of Rooms Total Number of Rooms 6	
a) Sleeping b) Living Rooms	
3, 3 The Company of t	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	s: 0
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers	
c) W.C.s	
Licence Details	
Commencement date: 04/07/2014 Duration of licence:	04/07/2019
Maximum number of persons or households permitted to occupy HMO under conditions of	of licence:
Households 6 Persons 6	
Tiouscholds 0	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of license	

13. Management/Repairs, 2. Structural Fire Works, 2. Structural fire works, 3. Other Fire Works, 3.Other Fire Works, HMO - Elec Mandatory conds, HMO - Fire General 1, HMO - Fire General 2, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2014/01236/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

32 George Street Brighton BN2 1RH

Ward

Queen's Park

Name & Address of Licer	ice Holder		
Miss Kin Kiu Lau, 83 Greenha	ze Lane Great Cambourne (	Cambridge CB23 5EF	
Name & Address of Perso	on Managing		
Prominence Letting Agency, 1	24 Western Road Hove BN3	3 1DB	
Property Description			
Short description of license	d HMO (No of storeys, etc)		
Property Type = SHARED HC	USE, No of Units = 1, Occup	pancy = 5, No of Storeys = 4	
Number of Rooms	Total Number of Ro	ooms 9	
a) Sleeping ###	b) Living	Rooms 5	
, , , ,	, 3		
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fl	ats: 1
Shared Amenities	Number Descripti	ion	
a) Kitchen	2		
o) Bathrooms/Showers	2		
c) W.C.s	2		
_icence Details			
Commencement date:	18/07/2014	<b>Duration of licence:</b>	05/03/2019
Maximum number of person	s or households permitted	to occupy HMO under conditions	s of licence:
Households 5	Persons 5		
nformation referred to a	recidential property trib	unal or Landa Tribunal:	
None	residential property trib	ulial of Lalius Tribulial.	
Decision of Tribunal		Reference number	
Summary of conditions of li		tificates, HMO - Fire Mandatory con	ds, HMO -

Additional facilities, Electrical Works, Fire Alarms, Gas Certificates, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/ Repairs, Not Assigned, Structural fire works



#### Licence No.

#### 2014/01239/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

47 Norton Road Hove BN3 3BF

Ward

Central Hove

Name & Address of Licen	ce Holder		
Ms Gill Greenwood, 47 Norton			
Name & Address of Perso	n Managing		
,			
B ( B ) (			
Property Description	LUMO (No of otomore etc)		
Short description of licensed		0.11. (0)	
Property Type = SHARED HOU	USE, No of Units = 8, Occup	ancy = 8, No of Storeys = 4	
Number of Rooms	Total Number of Ro	oms 8	
a) Sleeping	b) Living I	Rooms	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description	on	
Licence Details			
Commencement date:	04/07/2014	Duration of licence:	01/12/2018
Maximum number of persons	s or households permitted	to occupy HMO under conditions	of licence:
Households 8	Persons 8		
Information referred to a r	esidential property tribu	ınal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Additional facilities, Electrical works, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other fire works



#### Licence No.

#### 2014/01254/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

171 Elm Grove Brighton BN2 3ES

Ward

Hanover And Elm Grove

Name & Address of Licence Holder		
Mr Oliver Dorman, 8 Bramble Rise Brighton BN1 5GF		
Name & Address of Person Managing		
Home James Lets, Kingsway House 134-140 Church Road Hove BN3 2DL	-	
December 1997		
Property Description  Short description of lineared LIMO (No of eteropy etc.)		
Short description of licensed HMO (No of storeys, etc)		
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 8, No of	Storeys = 4	
Number of Rooms Total Number of Rooms 8		
a) Sleeping b) Living Rooms		
Number of Self Contained Flats: 0 Number of	f Non Self Cont. Flats:	0
Shared Amenities Number Description		
a) Kitchen		
b) Bathrooms/Showers c) W.C.s		
Licence Details		
	n of licence:	06/03/2019
Commencement date: 04/07/2014 Duration  Maximum number of persons or households permitted to occupy HMC		
Commencement date: 04/07/2014 Duration		
Commencement date: 04/07/2014 Duration  Maximum number of persons or households permitted to occupy HMC	O under conditions of li	
Commencement date: 04/07/2014 Duration  Maximum number of persons or households permitted to occupy HMC  Households 0 Persons 8	O under conditions of li	
Commencement date: 04/07/2014 Duration  Maximum number of persons or households permitted to occupy HMC  Households 0 Persons 8  Information referred to a residential property tribunal or Lands  None	O under conditions of li	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/repairs, Structural fire works



#### Licence No.

#### 2014/01954/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

17 Upper Bevendean Avenue Brighton BN2 4FG

Ward

Moulsecoomb And Bevendean

Name & Address of Licer	ice Holder		
Mr Oliver Dorman, 8 Bramble	Rise Brighton BN1 5GF	=	
Name & Address of Person	on Managing		
MTM Property Services Ltd, 1	08A Lewes Road Bright	ton BN2 4AE	
Property Description			
Short description of license	d HMO (No of storeys,	, etc)	
Property Type = SHARED HC	USE, No of Units = 1, 0	Occupancy = 8, No of Storeys = 3	
Number of Rooms	Total Number	of Rooms 0	
a) Sleeping 8	b) L	iving Rooms 1	
	T		
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats:	0
Shared Amenities		cription	
<ul><li>a) Kitchen</li><li>b) Bathrooms/Showers</li></ul>	2		
c) W.C.s	2		
-,			
Licence Details			
	.=		20/20/20/2
Commencement date:	17/10/2014	Duration of licence:	30/03/2019
Maximum number of person	ıs or households perm	nitted to occupy HMO under conditions of	icence:
Households 8	Persons 8		
nousenoius	reisons o		
Information referred to a	residential property	rtribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li Additional facilities, Fire alarm		ory conds, HMO - Fire Mandatory conds, HMC	)-

Additional facilities, Fire alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2014/01955/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 43 Upper Lewes Road Brighton BN2 3FH

Ward

St. Peter's And North Laine

Name & Address of Licence Holder		
Ms Jackqueline Evans, 44 Upper Lewes Roa	ad Brighton BN2 3FH	
Name & Address of Person Managing	g	
,		
Property Description	f ataurana atab	
Short description of licensed HMO (No of	• ,	
Property Type = SHARED HOUSE, No of Ur	nits = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms Total I	Number of Rooms 6	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flats:	0 Number of Non Self Cont.	Flats: 0
Shared Amenities Number	Description	
a) Kitchen		
b) Bathrooms/Showers c) W.C.s		
C) W.C.S		
Licence Details		
	2/2014 Duration of licence:	03/12/2019
Commencement date: 03/12	Duration of licence:	
Commencement date: 03/12  Maximum number of persons or househo	olds permitted to occupy HMO under condition	
Commencement date: 03/12		
Commencement date: 03/12  Maximum number of persons or househo	olds permitted to occupy HMO under condition	
Commencement date: 03/12  Maximum number of persons or househo  Households 6 Persons	olds permitted to occupy HMO under condition	
Commencement date: 03/12  Maximum number of persons or househo  Households 6 Persons  Information referred to a residential p	olds permitted to occupy HMO under condition	ons of licence:

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Bedrooms, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2014/02083/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

28 Hereford Street Brighton BN2 1JT

Ward

Queen's Park

Name & Address of Licence	e Holder		
Mr Richard Carr, 56 Downs Ave	enue Old Town Eastbourn	e BN20 8TW	
Name & Address of Person	n Managing		
,			
Property Description			
Short description of licensed	HMO (No of storevs. etc	<u>.</u>	
Property Type = SHARED HOU	-		
		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Number of Rooms	Total Number of R	ooms 7	
a) Sleeping	b) Livinç	g Rooms	
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Flat	s: 0
Shared Amenities	Number Descrip	tion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	21/08/2014	Duration of licence:	29/04/2019
Maximum number of persons	or households permitte	d to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Information referred to a re	esidential property trib	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Fire Alarm, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Fire Notices 1, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural Fire works



#### Licence No.

#### 2014/02307/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

47A Lewes Road Brighton BN2 3HW

Ward

St. Peter's And North Laine

Name & Address of Licence Holder	
Ms Laura Dwyer-Smith, 26 Hove Park Way Hove BN3 6PT	
Name & Address of Person Managing	
Brighton Accommodation Agency, 74 Lewes Road Brighton BN2 3HZ	
Dunnautic Description	
Property Description Short description of licensed HMO (No of storeys, etc)	
	- 4
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 7, No of Storeys	= 4
Number of Rooms Total Number of Rooms 8	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Se	elf Cont. Flats: 0
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s	
Licence Details	
Commencement date: 05/11/2014 Duration of lice	nce: 30/04/2019
Maximum number of persons or households permitted to occupy HMO under	conditions of licence:
Households 7 Persons 7	
Information referred to a residential property tribunal or Lands Tribun	al:
None	
Decision of Tribunal Reference	number
Cummany of any distance of linears	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Loft Insulation, Management/Repairs, Other Fire Works, Ventilation



#### Licence No.

#### 2014/02310/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

50 Beaconsfield Road Brighton BN1 4QJ

Ward

Preston Park

		<u> </u>	
Name & Address of Licen	ce Holder		
Sir John & Lady Sally Wigram,	, Pinchers Cooks Pond Roa	d Milland Liphook Hampshire GU30 7	JY
Name & Address of Perso	n Managing		
G4 Lets, 2 Hythe Road Brighton	on BN1 6JS		
Property Description			
Short description of licensed	d HMO (No of storeys, etc)		
Property Type = SHARED HO	USE, No of Units = 1, Occu	pancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of Ro	ooms 8	
a) Sleeping	b) Living	ROUIIS	
Number of Solf Contained El	lete:	Number of New Solf Cont. Flor	to: 0
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities	Number Descript	ion	
a) Kitchen	- Italiaa Baaanpi		
b) Bathrooms/Showers			
c) W.C.s			
,,			
icence Details			
		<b>- </b> .	1-10-1001
Commencement date:	25/06/2014	Duration of licence:	15/05/2019
Maximum number of person	s or households permitted	I to occupy HMO under conditions	of licence:
Households 7	Persons 7		
nformation referred to a	residential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
•			

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2014/02311/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 9 Old Shoreham Road Brighton BN1 5DQ

Ward

Preston Park

Nama O Addusas of License	Holdon		
Name & Address of Licence			
Sir John & Lady Sally Wigram, Pir	ichers Cooks Pond Road Mi	lland Liphook Hampshire GU30 7J	<u>Y</u>
Name O Adduses of Dayson I	Annonium.		
Name & Address of Person N			
G4 Lets, 2 Hythe Road Brighton B	N1 6JS		
Property Description			
Short description of licensed HI	MO (No of storevs, etc)		
Property Type = SHARED HOUSE	-	ov = 7. No of Storevs = 4	
Floperty Type - SHARED HOUSE	-, No or offits - 1, Occupant	y - 1, No of Storeys - 4	
Number of Rooms	Total Number of Room	s 9	
a) Sleeping	b) Living Roo	oms	
Number of Self Contained Flats:	: 0	Number of Non Self Cont. Flats	s: 0
Shared Amenities N	lumber Description		
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	25/06/2014	Duration of licence:	15/05/2019
Commencement date.	20/00/2014	Burution of hechee.	10/00/2010
Maximum number of persons or	households permitted to	occupy HMO under conditions o	of licence:
Households 7 Pe	ersons 7		
, 10	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Information referred to a resi	idential property tribuna	l or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licen			

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2014/02313/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

116A London Road Brighton BN1 4JG

Ward

St. Peter's And North Laine

Name & Address of Licer	nce Holder	
	I Shoreham Road Portslade BN41 1SQ	
,		
Name & Address of Perse	on Managing	
,		
Property Description		
Short description of license	d HMO (No of storeys, etc)	
Property Type = BEDSIT, No	of Units = 5, Occupancy = 5, No of Storeys = 3	
N	Tatal Nation (Barrier 5	
Number of Rooms	Total Number of Rooms 5	
a) Sleeping 4	b) Living Rooms 1	
Number of Self Contained F	lats: 0 Number of Non Self Cont. Flats:	0
Shared Amenities	Number Description	
a) Kitchen     b) Bathrooms/Showers	1 1	
c) W.C.s	1	
,		
Licence Details		
Commencement date:	17/09/2014 Duration of licence:	17/09/2019
Commencement date.	17/09/2014 Duration of ficerice.	17/09/2019
Maximum number of persor	s or households permitted to occupy HMO under conditions of li	cence:
Households 5	Persons 5	
nousenous 5	reisons	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of li	cence	
	Vorks. 13. Management/ Repairs. 13. Management/Repairs. 2. Structu	ıral Fire

1. Fire Alarms, 11. Electrical Works, 13. Management/ Repairs, 13. Management/Repairs, 2. Structural Fire Works, 2. Structural fire works, 3. Other Fire Works, 3. Other fire works, 4. Loft Insulation, 5. Enlargement of kitchen, 7. Additional Facilities, 7. Additional facilities, 7. Additional Facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds





#### Licence No.

#### 2014/02331/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 70 Stanmer Park Road Brighton BN1 7JJ

Ward

Hollingdean And Stanmer

Name & Address of Licenc	e Holder		
Sir John & Lady Sally Wigram, F	Pinchers Cooks Pond Road M	illand Liphook Hampshire GU30 7J	(
Name & Address of Persor	Managing		
G4 Lets, 2 Hythe Road Brighton	BN1 6JS		
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOU	SE, No of Units = 1, Occupan	cy = 7, No of Storeys = 4	
Number of Rooms	Total Number of Room	ns 10	
a) Sleeping	b) Living Ro	oms	
		]	_
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Flats	: 0
Shared Amenities	Number Description		
a) Kitchen	Number Description		
b) Bathrooms/Showers			
c) W.C.s			
c) w.o.s			
Licence Details			
		Г	
Commencement date:	10/09/2014	Duration of licence:	15/05/2019
Maximum number of persons	or households permitted to	occupy HMO under conditions o	flicence:
Households 7	Persons 7		
Information referred to a re	sidential property tribun	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice	200		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Kitchen 3, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2014/02333/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

3 Seafield Road Hove BN3 2TN

Ward

Central Hove

Name & Address of Licence	Holder		
Mr Derek Manthorpe, 2 Robin Roa	ad Burgess Hill RH15 9XX		
Name & Address of Person N	<b>l</b> anaging		
Mr Christopher Hartfield, 32 Tongo	dean Avenue Hove BN3 6TN	N	
Property Description			
Short description of licensed HM	MO (No of storeys, etc)		
Property Type = SHARED HOUSE	E, No of Units = 11, Occupa	ncy = 11, No of Storeys = 4	
Number of Rooms	Total Number of Room	ns 11	
a) Sleeping	b) Living Ro	oms	
Number of Self Contained Flats:	: 0	Number of Non Self Cont. Flats:	0
Shared Amenities N	umber Description		
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	03/10/2014	Duration of licence:	22/02/2019
Commencement date.	03/10/2014	Duration of licence.	22/02/2019
Maximum number of persons or	households permitted to	occupy HMO under conditions of	licence:
Households 11 Pe	ersons 11		
Information referred to a resi	idential property tribun	al or Lands Tribunal:	
None	dential property tribuna	ar or Earlus Fribuliai.	
Decision of Tribunal		Reference number	
DECISION OF THINRING		Reference number	
Cummary of conditions of license	00		

**Summary of conditions of licence**Additional facilities, Electrical Reports, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO -Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO -Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural Fire works



#### Licence No.

#### 2014/02336/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

7 Seafield Road Hove BN3 2TN

Ward

Central Hove

Name & Address of Licence Holder			
Mr Derek Manthorpe, 2 Robin Road Burgess	LIII DU15 0VV		
Will Derek Mantholpe, 2 Robin Road Burgess	, HIII KH 15 9AA		
Name & Address of Person Managing	,		
Mr Christopher Hartfield, 32 Tongdean Aven	-	N	
The Children Harmona, 62 Forigadan, Wolf	4011010 5110 011	•	
Property Description			
Short description of licensed HMO (No of	storeys, etc)		
Property Type = SHARED HOUSE, No of U	nits = 9, Occupan	cy = 9, No of Storeys = 3	
		•	
Number of Rooms Total I	Number of Room	ns 9	
a) Sleeping	b) Living Ro	oms	
		1	
Number of Self Contained Flats:	0	Number of Non Self Cont. Flats	s: 0
Shared Amenities Number	Description		
a) Kitchen	Description		
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Common coment data:	0/2014	Duration of licence:	16/06/2019
Commencement date: 03/10	72014	Duration of licence:	16/06/2019
Maximum number of persons or househo	lds permitted to	occupy HMO under conditions of	of licence:
Households 9 Persons	9		
Information referred to a residential p	roperty tribun	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licence			

Summary of conditions of licence Additional facilities, Fire precautions, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO -Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO -Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs



#### Licence No.

#### 2014/02337/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

33 Beaconsfield Road Brighton BN1 4QH

Ward

Preston Park

Name & Address of Lice	nce Holder		
Apel Holdings Ltd, Ibstone Co	ottage Grays Lane Ibstone	HP14 3XX	
Name & Address of Pers	on Managing		
G4 Lets, 2 Hythe Road Bright	on BN1 6JS		
Property Description			
Short description of license	d HMO (No of storeys, et	c)	
Property Type = SHARED HC	OUSE, No of Units = 1, Occ	cupancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 8	
a) Sleeping	b) Livir	ng Rooms	
			_
Number of Self Contained F	flats: 0	Number of Non Self Cont. Flat	s: 0
Shared Amenities	Number Descri	ntion	
a) Kitchen	Number Descri	ption	
b) Bathrooms/Showers			
c) W.C.s			
C) W.O.S			
Licence Details			
Commencement date:	24/03/2015	Duration of licence:	15/05/2019
Maximum number of persor	ns or households permitt	ed to occupy HMO under conditions	of licence:
Households 7	Persons 7		
Information referred to a	residential property tr	ibunal or Lands Tribunal:	
None	rooman proporty tr	manus - Lamas - Fribanian	
Decision of Tribunal		Reference number	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural Fire Works



#### Licence No.

#### 2014/02375/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

35 Beaconsfield Road Brighton BN1 4QH

Ward

Preston Park

Name & Address of Licence			
Apel Holdings Ltd, Ibstone Cottag	je Grays Lane Ibstone B	uckinghamshire HP14 3XX	
Name & Address of Person			
G4 Lets, 2 Hythe Road Brighton	BN1 6JS		
<b>.</b>			
Property Description			
Short description of licensed H	-		
Property Type = SHARED HOUS	E, No of Units = 1, Occu	pancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of Ro	ooms 7	
a) Sleeping	b) Living	Rooms	
			_
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Flats:	0
		_	
	Number Descript	ion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	07/04/2015	Duration of licence:	15/05/2019
Maximum number of persons	or haugahalda narmitta	I to occupy HMO under conditions of I	ioonoo
maximum number of persons of	n nousenoius permittet	to occupy himo under conditions of t	icerice.
Households 7 P	Persons 7		
Information referred to a res	sidential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licer	100		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2014/02387/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

62 Westbourne Gardens Hove BN3 5PQ

Ward

Westbourne

Name & Address of Licence Holder	
Mr & Mrs John Bernard & Eileen Isaacs, Mayfield Middleway Kingston Gorse BN16 1RY	
Name & Address of Person Managing	
Name & Address of Person Managing	
,	
Branarty Description	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 6, Occupancy = 6, No of Storeys = 3	
Number of Rooms Total Number of Rooms 6	
a) Sleeping b) Living Rooms	
a) Steeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	: 0
Shared Amenities Number Description	
a) Kitchen b) Pathragma/Shawara	
b) Bathrooms/Showers c) W.C.s	
U VI.O.S	
Licence Details	
Commencement date: 18/07/2014 Duration of licence:	27/04/2019
Maximum number of persons or households permitted to occupy HMO under conditions o	f licanca:
maximum number of persons of nouseholds permitted to occupy time under conditions o	i licelice.
Households 6 Persons 6	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of license	

Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Structural fire works



#### Licence No.

#### 2014/02403/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

14 Hastings Road Brighton BN2 3AF

Ward

Hanover And Elm Grove

Name & Address of Licence H	Holder		
Mr Peter Bell, 30 Hilda Vale Road	Orpington Kent BR6 7AN		
Name & Address of Person M	lanaging		
Brighton Accommodation Agency,	74 Lewes Road Brighton B	N2 3HZ	
Property Description			
Short description of licensed HM	IO (No of storeys, etc)		
Property Type = SHARED HOUSE	, No of Units = 1, Occupan	cy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Room	ns 6	
a) Sleeping	b) Living Ro	oms	
Number of Self Contained Flats:	0	Number of Non Self Cont. Flats:	0
Shared Amenities Nu	umber Description		
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
D ( )			
Licence Details			
Commencement date:	17/12/2015	Duration of licence:	14/05/2019
Maximum number of persons or	households permitted to	occupy HMO under conditions of	licence:
Households 6 Per	rsons 6		
Information referred to a resid	dential property tribun	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licens			

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2014/02522/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

5 Sillwood Place Brighton BN1 2LH

			ward	Reger	ncy
Name & Address of Licen	ce Holder				
Mr Adrian Newey, The Cedars	Church Lane S	Sunninghill Berks	shire SL5 7DD		
Name & Address of Perso	5 5				
Mrs Charlotte Newey, The Ced	dars Church Lar	ne Sunninghill B	erkshire SL5 7DD		
Property Description					
Short description of license	d HMO (No of s	storeys, etc)			
Property Type = BEDSIT, No o	of Units = 8, Oc	cupancy = 10, N	lo of Storeys = 5		
Number of Rooms	Total N	umber of Room	ns 19		
a) Sleeping ###		b) Living Ro			
-,		٠, ٢			
Number of Self Contained Fl	lats:	1	Number of Non S	Self Cont. Flats:	7
			1		
Shared Amenities	Number	Description			
a) Kitchen	8				
b) Bathrooms/Showers	4				
c) W.C.s	4				
Licence Details					
Commencement date:	21/04/2	2016	Duration of lice	ence:	31/03/2019
Maximum number of person	s or household	ds nermitted to	occupy HMO unde	er conditions of li	cence.
- Person	- Trouscrion	25 permitted to	occupy rimo unde		conce.
Households 10	Persons	10			
Information referred to a	residential pr	operty tribun	al or Lands Tribu	nal:	
None					
Decision of Tribunal			Reference	ce number	
Summary of conditions of lie HMO - Elec Mandatory conds.		indatory conds.	HMO - Furniture Ma	ndatory conds. HN	MO -

Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2014/02597/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

57 Lowther Road Brighton BN1 6LF

Ward

**Preston Park** 

Name & Address of Licence	e Holder		_
Ms Ann Bryant, 54 Ockly Way h		NF	
Name & Address of Person	n Managing		
,			
Duamantu Daganintian			
Property Description Short description of licensed	HMO (No of storous of	c)	
Property Type = SHARED HOL			
Froperty Type - STIANED FIOC	SE, NO OF OTHES - 1, OCC	upancy – 0, NO OI Stoleys – 3	
Number of Rooms	Total Number of F	Rooms 6	
a) Sleeping	b) Livin	g Rooms	
Number of Self Contained Fla	ots: 0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Descri	otion	
Licence Details			
Commencement date:	24/03/2015	Duration of licence:	02/06/2019
Maximum number of persons	or households permitte	ed to occupy HMO under conditions	of licence:
Households 6	Persons 6		
Information referred to a re	esidential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Electrical works, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, LOFT INSULATION, Structural fire works, additional facilities, management/repairs, structural fire works



#### Licence No.

#### 2014/02619/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

23 St Michaels Place Brighton BN1 3FU

Ward

Regency

Name & Address of Licence Holder  Mr Bashir Ahmed, 80 Dyke Road Avenue Brighton BN1 5LF
Mr Bashir Ahmed, 80 Dyke Road Avenue Brighton BN1 5LF
Name & Address of Person Managing
Mr Alexander Raheem, 83 Pankurst Avenue Brighton BN2 9AD
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 5, Occupancy = 13, No of Storeys = 5
Number of Rooms Total Number of Rooms 5
a) Sleeping b) Living Rooms
b) Living Reemb
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
Number of contamout face.
Shared Amenities Number Description
a) Kitchen
a) Kitchen
a) Kitchen b) Bathrooms/Showers c) W.C.s
a) Kitchen b) Bathrooms/Showers
a) Kitchen b) Bathrooms/Showers c) W.C.s
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  03/11/2014  Duration of licence:  04/06/2019
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  03/11/2014  Duration of licence:  04/06/2019
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 03/11/2014 Duration of licence: 04/06/2019  Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households 7 Persons 13
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 03/11/2014 Duration of licence: 04/06/2019  Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households 7 Persons 13  Information referred to a residential property tribunal or Lands Tribunal:
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 03/11/2014 Duration of licence: 04/06/2019  Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households 7 Persons 13

Additional Facilities, Electrical reports, Gas Certificates, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural Fire Works, Structural fire works



#### Licence No.

#### 2014/02620/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

39 St Pauls Street Brighton BN2 3HR

Ward

St. Peter's And North Laine

Name & Address of Licenc	e Holder		
A Simmons, Flat 2 91 Western F	Road Brighton BN1 2LE	3	
Name & Address of Persor			
MTM Property Services Ltd, 108	A Lewes Road Brighto	n BN2 4AE	
D			
Property Description	UMO (No of otorovo d	40)	
Short description of licensed		·	
Property Type = SHARED HOU	SE, NO of Units = $1$ , Oc	ccupancy = 5, No of Storeys = 4	
Number of Rooms	Total Number of	Rooms 5	
a) Sleeping	b) Liv	ing Rooms	
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities	Number Descr	ription	
a) Kitchen			
b) Bathrooms/Showers c) W.C.s			
Licence Details			
Commencement date:	03/11/2014	Duration of licence:	23/10/2018
Commencement date.	03/11/2014	Duration of ficence.	23/10/2016
Maximum number of persons	or households permit	tted to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Information referred to a re	sidential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice	nce		

Additional facilities, Enlargement of Bedrooms, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Not Assigned, Structural fire works



#### Licence No.

#### 2014/02622/HMO/PS

#### **REGISTER ENTRY FOR** (Address of licensed HMO)

Beagleford 39 Cromwell Road Hove BN3 3EE

Ward

Goldsmid

Nama <sup>Q</sup> Address of Licer	soo Holdon		
Name & Address of Licer		DC	
Miss Kathleen D Edwards, 6 F	Highcroft Villas Brighton Biv 1 5	P8	
Name & Address of Perso	on Managing		
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, etc)		
-	OUSE, No of Units = 9, Occupa	nov = 0. No. of Storovo = 4	
Property Type - SHARED HO	703E, NO OF OTHES – 9, Occupa	ricy - 9, No or Storeys - 4	
Number of Rooms	Total Number of Roo	ms 9	
a) Sleeping	b) Living R	ooms	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats	s: 0
Shared Amenities	Number Descriptio	n	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Licence Details			
Commencement date:	06/11/2014	Duration of licence:	13/07/2018
Maximum number of person	ns or households normitted (	o occupy HMO under conditions o	of licence:
		o occupy rimo under conditions c	incence.
Households 9	Persons 9		
1.6	and the state of t	and and analog Table	
Information referred to a	residential property tribu	nal or Lands Tribunal:	
None		D.C.	
Decision of Tribunal		Reference number	
Summary of conditions of li	cence		

HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Heating 5, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2014/02624/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

26 Brunswick Place Hove BN3 1NA

Ward

Brunswick And Adelaide

Name & Address of Licence	e Holder		
Mrs Beryl Edwards, 6 Highcroft			
Name & Address of Person	Managing		
Miss Kathleen D Edwards, 6 Hig	hcroft Villas Brighton BN1 5	SPS	
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOUS	SE, No of Units = 15, Occup	pancy = 15, No of Storeys = 5	
Number of Rooms	Total Number of Roc	oms 15	
a) Sleeping	b) Living F	Rooms	
Number of Self Contained Flat	s: 0	Number of Non Self Cont. Flats	: 0
<b>.</b>			
Shared Amenities	Number Description	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	29/08/2014	Duration of licence:	08/07/2018
	20/00/2011		00/01/2010
Maximum number of persons	or households permitted	to occupy HMO under conditions o	f licence:
Households 15	Persons 15		
Information referred to a re	sidential property tribu	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other fire works



#### Licence No.

#### 2014/02734/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

28 College Road Brighton BN2 1JA

Ward

Queen's Park

ame & Address of Lice	nce Holder		
Ir Matthew Sorokin, Geneva	House 77A Rutland Road	Hove BN3 5FE	
ame & Address of Pers	on Managing		
roperty Description			
	ed HMO (No of storeys, etc	r)	
•	•	•	
operty Type = SHARED HC	JUSE, NO OF UTILS = 3, OCC	upancy = 3, No of Storeys = 4	
umber of Rooms	Total Number of F	Rooms 3	
Sleeping 3	b) Livin	g Rooms	
umber of Self Contained F	Flats: 5	Number of Non Self Cont. Flats:	3
hared Amenities	Number Descrip	otion	
Kitchen	3		
Bathrooms/Showers	2		
W.C.s	2		
cence Details			
	10/00/00/		
ommencement date:	12/09/2014	Duration of licence:	16/04/2019
aximum number of persor	ns or households permitte	ed to occupy HMO under conditions of I	icence:
ouseholds 3	Persons 3		
Jusenolus	reisons 3		
formation referred to a	residential property tri	bunal or Lands Tribunal:	
one			
ecision of Tribunal		Reference number	
	ns, HMO - Elec Mandatory o	conds, HMO - Fire Mandatory conds, HMO	

Additional facilities, Fire alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2014/02744/HMO/PS

#### **REGISTER ENTRY FOR** (Address of licensed HMO)

83 Addison Road Hove BN3 1TS

Ward

Goldsmid

ame & Address of Licen	ce Holder		
r Matthew Sorokin, Geneva	House 77A Rutland Road I	Hove BN3 5FE	
ame & Address of Perso	n Managing		
operty Description	LUMO (No of otomore of	-1	
ort description of license	-		
operty Type = SHARED HO	USE, No of Units = 5, Occi	upancy = 5, No of Storeys = 3	
umber of Rooms	Total Number of F	Rooms 5	
Sleeping 5	b) Livin	g Rooms	
. 5	,	<u> </u>	
ımber of Self Contained Fl	ats: 3	Number of Non Self Cont. Fl	ats: 5
			<u> </u>
ared Amenities	Number Descrip	otion	
Kitchen	5		
Bathrooms/Showers	1		
W.C.s	2		
cence Details			
ommencement date:	02/09/2014	<b>Duration of licence:</b>	16/04/2019
avimum numbar of parson	e or households normitte	ed to occupy HMO under condition	s of license:
ixilliulli liulliber of person	s or nousenoius permitte	ed to occupy Himo drider condition	s of licefice.
ouseholds 5	Persons 5		
		<del></del>	
	residential property tri	bunal or Lands Tribunal:	
one			
ecision of Tribunal		Reference number	
ımmary of conditions of liditional facilities, Fire alarm		atory conds, HMO - Fire Mandatory co	onds, HMO -

Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO -Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2014/02746/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

6 Ewhurst Road Brighton BN2 4AJ

Ward

Moulsecoomb And Bevendean

Name & Address of Licence	Holder		
Mr Philip Hilliard, 76 The Drovewa			
Name & Address of Person	Managing		
,			
Property Description	MO (No. 1)	<b>,</b>	
Short description of licensed H	-		
Property Type = SHARED HOUS	E, No of Units = 1, Occu	ipancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of R	ooms 5	
a) Sleeping	b) Livinç	Rooms	
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flat	s: 1
	Number Descrip	tion	
a) Kitchen b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	09/09/2015	Duration of licence:	02/06/2019
Commencement date.	09/09/2013	Duration of incence.	02/00/2019
Maximum number of persons of	r households permitte	d to occupy HMO under conditions	of licence:
Households 5 P	ersons 5		
Information referred to a res	idential property trik	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2014/02748/HMO/PS

#### **REGISTER ENTRY FOR** (Address of licensed HMO)

14 Ewhurst Road Brighton BN2 4AJ

Ward

Moulsecoomb And Bevendean

Name & Address of Licenc	o Holder		
Mr Philip Hilliard, 76 The Drovey	way Hove BN3 6PR		
Nama & Address of Daves	Managing		
Name & Address of Persor	i Managing		
,			
Duanauty Description			
Property Description		<b>.</b>	
Short description of licensed		•	
Property Type = SHARED HOU	SE, No of Units = 1, Occu	ipancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of R	ooms 5	
a) Sleeping	b) Living	g Rooms	
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number Descrip	tion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	27/04/2015	<b>Duration of licence:</b>	02/12/2018
Maximum number of persons	or households permitte	d to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Information referred to a re	sidential property trib	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2014/02749/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

3 Ewhurst Road Brighton BN2 4AL

Ward

Moulsecoomb And Bevendean

Name & Address of Licen	ce Holder			
Mr Philip Hilliard, 76 The Drov	eway Hove BN3 6P	PR		
Name & Address of Perso	n Managing			
,				
Property Description				
Short description of license	d HMO (No of store	evs etc)		
Property Type = SHARED HO	•	•	ev = 5. No of Storevs = 3	
Troperty Type – OHARLD HO	OOL, NO OF OTHER	r, Occupant	5y - 3, 140 of otorcy3 - 3	
Number of Rooms	Total Numb	per of Room	s 7	
a) Sleeping 5	!	b) Living Ro	oms 1	
Number of Self Contained Fl	ats:	0	Number of Non Self Cont. Flats:	0
Shared Amenities a) Kitchen	Number I	Description		
b) Bathrooms/Showers	2			
c) W.C.s	2			
License Detaile				
Licence Details				
Commencement date:	27/04/2015	5	Duration of licence:	01/06/2019
Maximum number of person	s or households n	ormitted to	occupy HMO under conditions of li	iconco:
	s of flousefloids p	Dermitted to	occupy rimo under conditions of h	cence.
Households 5	Persons	5		
Information referred to a	residential prepa	arty tribue:	al or Lands Tribunal:	
None	residential prope	arty tribune	ar or Lands Inibanal.	
Decision of Tribunal			Reference number	
Summary of conditions of lie Additional Facilities, HMO - Ele		s, HMO - Fire	e Mandatory conds, HMO - Furniture	

Additional Facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2014/02756/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

21 Seafield Road Hove BN3 2TP

Ward

Central Hove

Name & Address of Licer	ice Holder	
Mr Alfred Haagman, 204 Chu	ch Road Hove BN3 2DJ	
Name & Address of Pers		
Hove Lets, 204 Church Road	Hove BN3 2DJ	
Property Description		
Short description of license	d HMO (No of storeys, etc)	
•	OUSE, No of Units = 1, Occupancy = 14, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 19	
a) Sleeping ###	b) Living Rooms	
Number of Self Contained F	lats: 0 Number of Non Self Cont. Flats:	1
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description  8 3 3	
Licence Details		
Commencement date:	20/01/2015 Duration of licence:	13/06/2019
Maximum number of persor	ns or households permitted to occupy HMO under conditions of lie	cence:
Households 14	Persons 14	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of li Additional facilities, Electrical	cence works, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, H	MO -

Additional facilities, Electrical works, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / repair, Management / repairs, Other fire works



#### Licence No.

#### 2014/02762/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

9 Mayo Road Brighton BN2 3RJ

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
Mr Steven Teasdale, 206 New	Church Road Hove Bl	N3 4EA	
Name & Address of Perso	on Managing		
Pavillion Properties Ltd, 128 -	129 Lewes Road Brigh	iton BN2 3LG	
Property Description			
Short description of licensed	d HMO (No of storeys	, etc)	
Property Type = SHARED HO	USE, No of Units = 1, (	Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number	of Rooms 9	
a) Sleeping ###	b) L	iving Rooms 3	
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number Des	cription	
a) Kitchen	2		
b) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
Licence Details			
Commencement date:	12/09/2014	Duration of licence:	05/03/2019
Maximum number of person	s or households pern	nitted to occupy HMO under conditions of	licence:
Households 5	Persons 5		
Information referred to a	residential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie	cence		
Fire structural works, HMO - E	lec Mandatory conds, I	HMO - Fire Mandatory conds, HMO - Furniture O - Property Chges Mandatory conds, HMO -	

Fire structural works, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Ventilation



#### Licence No.

#### 2014/02763/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

16 Bedford Street Brighton BN2 1AN

Ward

Queen's Park

Name & Address of Licence Holder
Mr Jianzhi Ni, Topbon Property Management Co Ltd Flat 5 16 Stone Street Brighton BN1 2HB
Name & Address of Person Managing
,
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 9, No of Storeys = 5
Number of Rooms Total Number of Rooms 9
a) Sleeping b) Living Rooms
Notice to the description of the control of the con
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
Shared Amenities Number Description
a) Kitchen
b) Bathrooms/Showers
c) W.C.s
,
Licence Details
Licence Details  Commencement date: 07/01/2016 Duration of licence: 15/06/2019
Commencement date: 07/01/2016 Duration of licence: 15/06/2019  Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Commencement date: 07/01/2016 Duration of licence: 15/06/2019
Commencement date: 07/01/2016 Duration of licence: 15/06/2019  Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households 9 Persons 9
Commencement date: 07/01/2016 Duration of licence: 15/06/2019  Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Commencement date: 07/01/2016 Duration of licence: 15/06/2019  Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households 9 Persons 9  Information referred to a residential property tribunal or Lands Tribunal:

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2014/02968/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

Maisonette 27 York Place Brighton BN1 4GU

Ward

St. Peter's And North Laine

Name & Address of Licence Holder	
Mr Abdus Khasru, 11 Northease Drive Hove BN3 8PA	
Name & Address of Person Managing	
,	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 4	
Number of Rooms Total Number of Rooms 6	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	»: 0
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers c) W.C.s	
Licence Details	
Commonoment date: 00/00/2015 Duration of licenses	24/06/2010
Commencement date: 09/09/2015 Duration of licence:	24/06/2019
Maximum number of persons or households permitted to occupy HMO under conditions of	f licence:
Households 5 Persons 5	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of licence	4 11840

Fire EI / GI / Cupboards 1, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Doors 1, HMO - Fire Doors 5, HMO - Fire Doors 6, HMO - Fire Emergency Lighting 1, HMO - Fire Emergency Lighting 2, HMO - Fire Mandatory conds, HMO - Fire Notices 1, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Bedrooms, HMO - Licensing Loft Insulation, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, fire alarms, loft insulation, structural fire works, structural fireworks, ventilation





#### Licence No.

#### 2014/03353/HMO/PS

#### **REGISTER ENTRY FOR** (Address of licensed HMO)

70 Marmion Road Hove BN3 5FT

Ward

Wish

Name & Address of Licence Holder	
Mr Mark Dyer, 76 Old Shoreham Road Hove BN3 6HL	
Name & Address of Person Managing	
,	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms Total Number of Rooms 7	
a) Sleeping b) Living Rooms	
N -1	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	. 0
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers	
c) W.C.s	
Licence Details	
On 1994 1994 5	40/07/0040
Commencement date: 20/01/2015 Duration of licence:	13/07/2019
Maximum number of persons or households permitted to occupy HMO under conditions of	flicence:
Households 5 Persons 5	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of license	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2014/03354/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

84 Hanover Terrace Brighton BN2 9SP

Ward

Hanover And Elm Grove

Name & Address of Licence Holder			
Mr Roderick Neville, Forge Meadow Hammer	r Lane Cowbeech BN27 4JL		
Name & Address of Person Managing			
,			
Property Description			
Short description of licensed HMO (No of	storeys, etc)		
Property Type = SHARED HOUSE, No of Un	nits = 1, Occupancy = 5, No of Storeys = 3		
Number of Rooms Total N	lumber of Rooms		
a) Sleeping	b) Living Rooms		
Number of Self Contained Flats:	0 Number of Non Self Cont. Fla	nts: 0	
Number of Self Contained Flats.	Number of Non Self Cont. Fix	us. 0	
Shared Amenities Number	Description		
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date: 28/11/	/2014 Duration of licence:	26/06/2019	
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
Households 5 Persons	5		
Information referred to a residential p	roperty tribunal or Lands Tribunal:		
None			
Decision of Tribunal	Reference number		
O			

#### Summary of conditions of licence

Gas Certificates, General, HMO - Fire Alarm Systems 3, HMO - Fire Emergency Lighting 1, HMO - Fire General 1, HMO - Fire Mandatory conds, HMO - Fire Notices 1, HMO - Fire Walls 1, HMO - Furniture Mandatory conds, HMO - General 1, HMO - General 2, HMO - General 4, HMO - General 6, HMO - General 7, HMO - General Electrical 1, HMO - Licensing Kitchen 6, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Not Assigned, Other Fire works, Structural Fire Works, Structural fire Works





#### Licence No.

#### 2014/03360/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

49 Portland Avenue Hove BN3 5NF

Ward

Wish

Name & Address of Licence Holder	
Remoon Francis, 49 Portland Avenue Hove BN3 5NF	
Name & Address of Person Managing	
,	
Dronauty Decariation	
Property Description Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Property Type – SHARED HOUSE, NO of Office – 1, Occupancy – 5, No of Storeys – 3	
Number of Rooms Total Number of Rooms 6	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	s: 0
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s	
Licence Details	
Commencement date: 20/01/2015 Duration of licence:	13/07/2019
Maximum number of persons or households permitted to occupy HMO under conditions of	of licence:
Households 5 Persons 5	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of licence	•

HMO - Elec Mandatory conds, HMO - Fire General 1, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Kitchen 6, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Ventilation



#### Licence No.

#### 2014/03363/HMO/PS

#### **REGISTER ENTRY FOR** (Address of licensed HMO)

32 Ladysmith Road Brighton BN2 4EJ

Ward

Moulsecoomb And Bevendean

Name & Address of Licence	e Holder		
Mr Paul Moran, Grove House 11	Hay Lane Kingsbury Lon	don NW9 0NH	
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOUS	SE, No of Units = 1, Occup	pancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Ro		
a) Sleeping	b) Living	Rooms	
Number of Self Contained Flat	s: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities	Number Descript	ion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	29/04/2015	Duration of licence:	14/07/2019
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
Households 5	Persons 5		
Information referred to a re	sidential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summany of conditions of lies			

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2014/03382/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

16 Norfolk Square Brighton BN1 2PB

Ward

Brunswick And Adelaide

Name & Address of Licen	ce Holder		
Mr Shahid Ahmed, 1 The Heigh			
	<b>J</b>		
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOU	JSE, No of Units = 7, Occup	ancy = 7, No of Storeys = 5	
Number of Rooms	Total Number of Ro	oms 7	
a) Sleeping	b) Living		
a) Sieeping	b) Living	Rooms	
Number of Self Contained Fla	ats: 0	Number of Non Self Cont. Fla	ts: 0
Number of Self Contained Fig	11S: U	Number of Non Self Cont. Fla	is: 0
Shared Amenities	Number Descripti	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	09/09/2015	Duration of licence:	18/07/2019
Maximum number of persons	s or households permitted	to occupy HMO under conditions	of licence:
Hamakalda 7	D 7		
Households 7	Persons 7		
Information referred to a r	esidential property tribi	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Electrical works, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works, management/repairs, other fire works



#### Licence No.

#### 2014/03384/HMO/PS

#### **REGISTER ENTRY FOR** (Address of licensed HMO)

3 Chichester Place Brighton BN2 1FE

Ward

East Brighton

Name & Address of Licence Holder	
Mr B T Cox, 40 Hillbrow Hove BN3 6QH	
Name & Address of Person Managing	
,	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 20, Occupancy = 20, No of Storeys = 5	
Number of Rooms Total Number of Rooms 20 a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. F	Flats: 0
Shared Amenities  Number  Description  a) Kitchen  b) Bathrooms/Showers  c) W.C.s	
Licence Details	
Commencement date: 23/11/2014 Duration of licence:	22/06/2019
Maximum number of persons or households permitted to occupy HMO under condition	ns of licence:
Households 20 Persons 20	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of licence	rnituro

Mandatory conds, HMO - General 1, HMO - General 4, HMO - General 5, HMO - General 6, HMO - General 7, HMO - General Electrical 1, HMO - General Electrical 2, HMO - Property Chges Mandatory conds, HMO -Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Heating, Management / Repairs, Management / Repairs, Management / Repairs, Management Repair, Management Repairs, Management repairs, Management repairs, Management/repairs, Timescales, Ventilation, electrical reports, gas certificates, management repairs IS, management/repairs sc





#### Licence No.

#### 2014/03424/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

22 Buckingham Place Brighton BN1 3PJ

Ward

St. Peter's And North Laine

Name & Address of Licence Holder			
Ms Catherine Foustanellis, C/o 47 Norfolk Squa	are Brighton BN1 2PA		
Name & Address of Person Managing			
Homelets (Brighton) Ltd, 47 Norfolk Square Brighton	ighton BN1 2PA		
Duran anti- Da a minetia n			
Property Description	tornus etal		
Short description of licensed HMO (No of st			
Property Type = SHARED HOUSE, No of Units	s = 7, Occupancy = 8, No of Storeys = 4		
Number of Rooms Total Nu	imber of Rooms 7		
a) Sleeping	b) Living Rooms		
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	0	
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s	Description		
Licence Details			
Commencement date: 07/09/20	015 <b>Duration of licence</b> :	13/07/2019	
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
Households 8 Persons	8		
Information referred to a residential pro	operty tribunal or Lands Tribunal:		
None			
Decision of Tribunal	Reference number		
Common of conditions of license			

#### Summary of conditions of licence

Additional Facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Structural fire works, Ventilation



#### Licence No.

#### 2014/03430/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

Ward

Regency

Name & Address of Licence Holder	
Mr Neil Hall, Flat 9 22 Bristol Road Kemptown Brighton BN2 1AP	
Name & Address of Person Managing	
Home Leasing Ltd, 64 Queens Road Brighton BN1 3XD	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 10, Occupancy = 12, No of Storeys = 4	
Number of Rooms Total Number of Rooms 10	
a) Sleeping b) Living Rooms	
a) diceping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	: 0
Number of Self Contained Flats.	
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers	
c) W.C.s	
Licence Details	
Licence Details	
Commencement date: 27/11/2014 Duration of licence:	18/06/2019
Maximum number of persons or households permitted to occupy HMO under conditions o	f licence:
Households 12 Persons 12	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of licence	

Additional Facilites, Additional Facilities, Additional facilities, Electrical Works, Electrical works, Fire alarms, General, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - General 1, HMO - General 2, HMO - General 6, HMO - General 7, HMO - General Electrical 1, HMO - General Electrical 2, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management Repairs, Management repairs, Structural Fire Works, Structural Fire Works, Structural Fire works, management repairs, structural fire works





#### Licence No.

#### 2014/03471/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 53 Rose Hill Close Brighton BN1 4HT

Ward

St. Peter's And North Laine

Name & Address of Licence Holder			
Mr Simon Beeny, 60 Meadway Crescent Hove BN3 7NL			
Name & Address of Person Managing			
Mr Ian Wilkinson, T/a Wilkinson Estate & Letting Agents 26 Elm Grove Brighton BN2 3DD			
Property Description			
Short description of licensed HMO (No of storeys, etc)			
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3			
Number of Rooms 7			
a) Sleeping b) Living Rooms			
Number of Self Contained Flats: 0 Number of Non Self Cont	t. Flats:		
Shared Amenities Number Description			
a) Kitchen			
b) Bathrooms/Showers c) W.C.s			
U) W.O.3			
Licence Details			
Commencement date: 29/04/2015 Duration of licence:	06/07/2019		
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
Households 6 Persons 6			
Information referred to a residential property tribunal or Lands Tribunal:			
None			
Decision of Tribunal Reference numb	er		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Not Assigned



#### Licence No.

#### 2014/03567/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

17 Wakefield Road Brighton BN2 3FP

Ward

St. Peter's And North Laine

Name & Address of Licence	Holder		
Mr Nicholas & Mrs Barbara Arund		vwards Heath RH16 4AB	
	,	<b>,</b>	
Name & Address of Person I	Managing		
,			
Property Description			
Short description of licensed H	MO (No of storeys, etc	<del>:</del> )	
Property Type = SHARED HOUS	E, No of Units = 1, Occu	upancy = 5, No of Storeys = 5	
Number of Rooms	Total Number of R	ooms 5	
a) Sleeping	b) Living	Rooms	
a) 5.55pmg	<i>5)</i> 2.7§		
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flat	es: 0
Shared Amenities N	lumber Descrip	tion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	22/05/2015	<b>Duration of licence:</b>	17/03/2019
Maximum number of persons o	r households permitte	d to occupy HMO under conditions	of licence:
-	-		
Households 5 Po	ersons 5		
Information referred to a res	idential property trib	ounal or Lands Tribunal:	
None	raoman proporty tilk	The second of th	
Decision of Tribunal		Reference number	

Summary of conditions of licence

Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Bedrooms, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Managment/repairs, Other fire works, Structural fire works



#### Licence No.

#### 2014/03734/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

10 Charlotte Street Brighton BN2 1AG

Ward

Queen's Park

Name & Address of Licence	e Holder		
Mrs Karen Dodd, Old School Ho		BN7 3DB	
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed I	-		
Property Type = SHARED HOUS	SE, No of Units = 9, Occ	supancy = 9, No of Storeys = 5	
Number of Rooms	Total Number of F	Rooms 11	
a) Sleeping	b) Livir	ng Rooms	
Number of Self Contained Flat	s: 0	Number of Non Self Cont. Flat	<b>s</b> : 0
Shared Amenities	Number Descri	ption	
a) Kitchen			
b) Bathrooms/Showers c) W.C.s			
C) W.O.S			
Licence Details			
Commencement date:	30/09/2015	Duration of licence:	31/07/2019
Maximum number of persons	or households permitt	ed to occupy HMO under conditions	of licence:
Households 9	Persons 9		
i iouseiioius s	- GI 30113 g		
Information referred to a re	sidential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Fire EI / GI / Cupboards 1, HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 2, HMO - Fire Emergency Lighting 2, HMO - Fire Mandatory conds, HMO - Fire Notices 1, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural Fire Works, loft insulation, management/repairs, structural fire works



#### Licence No.

#### 2014/03735/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 45 Brunswick Place Hove BN3 1ND

Ward

Brunswick And Adelaide

Name & Address of Licence H	older		
Mr Edward Jensen, Colwood Hill Co	olwood Lane Warninglid F	RH17 5UQ	
Name & Address of Person Ma	5 5		
Parsons Son & Basley, 32 Queens I	Road Brighton BN1 3YE		
Duananti Daganintian			
Property Description  Short description of licensed HM0	O (No of storous ats)		
•		anay = 44. No of Charaya = C	
Property Type = SHARED HOUSE,	no of Units = 11, Occupa	aricy = 11, No or Storeys = 6	
Number of Rooms	Total Number of Roor	ns 11	
a) Sleeping	b) Living Ro	ooms	
Number of Self Contained Flats:	0	Number of Non Self Cont. Flats	s: 0
	mber Description	1	
a) Kitchen b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	24/04/2015	Duration of licence:	30/07/2019
Commencement date.	24/04/2010	Duration of nechec.	00/01/2010
Maximum number of persons or h	nouseholds permitted to	occupy HMO under conditions of	of licence:
Households 11 Pers	sons 11		
Information referred to a resid	ential property tribun	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Additional Facilities, Additional facilities, Electrical Works, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO -Tenant Agrmnt Mandatory conds, Management /Repairs, Other fire works, Structural fire works



#### Licence No.

#### 2014/03892/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

28 Castle Street Brighton BN1 2HD

Ward

Regency

Summary of conditions of lic	ence	
Decision of Tribunal	Reference number	
None		
Information referred to a re	esidential property tribunal or Lands Tribunal:	
Households 6	Persons 6	
-		ncence.
Maximum number of persons	or households permitted to occupy HMO under conditions of	licence:
Commencement date:	19/12/2014 Duration of licence:	05/08/2019
Licence Details		
_		
c) W.C.s		
b) Bathrooms/Showers		
Shared Amenities a) Kitchen	Number Description	
Number of Self Contained Fla	nts: 0 Number of Non Self Cont. Flats:	0
a) Sleeping	b) Living Rooms	
Number of Rooms	Total Number of Rooms 7	
Property Type = SHARED HOU	JSE, No of Units = 1, Occupancy = 6, No of Storeys = 4	
Short description of licensed	HMO (No of storeys, etc)	
Property Description		
,		
Name & Address of Perso	n Managing	
wii otophen baii, 44 Nempshott	TOOG HOLOHAM MITZ ZET	
Mr Stephen Ball, 44 Kempshott		
Name & Address of Licence	e Holder	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2014/03958/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 22D St Johns Road Hove BN3 2FB

Ward

Brunswick And Adelaide

Name & Address of Licence Holder
Ms Charlotte Lubert, Suite 8 14 London Road Guildford GU1 2AG
Name & Address of Person Managing
Shineglow Ltd, 365 South Coast Road Telscombe Cliffs BN10 7HA
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3
Number of Basins Total Number of Basins C
Number of Rooms Total Number of Rooms 6
a) Sleeping b) Living Rooms
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
Shaved Amenities Number Description
Shared Amenities Number Description  a) Kitchen
b) Bathrooms/Showers
c) W.C.s
Licence Details
Commencement date: 21/10/2014 Duration of licence: 17/08/2019
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Households 5 Persons 5
Information referred to a residential property tribunal or Lands Tribunal:
morniation for the a footabilitial proporty tribulial of Earlie Fribalian
None

Fire alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2014/03960/HMO/PS

#### **REGISTER ENTRY FOR** (Address of licensed HMO)

90 Southover Street Brighton BN2 9UD

Ward

Hanover And Elm Grove

Name & Address of Licence Ho	older	
Mr Peter Sharp, 73 Upper North Stre	et Brighton BN1 3FL	
Name & Address of Person Ma	naging	
,		
D ( D ) (		
Property Description	(No of changes and	
Short description of licensed HMO	,	
Property Type = SHARED HOUSE, N	No of Units = 1, Occupancy = 6, No of Storeys = 4	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats	: 0
Shared Amenities Num	nber Description	
a) Kitchen		
b) Bathrooms/Showers c) W.C.s		
C) VV.O.3		
Licence Details		
_		
Commencement date:	02/07/2015 Duration of licence:	18/08/2019
	02/07/2015 Duration of licence:	
Maximum number of persons or ho	ouseholds permitted to occupy HMO under conditions o	
	ouseholds permitted to occupy HMO under conditions o	
Maximum number of persons or ho	ouseholds permitted to occupy HMO under conditions o	
Maximum number of persons or ho	ouseholds permitted to occupy HMO under conditions o	
Maximum number of persons or he Households 6 Persons Information referred to a reside	ouseholds permitted to occupy HMO under conditions o	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2014/03987/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

4 Warleigh Road Brighton BN1 4NT

Ward

St. Peter's And North Laine

Name & Address of Licence Holder		
Mr John Lewis, 277 Dyke Road Hove BN3 6PB		
Name & Address of Person Managing		
,		
Property Description		
Short description of licensed HMO (No of storeys, etc)		
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Si	toreys = 3	
	•	
Number of Rooms Total Number of Rooms 6	1	
a) Sleeping b) Living Rooms		
	,	
Number of Self Contained Flats: 0 Number of N	Ion Self Cont. Flats:	0
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s		
Licence Details		
Commencement date: 19/12/2014 Duration of	of licence:	27/07/2019
Maximum number of persons or households permitted to occupy HMO	under conditions of li	cence:
Households 5 Persons 5		
Information referred to a residential property tribunal or Lands T	ribunal:	
None		
Decision of Tribunal Refe	erence number	

#### Summary of conditions of licence

Fire alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2014/03989/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 25 Coldean Lane Brighton BN1 9GD

Ward

Hollingdean And Stanmer

Name & Address of Licence	e Holder		
Ms Kate Bravery, 19B Block 16	Park Island Ma Wan Ho	ong Kong	
Name & Address of Perso	n Managing		
Kendrick Property Services Ltd	, 10 - 12 Lewes Road B	righton BN2 3HP	
Property Description			
Short description of licensed	HMO (No of storeys, e	etc)	
Property Type = SHARED HOU	JSE, No of Units = 6, Oc	ccupancy = 6, No of Storeys = 3	
	· ·		
Number of Rooms	Total Number of	Rooms 6	
a) Sleeping	b) Liv	ing Rooms	
Number of Self Contained Fla	nts: 0	Number of Non Self Cont. Flat	s: 0
Shared Amenities	Number Descr	ription	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	23/12/2014	Duration of licence:	18/08/2019
Commencement date.	20/12/2014	Burdion of heches.	10/00/2013
Maximum number of persons	or households permit	tted to occupy HMO under conditions	of licence:
Households 6	Persons 6	]	
110u3GIIOIU3	0	J	
Information referred to a re	esidential prop <u>erty t</u>	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic	onco		
Summary of Conditions Of IIC	51166		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2014/04073/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

67 Elm Grove Brighton BN2 3ET

Ward

Hanover And Elm Grove

Name & Address of Licence	Holder		
Mrs Doreen Hills, 8 Whylands Cre	escent Worthing BN13 3HQ		
Name & Address of Person I	Managing		
,			
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 7, Occupand	cy = 7, No of Storeys = 3	
Number of Rooms	Total Number of Room	s 9	
a) Sleeping	b) Living Roo	JIIIS	
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flats	.: 0
Shared Amenities N	Number Description		
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
_		[	
Commencement date:	28/11/2014	Duration of licence:	15/06/2019
Maximum number of persons o	r households permitted to	occupy HMO under conditions o	f licence:
Households 7 Po	ersons 7		
Information referred to a res	idential property tribuna	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Additional Facilities, Additional facilities, Additional facilities, Gas certificates, General, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - General 1, HMO - General 6, HMO - General Electrical 1, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works, Ventilation



#### Licence No.

#### 2014/04132/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

106 Milner Road Brighton BN2 4BQ

Ward

Moulsecoomb And Bevendean

Name & Address of Licen	ce Holder		
Mrs Rebecca Field, 6 High Str	eet Lindfield RH16 2HH		
Name & Address of Perso	on Managing		
Arington Ltd, 15 Station Road	Burgess Hill RH15 9DE		
Property Description			
Short description of licensed	d HMO (No of storeys, etc)		
Property Type = SHARED HO	USE, No of Units = 1, Occupa	ancy = 5, No of Storeys = 3	
		_	
Number of Rooms	Total Number of Roo	oms 6	
a) Sleeping 5	b) Living F	Rooms 1	
		¬	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Fla	ats: 0
Shared Amenities	Number Description	nn	
a) Kitchen	1	•••	
b) Bathrooms/Showers	1		
c) W.C.s	2		
Licence Details			
Commencement date:	09/12/2014	Duration of licence:	02/09/2019
Commencement date:	09/12/2014	Duration of licence:	02/09/2019
Maximum number of person	s or households permitted	to occupy HMO under conditions	s of licence:
Households 5	Persons 5		
110dseriolds 5	reisons 5		
Information referred to a	residential property tribu	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie	cence	To March 1990 Fire	

Additional Facilities, Electrical Works, Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Other Fire works, Structural fire works



#### Licence No.

#### 2014/04141/HMO/PS

#### **REGISTER ENTRY FOR** (Address of licensed HMO)

194 Elm Grove Brighton BN2 3DA

Ward

Hanover And Elm Grove

Name & Address of Licence	e Holder	
Mr Reinhardt Dirk Slabbert, Haze	el Cottage Warren Road Woodingdean Brighton BN2 6DA	
Name & Address of Person	Managing	
,		
Property Description		
Short description of licensed h		
Property Type = SHARED HOUS	SE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping	b) Living Rooms	
-,	3, 3	
Number of Self Contained Flat	s: 0 Number of Non Self Cont. Flats:	0
		Ū
Shared Amenities	Number Description	
a) Kitchen	- Josephan	
a) Kitchen		
a) Kitchen b) Bathrooms/Showers c) W.C.s		
a) Kitchen b) Bathrooms/Showers		
a) Kitchen b) Bathrooms/Showers c) W.C.s	19/12/2014 Duration of licence:	04/08/2019
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:	19/12/2014 Duration of licence:	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons of	19/12/2014 Duration of licence: or households permitted to occupy HMO under conditions of	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons of	19/12/2014 Duration of licence:	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons of the state of t	19/12/2014 Duration of licence:  or households permitted to occupy HMO under conditions of Persons 5	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons of the state of t	19/12/2014 Duration of licence: or households permitted to occupy HMO under conditions of	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons of the second of the se	19/12/2014 Duration of licence:  or households permitted to occupy HMO under conditions of Persons 5	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2014/04144/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

10 Picton Street Brighton BN2 3AP

Ward

Hanover And Elm Grove

Name & Address of Licence			
Mr Nigel Parsons, Court Farm We	est Chiltington Lane Billing	gshurst RH14 9DL	
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Occup	ancy = 5, No of Storeys = 3	
Number of Deems	Total Number of Do		
Number of Rooms	Total Number of Ro		
a) Sleeping	b) Living	Rooms	
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities 1	Number Descripti	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Licence Details			
Commencement date:	07/04/2015	Duration of licence:	21/08/2019
Maximum number of persons of	r households permitted	to occupy HMO under conditions	of licence:
Households 5 P	ersons 5		
Information referred to a res	sidential property tribu	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Not Assigned



#### Licence No.

#### 2014/04172/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

24 Brading Road Brighton BN2 3PD

Ward

Hanover And Elm Grove

Name & Address of Licence	Holder		_
Mrs Annette Hawes, 22 Hove Pa			
Name & Address of Person	Managing		
Dan Lyons, Brighton Accommod	ation Agency 79 Sutton Dro	ove Seaford BN25 3NN	
Property Description			
Short description of licensed H	IMO (No of storeys, etc)		
Property Type = SHARED HOUS	SE, No of Units = 1, Occupa	ancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of Roo	oms 7	
a) Sleeping	b) Living F		
u) 5.55pg	S) Living i		
Number of Self Contained Flat	s: 0	Number of Non Self Cont. Fla	ts: 0
	<i>.</i>		····
Shared Amenities	Number Description	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Ziooneo Dotano			
Commencement date:	16/06/2015	<b>Duration of licence:</b>	01/09/2019
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
maximum number of persons of nouseholds permitted to occupy nine under conditions of needee.			
Households 7 F	Persons 7		
Information referred to a res	sidential property tribu	nal or Lands Tribunal:	
None	sidential property tribu	mar or Lands Tribunial.	
Decision of Tribunal		Reference number	
0			

Summary of conditions of licence

Additional Facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works, Ventilation



#### Licence No.

#### 2014/04187/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

13 Wilbury Avenue Hove BN3 6HR

Ward

Goldsmid

Name & Address of Licence Holder	
Mr Martin Stallard, Waterside House Hove Enterprise C	Centre Basin Road North Portslade BN41 1UY
Name & Address of Person Managing	
Property Description	
Short description of licensed HMO (No of storeys, e	etc)
Property Type = SHARED HOUSE, No of Units = 1, Oc	•
, , , , , , , , , , , , , , , , , , , ,	
Number of Rooms Total Number of	f Rooms 8
a) Sleeping b) Liv	ring Rooms
Number of Self Contained Flats: 0	Number of Non Self Cont. Flats: 0
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s	ription
Licence Details	
Commencement date: 07/05/2015	Duration of licence: 28/04/2018
Maximum number of persons or households permit	tted to occupy HMO under conditions of licence:
Households 8 Persons 10	
Information referred to a residential property t	ribunal or Lands Tribunal:
None	
Decision of Tribunal	Reference number
Summary of conditions of licence Redsit 1 cooker Redsit 2 sockets Redsit 3 cooker heig	wht Redeit 3 sockets Redeit 3 workton Redeit 4

Bedsit 1 cooker, Bedsit 2 sockets, Bedsit 3 cooker height, Bedsit 3 sockets, Bedsit 3 worktop, Bedsit 4 cooker height, Bedsit 4 sockets, Bedsit 5 cooker, Bedsit 5 sockets, Bedsit 5 worktop, Bedsit 7 worktop, Bedsit 8 cooker on unit, Bedsit 8 sockets, Bedsit 8 worktops, Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - General 1, HMO - General 2, HMO - General 6, HMO - General Electrical 1, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Heating Rooms, Heating bathrooms, Other fire works, Room 9 Sockets, Room 9 worktop, Structural Fire Works, Timescales





#### Licence No.

#### 2014/04201/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

125 Islingword Road Brighton BN2 9SG

Ward

Hanover And Elm Grove

Name & Address of Licence Holder				
Mr Patrick George Williams, 68 Foley Road Claygate Surrey KT10 0ND				
Name & Address of Person Managing				
Mr Eric Wilkinson, T/a Wilkinson Property Services 24 Elm Grove Brighton BN2 3DD				
Property Description				
Short description of licensed HMO (No of storeys, etc)				
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3				
Number of Rooms 7				
a) Sleeping b) Living Rooms				
Number of Self Contained Flats: 0 Number of Non Self Cont. Fla	ts: 0			
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s				
Licence Details				
Commencement date: 04/02/2015 Duration of licence:	05/09/2019			
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
Households 6 Persons 6				
Information referred to a residential property tribunal or Lands Tribunal:				
None				
Decision of Tribunal Reference number				

Summary of conditions of licence

Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Loft Insulation , Management/Repairs, Ventilation



#### Licence No.

#### 2014/04466/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

9 Adams Close Brighton BN1 7HU

Ward

Hollingdean And Stanmer

Nama O Addusas of License Holden
Name & Address of Licence Holder
Ms Laura Dwyer-Smith, 26 Hove Park Way Hove BN3 6PT
Name 9 Address of Davis Managing
Name & Address of Person Managing
Mr Dan Lyons, 21 Bramber Road Seaford BN25 1AG
Property Description
Property Description Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3
Number of Rooms Total Number of Rooms 7
a) Sleeping b) Living Rooms
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
Shared Amenities Number Description
Shared Amenities Number Description a) Kitchen
a) Kitchen
a) Kitchen b) Bathrooms/Showers c) W.C.s
a) Kitchen b) Bathrooms/Showers
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details
a) Kitchen b) Bathrooms/Showers c) W.C.s
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 07/01/2015 Duration of licence: 02/09/2019  Maximum number of persons or households permitted to occupy HMO under conditions of licence:
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 07/01/2015 Duration of licence: 02/09/2019
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 07/01/2015 Duration of licence: 02/09/2019  Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households 6 Persons 6
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 07/01/2015 Duration of licence: 02/09/2019  Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households 6 Persons 6  Information referred to a residential property tribunal or Lands Tribunal:
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 07/01/2015 Duration of licence: 02/09/2019  Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households 6 Persons 6

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2014/04469/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

18 Wakefield Road Brighton BN2 3FP

Ward

St. Peter's And North Laine

Name & Address of Licence Holder				
Mr Patrick George Williams, 68 Foley Road Claygate Surrey KT10 0ND				
Name & Address of Person Managing				
John Hilton Estate Agents, 127 Lewes Road Brighton BN2 3LG				
Property Description				
Short description of licensed HMO (No of storeys, etc)				
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 4				
Number of Rooms Total Number of Rooms 6				
a) Sleeping b) Living Rooms				
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats:	0			
Shared Amenities Number Description				
a) Kitalaan				
a) Kitchen				
b) Bathrooms/Showers				
b) Bathrooms/Showers				
b) Bathrooms/Showers c) W.C.s				
b) Bathrooms/Showers c) W.C.s  Licence Details	5/2019			
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 24/12/2014 Duration of licence: 31/08	7/2019			
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 24/12/2014 Duration of licence: 31/08  Maximum number of persons or households permitted to occupy HMO under conditions of licence:	5/2019			
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 24/12/2014 Duration of licence: 31/08	5/2019			
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 24/12/2014 Duration of licence: 31/08  Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households 6 Persons 6	3/2019			
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 24/12/2014 Duration of licence: 31/08  Maximum number of persons or households permitted to occupy HMO under conditions of licence:	7/2019			
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 24/12/2014 Duration of licence: 31/08  Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households 6 Persons 6  Information referred to a residential property tribunal or Lands Tribunal:	3/2019			

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2014/04472/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

32 Stanmer Villas Brighton BN1 7HP

Ward

Hollingdean And Stanmer

Name & Address of Lice	nce Holder	
Mr Steve Foley, 35 Brangwy	n Drive Brighton BN1 8XB	
Name & Address of Pers		
John Hilton Estate Agents, 13	27 Lewes Road Brighton BN2 3LG	
Property Description		
Property Description  Short description of license	ed HMO (No of storeys, etc)	
•	,	
Property Type = SHARED IN	OUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 5	b) Living Rooms 2	
Number of Self Contained	Flats: 0 Number of Non Self Cont. Flat	s: 0
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Commencement date:	07/01/2015 <b>Duration of licence:</b>	09/09/2019
Maximum number of perso	ns or households permitted to occupy HMO under conditions	of licence:
Households 5	Persons 5	
Information referred to a	residential property tribunal or Lands Tribunal:	
None	. ,	
Decision of Tribunal	Reference number	
Summary of conditions of	licence	
	s, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds	, HMO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works, Ventilation



#### Licence No.

#### 2014/04667/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

17A Preston Road Brighton BN1 4QE

Ward

**Preston Park** 

Name & Address of Licence	e Holder			
Mr Kamber Koluman, 35 Ditchling Crescent Brighton BN1 8GD				
Name & Address of Persor	n Managing			
,				
Property Description				
Short description of licensed	HMO (No of storeys, etc)			
Property Type = SHARED HOU	SE, No of Units = 5, Occupancy = 5, No of Storeys = 3			
Number of Rooms	Total Number of Rooms			
a) Sleeping	b) Living Rooms			
N 1 1 - 1 - 1 - 1 - 1 - 1 -				
Number of Self Contained Fla	ts: 0 Number of Non Self Con	t. Flats: 0		
Shared Amenities	Number Description			
a) Kitchen				
b) Bathrooms/Showers				
c) W.C.s				
Licence Details				
Commencement date:	20/03/2017 Duration of licence:	21/09/2019		
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
Households 5	Persons 5			
Information referred to a re	esidential property tribunal or Lands Tribunal:			
Information referred to a re	esidential property tribunal or Lands Tribunal:			
	esidential property tribunal or Lands Tribunal:  Reference numb	per		

Enlargement of Kitchens, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Heating 5, HMO - Repairs Ventilation 2, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural Fire Works



#### Licence No.

#### 2014/04668/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

15 Sackville Road Hove BN3 3WA

Ward

Central Hove

Name & Address of Licence I	Holder		
Mrs & Mr Linda & Steve Harmer-S	trange, T/a Grosvenor Prope	erties Tudor Grange 13 The Uppe	r Drive Hove
מוע מינט			
Name & Address of Person N	lanaging		
,			
Property Description			
Short description of licensed HM	MO (No of storeys, etc)		
Property Type = SHARED HOUSE	., No of Units = 1, Occupanc	cy = 7, No of Storeys = 3	
Number of Rooms	Total Number of Rooms	s 9	
a) Sleeping	b) Living Roo	oms	
Number of Self Contained Flats:	0	Number of Non Self Cont. Flat	s: 0
Shared Amenities N	umber Description		
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Licence Details			
Commencement date:	12/05/2015	Duration of licence:	12/03/2020
Maximum number of persons or	households permitted to	occupy HMO under conditions	of licence:
Households 7 Pe	rsons 7		
Information referred to a resi	dential property tribuna	l or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licent	÷0		
Additional Facilities, Fire Alarms, F	HMO - Elec Mandatory conds		
2, HMO - Fire Mandatory conds, H	MO - Furniture Mandatory c	onds, HMO - Gas Mandatory con	ds, HMO -

Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Works, Structural Fire Works, Structural fire works



#### Licence No.

#### 2014/04671/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 26 Clifton Hill Brighton BN1 3HQ

Ward

Regency

			,
Name & Address of Licence	e Holder		
Mr Ian Bunday, 15-17 Middle St	treet Brighton BN1 1AL		
Name & Address of Persor	n Managing		
Mr Dan Lyons, 74 Lewes Road			
u j u, u			
Property Description			
Short description of licensed	HMO (No of storous, etc)		
-	-		
Property Type = SHARED HOU	JSE, No of Units = 1, Occup	ancy = 6, No of Storeys = 4	
Number of Rooms	Total Number of Ro	oms 7	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Fla	its: 0	Number of Non Self Cont. Flats	: 0
Shared Amenities	Number Descripti	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
		_	
Commencement date:	26/02/2016	Duration of licence:	11/09/2019
Maximum number of persons	or households permitted	to occupy HMO under conditions of	licence:
Households 6	Persons 6		
Information referred to a re	esidential property <u>trib</u>	unal or Lands Tr <u>ibunal:</u>	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice	onco		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2014/04674/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 67 Prince's Road Brighton BN2 3RH

Ward

St. Peter's And North Laine

Name & Address of Licence Holder	
Ms Tracey Goreing, Tumbledowns Copse Lane Church Crookham Fleet GU52 6RY	
Name & Address of Person Managing	
,	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms Total Number of Rooms 4	
a) Sleeping b) Living Rooms	
	_
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	s: 0
Shared Amenities Number Description	
a) Kitchen b) Bathrooms/Showers	
c) W.C.s	
Licence Details	
Commencement date: 05/03/2015 Duration of licence:	30/09/2019
Maximum number of persons or households permitted to occupy HMO under conditions o	of licence:
Households 5 Persons 5	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of licence	
SUMMARY OF CONDUIOUS OF HERDER	

Additional facilities, Additional facilities, Electrical reports, Gas Certificates, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - General 1, HMO - General 6, HMO - General 7, HMO - General Electrical 1, HMO - General Electrical 2, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Works, Structural Fire Works, Structural fire works



#### Licence No.

#### 2014/04702/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

4 Marlow Road Brighton BN2 5NB

Ward

**East Brighton** 

Name & Address of Licen	ce Holder		
Mr Nurun Begum, 4 Marlow Ro	oad Brighton BN2 5NB		
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	I HMO (No of storeys, etc)		
Property Type = SHARED HO	USE, No of Units = 1, Occup	pancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Ro	ooms 6	
a) Sleeping	b) Living	Rooms	
Number of Self Contained FI	ats: 0	Number of Non Self Cont. Flat	ts: 0
<b>2</b> 1 1 2 111			
Shared Amenities	Number Descripti	ion	
a) Kitchen     b) Bathrooms/Showers			
c) W.C.s			
0) ***.0.0			
Licence Details			
Commencement date:	16/01/2015	Duration of licence:	29/09/2019
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
Maximum number of person	s or households permitted	to occupy HMO under conditions	of licence:
-	_	to occupy HMO under conditions	of licence:
Maximum number of person  Households 6	s or households permitted Persons 6	to occupy HMO under conditions	of licence:
Households 6	Persons 6		of licence:
Households 6	Persons 6		of licence:
-	Persons 6		of licence:

Summary of conditions of licence

Additional facilities, Fire alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works, Ventilation



#### Licence No.

#### 2014/04742/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

122 Coombe Road Brighton BN2 4EE

Ward

Moulsecoomb And Bevendean

Name & Address of Licence Hold	er		
Mr David Bull, 16 Windmill Avenue Epse			
Name & Address of Person Mana	ging		
Mr Dan Lyons, 21 Bramber Road Seafo	ord BN25 1AG		
Property Description	lo of otomore oto)		
Short description of licensed HMO (N	-	0 N	
Property Type = SHARED HOUSE, No	of Units = 1, Occupan	cy = 6, No of Storeys = 3	
Number of Rooms To	otal Number of Roon	ns 7	
a) Sleeping	b) Living Ro	oms	
Number of Self Contained Flats:	0	Number of Non Self Cont. Flats:	0
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s	er Description		
Licence Details			
Commencement date:	10/07/2015	Duration of licence:	06/10/2019
Maximum number of persons or house	seholds permitted to	occupy HMO under conditions of	licence:
Households 6 Person	<b>s</b> 6		
Information referred to a resident	tial property tribun	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

#### Summary of conditions of licence

Fire Alarms, Fire alarm, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other fire precautions, Structural fire works



#### Licence No.

#### 2014/04743/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

11 St Pauls Street Brighton BN2 3HR

Ward

St. Peter's And North Laine

Name & Address of Licence Holder	
Mr Mark Haskett, 29 Quarry Bank Tonbridge TN9 2QZ	
Name & Address of Person Managing	
Mr Dan Lyons, 21 Bramber Road Seaford BN25 1AG	
Duran auto Danauliutian	
Property Description  Short description of licensed HMO (No of starous, etc.)	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 4	
Number of Rooms 7	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont.	. Flats: 0
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s	
Licence Details	
Commencement date: 26/02/2016 Duration of licence:	05/10/2019
Maximum number of persons or households permitted to occupy HMO under conditi	ions of licence:
Households 6 Persons 6	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	er
O	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works, fIRE ALARMS



#### Licence No.

#### 2014/04750/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

189 Hollingdean Terrace Brighton BN1 7HF

Ward

Hollingdean And Stanmer

Name & Address of Licence H	older		
Mr William Mason, 14 Adur Drive Sh	noreham By Sea BN4	3 6PL	
Name & Address of Person Ma	anaging		
Mr Dan Lyons, 21 Bramber Road Se	eaford BN25 1AG		
Property Description		<b>.</b>	
Short description of licensed HM0		•	
Property Type = SHARED HOUSE,	No of Units = 1, Occu	ipancy = 6, No of Storeys = 3	
Number of Rooms a) Sleeping	Total Number of R	ooms 7 g Rooms	
, . <b>.</b>	,		
Number of Self Contained Flats:	0	Number of Non Self Cont. Fl	ats: 0
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s	mber Descrip	tion	
Licence Details			
Commencement date:	05/06/2015	Duration of licence:	06/10/2019
Maximum number of persons or h	nouseholds permitte	d to occupy HMO under condition	s of licence:
Households 6 Pers	sons 6		
Information referred to a resid	lential property trik	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2014/04765/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

1 Ditchling Road Brighton BN1 4SB

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
Mr Sanjeev Dhuna, 48 Woodla	and Drive Hove BN3 6DL		
Name & Address of Perso	n Managing		
S J Lettings Ltd, 52 Lewes Roa	ad Brighton BN2 3HW		
Buon antic Decembration			
Property Description	LUMO (No of atomore at	-\	
Short description of licensed			
Property Type = SHARED HO	USE, No of Units = 1, Occ	upancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of F	Rooms 7	
a) Sleeping 6	b) Livin	g Rooms 1	
, . <b>.</b>	·		
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Fi	ats: 0
Shared Amenities	Number Descrip	otion	
a) Kitchen	2		
o) Bathrooms/Showers	3		
c) W.C.s	3		
Licence Details			
Commencement date:	04/12/2015	<b>Duration of licence:</b>	02/09/2019
Maximum numbar of naroan	o or households normitte	ed to occupy HMO under condition	a of licenses
waxiiilalii ilaliibei oi person	s of flousefloids permitte	ed to occupy Himo drider condition	s of licerice.
Households 6	Persons 6		
nformation referred to a i	esidential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lid HMO - Elec Mandatory conds,		nds, HMO - Furniture Mandatory con	ds, HMO - Gas

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2014/04770/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 48 Goodwood Way Brighton BN2 4PW

Ward

Moulsecoomb And Bevendean

Name & Address of Licence Holder	
Mrs Sarah Davis, 47 Lynwood Grove Orpington Kent BR6 0BQ	
Name & Address of Person Managing	
,	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Troperty Type – SHANED HOUSE, No of Office – 1, Occupancy – 3, No of Storeys – 3	
Number of Rooms Total Number of Rooms 6	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flat	ts: 0
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s	
Licence Details	
Commencement date: 29/01/2015 Duration of licence:	12/09/2019
Commencement date: 29/01/2015 Duration of licence:  Maximum number of persons or households permitted to occupy HMO under conditions	
Maximum number of persons or households permitted to occupy HMO under conditions	
Maximum number of persons or households permitted to occupy HMO under conditions  Households 5 Persons 5	
Maximum number of persons or households permitted to occupy HMO under conditions  Households 5 Persons 5  Information referred to a residential property tribunal or Lands Tribunal:	

Summary of conditions of licence
Additional Facilities, Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO -Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO -Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs



#### Licence No.

#### 2014/04773/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

16 Edinburgh Road Brighton BN2 3HY

Ward

St. Peter's And North Laine

Name & Address of Licence Holder	
Mr John Standing, 6 Barrowfield Close Hove BN3 6TP	
Name & Address of Person Managing	
,	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 4	
Number of Rooms 7	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	: 0
	_
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers	
c) W.C.s	
Licence Details	
Commencement date: 08/01/2015 Duration of licence:	23/09/2019
Commencement date. 06/01/2015 Duration of ficence.	23/09/2019
Maximum number of persons or households permitted to occupy HMO under conditions o	f licence:
Households 6 Persons 6	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
O	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2014/04774/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 45 Rugby Place Brighton BN2 5JB

Ward

**East Brighton** 

Name & Address of Licence Holder
Mr Ion Tzilalis & Mr John Tzilalis-Walker, 15 Roedean Road Brighton BN2 5RA
Name & Address of Person Managing
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 5, Occupancy = 5, No of Storeys = 4
Number of Rooms Total Number of Rooms 6
a) Sleeping b) Living Rooms
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
Dhouad Association Number Beautistics
Shared Amenities Number Description  a) Kitchen
b) Bathrooms/Showers
b) W.C.s
Licence Details
20/40/2044 Burnetion of licenses 00/40/2040
Commencement date: 22/12/2014 Duration of licence: 06/10/2019
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Households 5 Persons 5
Telsons 5
nformation referred to a residential property tribunal or Lands Tribunal:
None
None Decision of Tribunal Reference number

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2014/04776/HMO/PS

#### **REGISTER ENTRY FOR** (Address of licensed HMO)

70 Whippingham Road Brighton BN2 3PG

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder		
Ms Melanie Gail Williams, 95 /	Applegarth Drive Newbur	y Park Ilford IG2 7TQ	
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, e	etc)	
Property Type = SHARED HO	USE, No of Units = 1, Oc	cupancy = 5, No of Storeys = 3	
		_	
Number of Rooms	Total Number of		
a) Sleeping 5	b) Livi	ing Rooms 1	
Number of Self Contained Fi	lats: 0	Number of Non Self Cont. Flats:	0
Shared Amenities	Number Descr	iption	
a) Kitchen	1		
b) Bathrooms/Showers c) W.C.s	1		
0) 11.0.0			
Licence Details			
Commencement date:	16/05/2016	Duration of licence:	15/09/2019
Maximum number of person	s or households permit	ted to occupy HMO under conditions of li	icence:
	_	1	
Households 5	Persons 5		
Information referred to a	residential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie HMO - Elec Mandatory conds,		onds, HMO - Fire Recessed Lighting, HMO -	-

Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO -Property Maint Mandatory conds, HMO - Repairs Ventilation 2, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/repairs



#### Licence No.

#### 2014/04857/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

24 Viaduct Road Brighton BN1 4NB

Ward

St. Peter's And North Laine

Name & Address of Licence	Holder		
Mr Alfred Haagman, Meadowbroo		t Cuckfield RH17 5JJ	
Name & Address of Person I	Managing		
Pavilion Properties Ltd, 39 Sackvi	lle Road Hove BN3 3	BWD	
Property Description			
Short description of licensed H	MO (No of storeys, e	etc)	
Property Type = SHARED HOUS	E, No of Units = 1, Oc	ccupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 5	
a) Sleeping		ing Rooms	
a) olcoping	b) Liv	ing Rooms	
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flat	:s: 0
Number of Self Contained Flats		Number of Non Sen Cont. Flat	.s. U
Shared Amenities N	lumber Desci	ription	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Licence Details			
Commencement date:	07/05/2015	Duration of licence:	22/09/2018
Maximum number of nercence	r households normit	tted to occupy HMO under conditions	of licenses
Maximum number of persons o	r nousenoius permi	tted to occupy HWO under conditions	of ficerice.
Households 5 Pe	ersons 5		
Information referred to a res	idential property t	ribunal or Lands Tribunal:	
None		Defending mounts or	
Decision of Tribunal		Reference number	
Summary of conditions of licen	00		

Additional Facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - General 1, HMO - General 2, HMO - General 6, HMO - General 7, HMO - General Electrical 1, HMO - General Electrical 2, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, structural fire works



#### Licence No.

#### 2014/04883/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

138 Balfour Road Brighton BN1 6NE

Ward

Preston Park

Name & Address of Licen	e Holder		
Mr & Mrs M Henley, Colwood N	lanor East Spronketts Lane Bolney RH17 5	SA	
Name & Address of Perso	n Managing		
G4 Lets, 2 Hythe Road Brighto	n BN1 6JS		
Property Description	LIMO (No. 5 days and A		
Short description of licensed			
Property Type = SHARED HOL	JSE, No of Units = 1, Occupancy = 6, No of	Storeys = 3	
Number of Rooms	Total Number of Rooms 8		
a) Sleeping 6	b) Living Rooms 1		
Number of Self Contained Fla	its: 0 Number of	Non Self Cont. Flats:	0
		_	
Shared Amenities	Number Description		
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	3		
Licence Details			
Commencement date:	16/01/2015 <b>Duration</b>	of licence:	12/10/2019
Commencement date.	10/01/2013	of ficerice.	12/10/2013
Maximum number of persons	or households permitted to occupy HMC	O under conditions of lic	cence:
Households 6	Persons 6		
Information referred to a r	esidential property tribunal or Lands	Tribunal:	
None			
Decision of Tribunal	Re	ference number	
Summary of conditions of lic HMO - Elec Mandatory conds.	ence HMO - Fire Mandatory conds, HMO - Furnitu	ure Mandatory conds. HM	O - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2014/04884/HMO/PS

#### **REGISTER ENTRY FOR** (Address of licensed HMO)

31 Hollingbury Road Brighton BN1 7JB

Ward

Hollingdean And Stanmer

Name & Address of Licence Holder
Ar Alan Hill, 13 Sherrington Road Brighton BN2 6QJ
The state of the s
Name & Address of Person Managing
/Is Barbara Hill, 13 Sherrington Road Brighton BN2 6QJ
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 5, Occupancy = 6, No of Storeys = 3
Number of Rooms Total Number of Rooms 6  b) Sleeping b) Living Rooms
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
Shared Amenities Number Description  Description  Description  Description
icence Details
Commencement date: 29/06/2015 Duration of licence: 15/10/2019
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Households 6 Persons 6
nformation referred to a residential property tribunal or Lands Tribunal:
lone
Decision of Tribunal Reference number
tummany of conditions of license

Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2014/04885/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) First Floor Flat 266 Ditchling Road Brighton BN1 6JF

Ward

Hollingdean And Stanmer

Name & Address of Licence Holder
Mr Syed M Shah, 218 Ditchling Road Brighton BN1 6JE
Name & Address of Person Managing
S J Lettings Ltd, 52 Lewes Road Brighton BN2 3HW
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3
Number of Rooms Total Number of Rooms 7
a) Sleeping b) Living Rooms
5,g
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
The state of the s
Shared Amenities Number Description
Shared Amenities Number Description  a) Kitchen
a) Kitchen b) Bathrooms/Showers
a) Kitchen
a) Kitchen b) Bathrooms/Showers c) W.C.s
a) Kitchen b) Bathrooms/Showers
a) Kitchen b) Bathrooms/Showers c) W.C.s
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 22/12/2014 Duration of licence: 08/10/2019
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 22/12/2014 Duration of licence: 08/10/2019
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 22/12/2014 Duration of licence: 08/10/2019  Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households 5 Persons 5
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 22/12/2014 Duration of licence: 08/10/2019  Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households 5 Persons 5
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 22/12/2014 Duration of licence: 08/10/2019  Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households 5 Persons 5

Additional Facilities, HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 3, HMO - Fire Blanket, HMO -Fire Mandatory conds, HMO - Fire Notices 1, HMO - Fire Recessed Lighting, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Kitchen 6, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other fire works, Structural Fire works



#### Licence No.

#### 2014/04931/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

70 Park Crescent Road Brighton BN2 3HS

Ward

St. Peter's And North Laine

N 0 A LL CL:	
Name & Address of Licence Holder	
Ms Sarah Smith, 33 Park Crescent Brighton BN2 3HB	
Name & Address of Person Managing	
G K White & Company Ltd, 165 Lewes Road Brighton BN2 3LD	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms Total Number of Rooms 6	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	s: 0
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers	
c) W.C.s	
Licence Details	
Commencement date: 03/11/2014 Duration of licence:	25/03/2018
Duration of notice.	20/00/2010
Maximum number of persons or households permitted to occupy HMO under conditions of	f licence:
Householde 5 Daysons 5	
Households 5 Persons 5	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Ourse and a sublition of linear	

Summary of conditions of licence

Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works, Ventilation



#### Licence No.

#### 2014/04952/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

24 Kingsbury Road Brighton BN1 4JR

Ward

St. Peter's And North Laine

Name & Address of Licence Holder	
Mr Alfred Haagman, 91 Holland Road Hove BN3 1JP	
Name & Address of Person Managing	
Pavilion Properties Ltd, 128-129 Lewes Road Brighton BN2 3LG	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 4	
Number of Rooms Total Number of Rooms 6	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats:	0
Shared Amenities  A) Kitchen  b) Bathrooms/Showers  c) W.C.s	
Licence Details	
Commencement date: 23/01/2015 Duration of licence:	20/07/2019
Maximum number of persons or households permitted to occupy HMO under conditions of	licence:
Households 6 Persons 6	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	

#### Summary of conditions of licence

Additioinal facilities, Additional facilities, Fire alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Management / repair, Structural fire works



#### Licence No.

#### 2014/04956/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

58 Barnett Road Brighton BN1 7GH

Ward

Hollingdean And Stanmer

Name & Address of Licence	Holder		
Mr Mark Leclercq, 37 The Downs	London SW20 8HG		
Nome 9 Address of Dayson	Managina		
Name & Address of Person	wanaging		
,			
Property Description			
Short description of licensed F	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Occupancy = 6, No of	Storeys = 3	
Number of Rooms	Total Number of Rooms 9		
a) Sleeping ###	b) Living Rooms		
	, <b>3</b>		
Number of Self Contained Flats	: 0 Number of	Non Self Cont. Flats:	1
	Number Description		
a) Kitchen b) Bathrooms/Showers	2 2		
c) W.C.s	2		
Licence Details			
Commencement date:	03/06/2015 <b>Duration</b>	of licence:	08/10/2019
commencement date.	00/00/2010 <b>Duration</b>	of ficcince.	00/10/2010
Maximum number of persons of	r households permitted to occupy HMC	under conditions of li	icence:
Households 6 P	ersons 6		
	idential property tribunal or Lands	Tribunal:	
None	D-	faranca mureker	
Decision of Tribunal	Re	ference number	
Summary of conditions of licer		uro Mandatory condo UN	40 Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2014/05105/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

115 Whippingham Road Brighton BN2 3PF

Ward

Hanover And Elm Grove

Nama O Adduses of Linguis	Ilaldau ————————————————————————————————————		
Name & Address of Licence		005	
Mr Mark Wickenden, 10 Waldegra	ave Road Brighton BN1 6	GE	
Nama <sup>9</sup> Address of Darson	Managing		
Name & Address of Person	wanaging		
,			
Property Description			
Short description of licensed H	MO (No of storays, etc)		
·			
Property Type = SHARED HOUS	E, NO OF UNITS = 6, Occup	bancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Ro	ooms 6	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities	Number Descript	ion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	21/04/2016	Duration of licence:	26/10/2019
Commoncomont dato.	21/01/2010	Daration of modifies.	20/10/2010
Maximum number of persons of	r households permitted	to occupy HMO under conditions	of licence:
Households 6 P	ersons 6		
Tiousenoius 0 1	6130113		
Information referred to a res	sidential property <u>trib</u>	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Not Assigned



#### Licence No.

#### 2014/05124/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

74 Bernard Road Brighton BN2 3EQ

Ward

Hanover And Elm Grove

Name & Address of Licence	Holder		
Mr John Healy, 15 Palmeira Mans		e BN3 2FA	
Name & Address of Person	Managing		
,			
Property Description	MO (No of standards	<b>.</b>	
Short description of licensed H	-		
Property Type = SHARED HOUS	E, No of Units = 1, Occu	upancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of R	ooms 7	
a) Sleeping	b) Living	g Rooms	
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flat	ts: 0
	Number Descrip	tion	
a) Kitchen			
b) Bathrooms/Showers c) W.C.s			
Licence Details			
Commencement date:	13/03/2015	Duration of licence:	27/10/2019
Commencement date.	13/03/2013	Duration of licence.	27/10/2019
Maximum number of persons o	r households permitte	d to occupy HMO under conditions	of licence:
Households 6 P	ersons 6		
Information referred to a res	idential property trib	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2014/05126/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

169 Hartington Road Brighton BN2 3PA

Ward

Hanover And Elm Grove

Name & Address of Licence	Holder		
Mr Barry Cocum, 4 Beacon Hill O	vingdean Brighton BN2	7BN	
Name & Address of Person I	Managing		
,			
Property Description			
Short description of licensed H	MO (No of storeys et	c)	
Property Type = SHARED HOUSI		•	
Troporty Type – STIARED HOOSI	L, 140 01 011113 - 1, 000	upancy – 3, No of Storeys – 3	
Number of Rooms	Total Number of F	Rooms 5	
a) Sleeping	b) Livin	g Rooms	
Number of Self Contained Flats	: 0	Number of Non Self Cont. Fla	nts: 1
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s	lumber Descrip	otion	
Licence Details			
Commencement date:	09/09/2015	Duration of licence:	21/05/2019
Maximum number of persons o	r households permitte	ed to occupy HMO under conditions	of licence:
Households 5 Pe	ersons 5		
Information referred to a res	idential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

**Summary of conditions of licence**Additional Facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2014/05149/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

31 Blaker Street Brighton BN2 0JJ

Ward

Queen's Park

Name & Address of Licence	Holder		
Mrs Tudor Verrall, 7 Wyndham R		Ρ1 3ΔΔ	
iviis radoi verraii, r vvyrianam re	oad Gallsbury Wiltstille G	1 1 0/1/1	
Name & Address of Person	Managing		
,	- 5 5		
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Occup	pancy = 5, No of Storeys = 4	
Number of Booms	Total Number of De	ama E	
Number of Rooms	Total Number of Ro		
a) Sleeping	b) Living	Rooms	
Number of Self Contained Flats	0	Number of Non Self Cont. Flat	ts: 0
Chaved Amenities	Normalian Dagawiyati		
Shared Amenities  a) Kitchen	Number Descripti	ion	
b) Bathrooms/Showers			
c) W.C.s			
C) W.O.3			
Licence Details			
Commencement date:	16/01/2015	Duration of licence:	23/10/2019
Maximum number of persons of	or households permitted	to occupy HMO under conditions	of licence:
Households 5 P	ersons 5		
nousenous o	e130115 0		
Information referred to a res	sidential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
		Notoronoc number	

Summary of conditions of licence

Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Strucrural fire works



#### Licence No.

#### 2014/05210/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

3 Wakefield Road Brighton BN2 3FP

Ward

St. Peter's And North Laine

Name & Address of Licence	e Holder		
Mr Anthony Culligan, 16 Eton R	oad London NW3 4SS		
Name & Address of Persor	n Managing		
Ms Zena Trow, 31 Upper St Jar	nes' Street Brighton BN2 1	JN	
Property Description			
Short description of licensed	HMO (No of storevs. etc)		
Property Type = SHARED HOU	-	pancy = 5. No of Storevs = 5	
Number of Rooms	Total Number of Ro	oms 6	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Flat	s: 0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Descripti	ion	
Licence Details			
Commencement date:	05/03/2015	Duration of licence:	04/11/2019
Maximum number of persons	or households permitted	to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Information referred to a re	sidential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

#### Summary of conditions of licence

Fire alarms, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Not Assigned, Other fire works, Structural Fire works, Structural fire works, Ventilation



#### Licence No.

#### 2014/05306/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

103 Sackville Road Hove BN3 3WF

Ward

Goldsmid

Name & Address of Licen	ce Holder		
Mr Ashley Bennett, 204 Churc	h Road Hove BN3 2DJ		
Name & Address of Perso	n Managing		
,			
D ( D ) (			
Property Description	d LIMO (No of storous	-4-1	
Short description of license		•	
Property Type = SHARED HO	USE, No of Units = 1, C	Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number	of Rooms 8	
a) Sleeping 6	b) L	iving Rooms 1	
	-,	<u> </u>	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ts: 0
	<u> </u>		
Shared Amenities	Number Des	cription	
a) Kitchen	2		
b) Bathrooms/Showers	6		
c) W.C.s	6		
Licence Details			
			_
Commencement date:	13/07/2015	Duration of licence:	09/11/2019
Maximum number of nercen	o or households norm	nitted to occupy HMO under conditions	of licenses
waxiinuiii number or person	s or nousenoids pern	inted to occupy Himo under conditions	of ficerice.
Households 6	Persons 6		
	residential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	ec Mandatory conds, H	MO - Fire Mandatory conds, HMO - Furnit conds. HMO - Property Maint Mandatory	

Additional Facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire works, Structural fire works



#### Licence No.

#### 2014/05371/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 35 Coleman Street Brighton BN2 9SQ

Ward

Hanover And Elm Grove

Name & Address of Licence I	Holder	
Ms Grace Culling, 35 Coleman Str	eet Brighton BN2 9SQ	
Name & Address of Person M	lanaging	
,		
Property Description		
Short description of licensed HM	• • •	
Property Type = SHARED HOUSE	No of Units = 4, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 4	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flat	ts: 0
Shared Amenities N	umber Description	
a) Kitchen		
b) Bathrooms/Showers		
c) W.C.s		
Licence Details		
Г		
Commencement date:	24/04/2015 Duration of licence:	11/11/2019
Maximum number of persons or	households permitted to occupy HMO under conditions	of licence:
Uassachalda E Ba		
Households 5 Pe	rsons 5	
	dential property tribunal or Lands Tribunal:	
Information referred to a resi		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2014/05394/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

6 Fairlight Place Brighton BN2 3AH

Ward

Hanover And Elm Grove

Name & Address of Licence Holder		
JMM Properties Ltd, Kingfisher House Hurstwood Grange Hurstwood Lane Hay	wards Heath RH17 7QX	
Name & Address of Person Managing		
Mr Dan Lyons, Brighton Accommodation Agency 21 Bramber Road Seaford BN	125 1AG	
Property Description		
Short description of licensed HMO (No of storeys, etc)		
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Store	eys = 3	
Number of Rooms Total Number of Rooms 7		
a) Sleeping b) Living Rooms		
2) 2.11.lig 1.00lilio		
Number of Self Contained Flats: 0 Number of Nor	n Self Cont. Flats: 0	
	· · · · · · · · · · · · · · · · · · ·	
Shared Amenities Number Description		
a) Kitchen		
b) Bathrooms/Showers		
c) W.C.s		
Licence Details		
Commencement date: 02/07/2015 Duration of I	icence: 11/11/2019	
Maximum number of persons or households permitted to occupy HMO un	der conditions of licence:	
Households 6 Persons 6		
Tiousenoius 0 reisons 0		
Information referred to a residential property tribunal or Lands Trib	ounal:	
None		
Decision of Tribunal Refere	nce number	
Summary of conditions of licence	Danie A IIMO Fire Danie	

Electrical Works, HMO - Elec Mandatory conds, HMO - Fire Doors 1, HMO - Fire Doors 3, HMO - Fire Doors 5, HMO - Fire Emergency Lighting 1, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Kitchen 1, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Works, Structural Fire Works, Structural Fireworks



#### Licence No.

#### 2014/05489/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

75 Park Crescent Road Brighton BN2 3HS

Ward

St. Peter's And North Laine

Nama X. Addrage of Licanca	Holder	
Name & Address of Licence		
IMITIAN LEWIS, THE THATCHED COTTA	age Jevington Road Wannock East Sussex BN26 5NX	
Name & Address of Person	Managing	
Name & Address of Person	Managing	
,		
Dranauty Decarintian		
Property Description	INO (No. 1 to to see at 1)	
Short description of licensed H		
Property Type = SHARED HOUS	SE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 5	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flats	S: 0 Number of Non Self Cont. Flats:	0
Shared Amenities I	Number Description	
	Trainbor Booonpaon	
a) Kitchen	Boompaon Boompaon	
a) Kitchen b) Bathrooms/Showers	Boompaon	
a) Kitchen		
a) Kitchen b) Bathrooms/Showers c) W.C.s		
a) Kitchen b) Bathrooms/Showers		
a) Kitchen b) Bathrooms/Showers c) W.C.s	02/03/2015 Duration of licence:	03/06/2019
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:	02/03/2015 Duration of licence:	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:		
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons of	02/03/2015 Duration of licence:	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons of	02/03/2015 Duration of licence: or households permitted to occupy HMO under conditions of	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons of the second se	02/03/2015 Duration of licence: or households permitted to occupy HMO under conditions of	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons of the second se	02/03/2015 Duration of licence: or households permitted to occupy HMO under conditions of Persons 5	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons of the second se	02/03/2015 Duration of licence: or households permitted to occupy HMO under conditions of Persons 5	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2014/05572/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

18 The Upper Drive Hove BN3 6GN

Ward

Goldsmid

Name & Address of Licence	Holder	
Mr V Shah, Flat 16 Richmond Cou		
Will V Shan, Flat to Nichillond Cod	TOSHIONU NOAU HOVE BIAS TID	
Name & Address of Person N	/anaging	
•		
Property Description		
Short description of licensed HM	/IO (No of storeys, etc)	
Property Type = SHARED HOUSE	E, No of Units = 13, Occupancy = 13, No of Storeys = 3	
Number of Rooms a) Sleeping	Total Number of Rooms 13 b) Living Rooms	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats	s: 0
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s	umber Description	
Licence Details		
Commencement date:	20/07/2015 Duration of licence:	04/05/2019
Maximum number of persons or	households permitted to occupy HMO under conditions of	of licence:
Households 13 Pe	rsons 13	
Information referred to a resi	dential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licent	ce	

Additional Facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural Fire Works



#### Licence No.

#### 2014/05583/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

54 St Georges Road Brighton BN2 1EF

Ward

**East Brighton** 

		Trai a	zaot Brigiltori
Name & Address of Licen	ce Holder		
Mr Sanjeev Dhuna, 48 Woodla	and Drive Hove BN3 6D	L	
Name & Address of Perso	on Managing		
S J Lettings Ltd, 52 Lewes Ro	ad Brighton BN2 3HW		
Property Description			
Short description of license	d HMO (No of storeys,	etc)	
		Occupancy = 6, No of Storeys = 4	
Troperty Type - STIAINED TIO		recupancy – 0, No or Storeys – 4	
Number of Rooms	Total Number of	of Rooms 7	
a) Sleeping 6	b) Li	iving Rooms 1	
	- /	3	
Normbar of Calf Cantainad F	lete:	Number of New Colf Con	4 Flata: 4
Number of Self Contained F	lats: 0	Number of Non Self Con	t. Flats: 1
Shared Amenities	_	cription	
a) Kitchen b) Bathrooms/Showers	4		
c) W.C.s	4		
0) 11.0.0	<u> </u>		
Licence Details			
Commencement date:	07/01/2015	Duration of licence:	05/12/2019
Maximum number of newser		sitted to consum LIMO under condi	tions of linears.
Maximum number of person	s or nousenoids perm	litted to occupy HMO under condi	tions of ficence:
Households 6	Persons 6		
Information referred to a	residential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference numb	per
Summary of conditions of li	cence		
		conds, HMO - Furniture Mandatory	conds, HMO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2014/05709/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

7 Upper Lewes Road Brighton BN2 3FJ

Ward

St. Peter's And North Laine

Name & Address of Licence I	Holder		
Mr Lee Trevatt, 262 Downham Wa	y Downham Bromley BR1 5	NS	
Name & Address of Person N	lanaging		
,			
Property Description			
Short description of licensed HM	MO (No of storeys, etc)		
Property Type = SHARED HOUSE	, No of Units = 5, Occupanc	cy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms	s 6	
a) Sleeping	b) Living Roc	oms	
Number of Self Contained Flats:	0	Number of Non Self Cont. Flats	: 0
Number of Sen Contained Flats:	U	Number of Non Self Cont. Flats	. 0
Shared Amenities No	umber Description		
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
	10/00/00 15	<b>5</b> [	00/44/0040
Commencement date:	19/06/2015	Duration of licence:	29/11/2019
Maximum number of persons or	households permitted to	occupy HMO under conditions o	f licence:
Households 5 Pe	rsons 5		
Information referred to a resi	dential property tribuna	l or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
O	_		

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2014/05749/HMO/PS

#### **REGISTER ENTRY FOR** (Address of licensed HMO)

10 Canfield Road Brighton BN2 4DN

Ward

Moulsecoomb And Bevendean

Name & Address of Licence Ho	older		
Mr Bruce Dickinson, 121 Western Ro	oad Hurstpierpoint Bl	N6 9SY	
Name & Address of Person Ma	ınaging		
Mr Dan Lyons, 21 Bramber Road Se	eaford BN25 1AG		
Property Description	N (N) 5 1	<b>,</b>	
Short description of licensed HMC		•	
Property Type = SHARED HOUSE,	No of Units = 1, Occu	ipancy = 5, No of Storeys = 3	
Number of Rooms a) Sleeping	Total Number of R	ooms 6 g Rooms	
Number of Self Contained Flats:	0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	mber Descrip	tion	
Licence Details			
Commencement date:	10/06/2015	Duration of licence:	12/11/2019
Maximum number of persons or h	ouseholds permitte	d to occupy HMO under conditions	of licence:
Households 5 Pers	sons 5		
Information referred to a reside	ential property tril	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

#### Summary of conditions of licence

Additional facilities, Additional Facilities, Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - General 1, HMO - General 2, HMO - General 3, HMO - General 4, HMO - General 6, HMO - General 7, HMO - General Asbestos, HMO - General Building Regs, HMO - General Planning, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Ventilation, structural fire works





#### Licence No.

#### 2014/05787/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

25 St Martins Place Brighton BN2 3LE

Ward

Hanover And Elm Grove

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2014/05788/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

41 Viaduct Road Brighton BN1 4ND

Ward

St. Peter's And North Laine

lame & Address of Lice	nce Holder		
avilion Properties Ltd, 128-1	29 Lewes Road Brighton BN2	2 3LG	
Name & Address of Pers	on Managing		
Property Description			
short description of license	ed HMO (No of storeys, etc)		
roperty Type = SHARED HC	OUSE, No of Units = 5, Occup	pancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Ro	ama 6	
a) Sleeping 5	b) Living	Rooms 1	
Number of Self Contained F	Flats: 0	Number of Non Self Cont. Flats:	0
Shared Amenities	Number Descripti	ion	
a) Kitchen b) Bathrooms/Showers	1		
s) W.C.s	2		
,			
icence Details			
Name	40/05/0040	Duration of linear	0.4/0.4/0.000
Commencement date:	16/05/2016	Duration of licence:	04/01/2020
Maximum number of persor	ns or households permitted	I to occupy HMO under conditions of I	icence:
Investigation 5	<b>D</b>		
louseholds 5	Persons 5		
nformation referred to a	residential property trib	unal or Lands Tribunal:	
lone			
Decision of Tribunal		Reference number	
Summary of conditions of li General, HMO - Elec Mandate		et, HMO - Fire Mandatory conds, HMO -	Furniture

General, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs



#### Licence No.

#### 2014/05800/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

92 Islingword Road Brighton BN2 9SJ

Ward

Hanover And Elm Grove

Name & Address of Licence Holder	
JMM Properties Ltd, Kingfisher House Hurtswood Grange Hurstwood Lane Haywards Heath R	H17 7QX
Name & Address of Person Managing	
Mr Dan Lyons, 21 Bramber Road Seaford BN25 1AG	
Property Description  Short description of licensed HMO (No of storage atc)	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 4	
Number of Rooms Total Number of Rooms 7	
a) Sleeping b) Living Rooms 1	
Number of Self Contained Flats: 0 Number of Non Self Cont. Fla	ats: 1
Shared Amenities Number Description	
a) Kitchen 2 b) Bathrooms/Showers 2	
c) W.C.s 2	
,	
Licence Details	
Commencement date: 08/07/2015 Duration of licence:	11/11/2019
Duration of incence.	11/11/2013
Maximum number of persons or households permitted to occupy HMO under conditions	of licence:
Households 6 Persons 6	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of licence  HMO - Flee Mandatory conds HMO - Fire Mandatory conds HMO - Furniture Mandatory cond	s HMO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Other Fire works



#### Licence No.

#### 2014/05804/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

20 Chesham Place Brighton BN2 1FB

Ward

East Brighton

			<del>_</del>
Name & Address of Lice	ence Holder		
Geneva Investment Group L	td, Geneva House 77a Rutla	nd Road Hove BN3 5FE	
Name & Address of Per	son Managing		
Property Description			
Short description of licens	sed HMO (No of storeys, etc	c)	
Property Type = SHARED H	OUSE, No of Units = 10, Oc	cupancy = 9, No of Storeys = 5	
Number of Rooms	Total Number of R		
a) Sleeping 10	b) Livin	g Rooms 10	
Number of Self Contained	Flats: 2	Number of Non Self Cont. Fla	ats: 8
Shared Amenities	Number Descrip	otion	
a) Kitchen	10		
) Bathrooms/Showers	7		
e) W.C.s	4		
icence Details			
licelice Details			
Commencement date:	09/07/2015	Duration of licence:	16/04/2019
Maximum number of person	ons or households permitte	ed to occupy HMO under conditions	s of licence:
Households 9	Persons 9		
nformation referred to a	a residential property tri	bunal or Lands Tribunal:	
lone			
Decision of Tribunal		Reference number	
	ls, HMO - Fire Mandatory coi	nds, HMO - Furniture Mandatory cond	

 $\label{lem:conds} \mbox{Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc}$ Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Heating, Management/Repairs, Management/ repairs, Other Fire Works, Structural Fire Works, Structural fire works, Ventilation



#### Licence No.

#### 2014/05855/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 44 Roedale Road Brighton BN1 7GB

Ward

Hollingdean And Stanmer

Name & Address of Licence Holder		
Mr James Ford, The Mill Mill Lane Maidstone Road Horsmo	nden Tonbridge Kent TN12 8DB	
Name & Address of Person Managing		
Mr Dan Lyons, T/A Brighton Accommodation Agency 21 Br	amber Road Seaford BN25 1AG	
Property Description		
Short description of licensed HMO (No of storeys, etc)		
Property Type = SHARED HOUSE, No of Units = 8, Occupa	ancy = 7, No of Storeys = 3	
Number of Rooms Total Number of Roo	oms 8	
a) Sleeping b) Living F		
a) Sieeping b) Living r	toons	
Number of Self Contained Flats: 0	Number of Non Self Cont. Flats:	0
Number of Self Contained Flats:	Number of Non Self Cont. Flats:	U
Shared Amenities Number Description	nn	
a) Kitchen	•••	
b) Bathrooms/Showers		
c) W.C.s		
Licence Details		
Commencement date: 05/12/2014	Duration of licence:	08/04/2018
Maximum number of persons or households permitted	to occupy HMO under conditions of	licence:
Households 7 Persons 7		
Information referred to a residential property tribu	nal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2014/05936/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

81 Lansdowne Place Hove BN3 1FL

Ward

Brunswick And Adelaide

Name & Address of Licence	Holder	
Mr Trevor Wickson, 20 Kingston		
WILLIAM THE VOIT WICKSON, 20 KINGSTON	Way Shorehalli BN45 01A	
Name & Address of Person	Managing	
,		
Property Description		
Short description of licensed F	IMO (No of storeys, etc)	
Property Type = SHARED HOUS	SE, No of Units = 8, Occupancy = 11, No of Storeys = 4	
Number of Decre-	Total Number of Dooms	
Number of Rooms	Total Number of Rooms 8	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flats	S: 0 Number of Non Self Cont. Flat	s: 0
Charad Ameritian	Number Description	
Shared Amenities	Number Description	
a) Kitchon		
a) Kitchen		
b) Bathrooms/Showers		
, —		
b) Bathrooms/Showers		
b) Bathrooms/Showers c) W.C.s  Licence Details		
b) Bathrooms/Showers c) W.C.s	21/04/2015 Duration of licence:	15/06/2019
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:		10.00.2010
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons of	21/04/2015 Duration of licence: or households permitted to occupy HMO under conditions	10.00.2010
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons of	21/04/2015 Duration of licence:	10.00.2010
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons of the second of the	21/04/2015 Duration of licence: or households permitted to occupy HMO under conditions Persons 11	10.00.2010
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons of the second of the	21/04/2015 Duration of licence: or households permitted to occupy HMO under conditions	10.00.2010
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons of the second of the	21/04/2015 Duration of licence: or households permitted to occupy HMO under conditions Persons 11	10.00.2010

#### Summary of conditions of licence

Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other fire works, Structural fire works, structural fire works



#### Licence No.

#### 2014/06102/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

141 Bevendean Crescent Brighton BN2 4RE

Ward

Moulsecoomb And Bevendean

Name & Address of Licence Holder	
Mr Terry Mole, Flat 2 28 Medina Villas Hove BN3 2RB	
Name & Address of Person Managing	
Dan Lyons, Brighton Accommodation Agency 74 Lewes Road Brighton BN2 3HZ	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms Total Number of Rooms 5	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0	
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers c) W.C.s	
Licence Details	
Commencement date: 21/03/2014 Duration of licence: 17/12/2019	
Maximum number of persons or households permitted to occupy HMO under conditions of licence:	
Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households 5 Persons 5	
Households 5 Persons 5	
Households 5 Persons 5 Information referred to a residential property tribunal or Lands Tribunal:	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Not Assigned



#### Licence No.

#### 2015/00290/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

21 Wakefield Road Brighton BN2 3FP

Ward

St. Peter's And North Laine

Name & Address of Licence	Holder		
Mr Mark Waters, 3A Rye Close S	altdean BN1 6PF		
Name & Address of Person	Managing		
Kendrick Property Services Ltd, (	Carlton House 28-29 C	Carlton Terrace Portslade BN41 1UR	
December 1997			
Property Description	MO (No of storous s	**************************************	
Short description of licensed H	-	·	
Property Type = SHARED HOUS	E, NO of Units = 1, Oc	ccupancy = 5, No or Storeys = 3	
Number of Rooms	Total Number of	Rooms 6	
a) Sleeping	b) Liv	ing Rooms	
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities I	Number Descr	ription	
a) Kitchen			
b) Bathrooms/Showers c) W.C.s			
C) W.C.S			
Licence Details			
	0.4/0.0/0.45	1	05/05/00/10
Commencement date:	24/08/2015	Duration of licence:	05/07/2019
Maximum number of persons of	r households permit	tted to occupy HMO under conditions	of licence:
Households 5 P	ersons 5	1	
Tiousenoius 5 1	6130113		
Information referred to a res	idential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 7, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Bathroom 17, HMO - Repairs Doors 5, HMO - Repairs Floors 8, HMO - Repairs Ventilation 2, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Other fire works



#### Licence No.

#### 2015/00322/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Lennep Hotel 57 Marine Parade Brighton BN2 1PN

Ward

Queen's Park

lame & Address of Lice	nce Holder		
Ir Jeremy Snell & Mrs Jessio	ca Bamford, Basemen	nt Flat 57 Marine Parade Brighton BN2 1PN	
lame & Address of Pers	on Managing		
oungs Brighton, 39 Upper S	t James Street Brighto	on BN2 1JN	
Property Description			
Short description of license	d HMO (No of store)	ys, etc)	
roperty Type = SHARED HO	OUSE, No of Units = 1	11, Occupancy = 11, No of Storeys = 6	
Number of Rooms	Total Numbe	er of Rooms 11	
) Sleeping 11		) Living Rooms	
) Sieeping	D,	) Living Rooms	
lumber of Solf Contained E	Elete:	2 Number of Non Self Cont. Flats:	. 11
lumber of Self Contained F	iats.	2 Number of Non Self Cont. Flats:	: 11
Shared Amenities	Number De	escription	
i) Kitchen	11		
) Bathrooms/Showers	3		
) W.C.s	4		
icence Details			
icence Details			
Commencement date:	27/01/2016	Duration of licence:	13/08/2019
naximum number of person	ns or nousenoids pe	ermitted to occupy HMO under conditions of	licence:
Households 11	Persons 11	1	
	residential proper	rty tribunal or Lands Tribunal:	
lone			
Decision of Tribunal		Reference number	
-	s, HMO - Fire Mandato	ory conds, HMO - Furniture Mandatory conds, h	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Heating 5, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Other Fire Works



#### Licence No.

#### 2015/00352/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

Hill View 147 Milner Road Brighton BN2 4BR

Ward

Moulsecoomb And Bevendean

Name & Address of Licence	Holder			
Mr Dave Bull, 16 Windmill Avenue	Epsom Surrey KT17	1LL		
Name & Address of Person N	Managing			
Dan Lyons, 21 Bramber Road Sea	aford BN25 1AG			
Property Description				
Short description of licensed HI		•		
Property Type = SHARED HOUSE	E, No of Units = 1, Occ	cupancy = 7, No of Storeys = 3		
Number of Rooms a) Sleeping	Total Number of b) Livin	Rooms 8 ng Rooms		
Number of Self Contained Flats:	. 0	Number of Non Self Cont. I	Flats: 0	
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s	umber Descri	ption		
Licence Details				
Commencement date:	17/08/2015	Duration of licence:	22/01/2020	
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
Households 7 Pe	ersons 7			
Information referred to a resi	idential property tr	ibunal or Lands Tribunal:		
None				
Decision of Tribunal		Reference number		
Summany of conditions of licens				

**Summary of conditions of licence**Additional Facilities, Elec mandatory conditions, Fire Alarms, Gas Mandatory Conditions, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO -Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Works



#### Licence No.

#### 2015/00402/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

3 Edinburgh Road Brighton BN2 3HY

Ward

St. Peter's And North Laine

Name & Address of Licence	Holder		
Mr Richard Baynes, 36 Fitzjohns I			
Name & Address of Person I	Managing		
,			
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Occup	ancy = 5, No of Storeys = 4	
Number of Rooms	Total Number of Ro	oms 7	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flat	s: 0
Shared Amenities N	lumber Descripti	on	
a) Kitchen	dilibei Descripti	on .	
b) Bathrooms/Showers			
c) W.C.s			
0) 11.0.0			
Licence Details			
0	40/00/0045	B. order of the con-	0.4/4.0/00.4.0
Commencement date:	13/02/2015	Duration of licence:	04/12/2018
Maximum number of persons o	r households permitted	to occupy HMO under conditions	of licence:
Haveahalda 5 B			
Households 5 Pe	ersons 5		
Information referred to a res	idential property tribu	ınal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2015/00515/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 25 New England Street Brighton BN1 4GQ

Ward

St. Peter's And North Laine

ame & Address of Licence Holder				
r Anthony Briggs, 26 Partridge Way High Wycombe Bucks HP13 5JX				
ame & Address of Person Managing				
lrs Wendy Woods C/o Callaways, 59 Church Road Hove BN3 2BD				
vanauty Danavintian				
roperty Description hort description of licensed HMO (No of storeys, etc)				
roperty Type = SHARED HOUSE, No of Units = 4, Occupancy = 5, No of Storeys = 4				
umber of Rooms Total Number of Rooms 4				
) Sleeping b) Living Rooms				
umber of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0				
hared Amenities Number Description Kitchen Bathrooms/Showers W.C.s				
icence Details				
ommencement date: 24/04/2015 Duration of licence: 29/01/2020				
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
ouseholds 5 Persons 5				
nformation referred to a residential property tribunal or Lands Tribunal:				
nformation referred to a residential property tribunal or Lands Tribunal:				

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2015/00571/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

4 Wellington Road Portslade BN41 1DN

Ward

South Portslade

Nama 8 Address of Licen	oo Holdor —			
Name & Address of Licen				
Mr Colin McKay, 38 Overbury	Crescent New Addi	ington Croyo	don Surrey CR0 0LL	
Name of Address of Barre	Managatan			
Name & Address of Perso	on Managing			
,				
Property Description				
Short description of license	d HMO (No of store	eys, etc)		
Property Type = BEDSIT, No	of Units = 5, Occupa	ancy = 5, No	o of Storeys = 3	
N	<b>T</b> . (.1 N)			
Number of Rooms	Total Numb	per of Roon	ns 5	
a) Sleeping 5	I	b) Living Ro	ooms	
Number of Self Contained F	lats:	0	Number of Non Self Cont. Flats	5
			_	
Shared Amenities	Number [	Description	l	
a) Kitchen	5			
b) Bathrooms/Showers	4			
c) W.C.s	2			
Linna Britaile				
Licence Details				
Commencement date:	08/07/2015	5	Duration of licence:	22/04/2020
	33/31/2313			
Maximum number of person	s or households p	ermitted to	occupy HMO under conditions o	f licence:
Households 5	Persons !	5		
nousenolus	reisons	5		
Information referred to a	residential prope	erty tribun	al or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of li Fire - Under Stairs 1, Fire EI	cence GI / Cupboards 1, F	HMO - Elec	Mandatory conds, HMO - Fire Alarm	n Systems 6,

Fire - Under Stairs 1, Fire EI / GI / Cupboards 1, HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 6, HMO - Fire Blanket, HMO - Fire Doors 1, HMO - Fire Doors 3, HMO - Fire Doors 5, HMO - Fire Doors 8, HMO - Fire Emergency Lighting 1, HMO - Fire Mandatory conds, HMO - Fire Notices 1, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural Fire Works



#### Licence No.

#### 2015/00709/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 47 Bonchurch Road Brighton BN2 3PJ

Ward

Hanover And Elm Grove

Name & Address of Licence Holder				
Mr & Mrs Alan & Ceri May, 56 Green Dragon L	Lane Winchmore Hill London N21 2LH			
Name & Address of Person Managing				
,				
Dranarty Daggrintion				
Property Description Short description of licensed HMO (No of s	etorove atc)			
Property Type = SHARED HOUSE, No of Unit	• • •			
Property Type – STIANED HOUSE, NO OF OHIL	is – 1, Occupancy – 3, No or Storeys – 3			
Number of Rooms Total Nu	umber of Rooms 7			
a) Sleeping	b) Living Rooms			
Number of Self Contained Flats:	0 Number of Non Self Cont. Fla	ts: 0		
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s	Description			
Licence Details				
Commencement date: 07/04/2	Duration of licence:	02/09/2018		
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
Maximum number of persons or household	ds permitted to occupy HMO under conditions	of licence:		
Maximum number of persons or household  Households 5 Persons	ds permitted to occupy HMO under conditions	of licence:		
	5	of licence:		
Households 5 Persons	5	of licence:		
Households 5 Persons Information referred to a residential pro	5	of licence:		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/00769/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

13 Vere Road Brighton BN1 4NQ

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
₋ady Paula Maclaurin, Rowley	Grange Farleigh Hunger	ford Bath BA2 7PS	
Name & Address of Perso	on Managing		
「anat-Jones & Company (Mar	nagement) Ltd, 1 Dukes P	assage Off Duke Street Brighton BN1	1BS
Property Description			
Short description of license	d HMO (No of storeys, e	tc)	
Property Type = SHARED HO	USE, No of Units = 1, Oc	cupancy = 5, No of Storeys = 4	
Number of Rooms	Total Number of	Rooms 5	
a) Sleeping 5	b) Livi	ng Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fl	lats: 0
Shared Amenities	Number Descri	iption	
a) Kitchen	1		
) Bathrooms/Showers	3		
c) W.C.s	3		
_icence Details			
licence Details			
Commencement date:	15/04/2015	Duration of licence:	17/09/2019
Maximum number of person	s or households permit	ted to occupy HMO under condition	s of licence:
Households 5	Persons 5		
nformation referred to a	residential property tr	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice Additional Facilities, Fire Alarm		y conds, HMO - Fire Mandatory conds	, HMO -

Additional Facilities, Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Other Fire Works, Structural Fire Works, Ventilation



#### Licence No.

#### 2015/00896/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

5 Norfolk Terrace Brighton BN1 3AD

Ward

Regency

		<u> </u>
Name & Address of Licen	ce Holder	
Mr Michael Blencowe, 10 Princ	ce Albert Street Brighton BN1 1HE	
Name & Address of Perso	n Managing	
,		
Property Description		
Short description of licensed	i HMO (No of storeys, etc)	
Property Type = SHARED HO	USE, No of Units = 12, Occupancy = 18, No of Storeys =	5
Number of Rooms	Total Number of Rooms 12	
a) Sleeping	b) Living Rooms	
Number of Self Contained Fl	ats: 4 Number of Non Self C	ont. Flats: 8
Shared Amenities	Number Description	
a) Kitchen		
b) Bathrooms/Showers		
c) W.C.s		
Licence Details		
Commencement date:	05/06/2015 Duration of licence:	18/02/2020
Commencement date.	03/00/2015 Duration of ficence.	16/02/2020
Maximum number of persons	s or households permitted to occupy HMO under con	iditions of licence:
	<b>D</b>	
Households 18	Persons 18	
Information referred to a r	residential property tribunal or Lands Tribunal:	
None	esidential property tribulial of Lands Tribulial.	
Decision of Tribunal	Reference nui	mhar
Decision of Hinning	Reference nui	IIIDGI
Summary of conditions of lic	ence	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/01050/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

46 Whippingham Road Brighton BN2 3PG

Ward

Hanover And Elm Grove

N 0.4 11 (1)				
Name & Address of Licence Holder				
Mr David & Mrs Susan Humphrey, Clock Cottage Main Road Itchen	Abbas Winchester Hants SO21 1BQ			
Name & Address of Person Managing				
G4 Lets, 2 Hythe Road Brighton BN1 6JS				
Property Description				
Short description of licensed HMO (No of storeys, etc)				
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 7	, No of Storeys = 3			
Number of Rooms Total Number of Rooms	8			
a) Sleeping b) Living Rooms				
Number of Self Contained Flats: 0 Num	mber of Non Self Cont. Flats: 0			
Shared Amenities Number Description				
a) Kitchen				
b) Bathrooms/Showers				
c) W.C.s				
Licence Details				
-				
Commencement date: 05/06/2015 D	Suration of licence: 23/11/2019			
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
	. •			
Households 7 Persons 7				
1.6	Landa William I			
Information referred to a residential property tribunal or I	Lands Tribunal:			
None				
Decision of Tribunal	Reference number			
Summary of conditions of license				

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2015/01089/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) Byron Court Hotel 12 Grafton Street Brighton BN2 1AQ

Ward

Queen's Park

me & Address of Licer	nce Holder		
Sarah Appleberg Mr Nevi		ish' Brighton Road Woodmancote BN5 9SS And	d Flat 1
uto Court 20/21 Adoloido C	roccont Hollo Dili 2 1	и:-	
me & Address of Perso	on Managing		
operty Description			
ort description of license	d HMO (No of store	ys, etc)	
operty Type = BEDSIT, No	of Units = 10, Occup	ancy = 10, No of Storeys = 5	
ımber of Rooms	Total Number	er of Rooms 19	
Sleeping ###	b	) Living Rooms	
umber of Self Contained F	lats:	0 Number of Non Self Cont. Flats:	10
nared Amenities	Number D	Description	
Kitchen	10		
Bathrooms/Showers	6		
W.C.s	4		
cence Details			
benice Betails			
ommencement date:	07/01/2016	Duration of licence:	27/05/2018
iximum number of persor	is or nousenoids pe	ermitted to occupy HMO under conditions of	ilcence:
ouseholds 10	Persons 10	0	
formation referred to a	residential prope	rty tribunal or Lands Tribunal:	
ne			
ecision of Tribunal		Reference number	
ımmary of conditions of li	cence		
e Alarms, HMO - Elec Man	datory conds, HMO -	Fire Doors 8, HMO - Fire Mandatory conds, HM	
rniture Mandatory conds, H	MO - Gas Mandatory	y conds, HMO - Property Chges Mandatory con	ds, HMO -

Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Heating, Management/Repairs, Ventilation



#### Licence No.

#### 2015/01091/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

27 Chatham Place Brighton BN1 3TN

Ward

St. Peter's And North Laine

Name & Address of Licence Holder				
Mr Neville Clipsham, Flat 1 White Court 20/21 Adelaide Crescent Hove BN3 2JG				
Name & Address of Licence Holder				
Ms Sarah Appleberg, 'Windrush' Brighton Road Woodmancote BN5 9SS				
Name & Address of Person Managing				
,				
Property Description				
Short description of licensed HMO (No of storeys, etc)				
Property Type = BEDSIT, No of Units = 9, Occupancy = 9, No of Storeys = 5				
Number of Rooms Total Number of Rooms 9				
a) Sleeping b) Living Rooms				
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	s: 0			
Number of Self Contained Flats:				
Shared Amenities Number Description				
a) Kitchen				
b) Bathrooms/Showers				
c) W.C.s				
License Deteile				
Licence Details				
Commencement date: 07/01/2016 Duration of licence:	10/06/2019			
Maximum number of persons or households permitted to occupy HMO under conditions of	of licence:			
Households 9 Persons 9				
Information referred to a residential property tribunal or Lands Tribunal:				
None				
Disciplarment HMO naflec Mandatory conds, HMO - Fire Doors 5, HMO - Fire Mandatory conds, HMO - Fire Doors 5, HMO - Fire Mandatory conds, HMO - Fire Doors 5, HMO - Fire Mandatory conds, HMO - Fire Doors 5, HMO - Fire Mandatory conds, HMO - Fire Doors 5, HMO - Fire Mandatory conds, HMO - Fire Doors 5, HMO - Fire Mandatory conds, HMO - Fire Doors 5, HMO - Fire Mandatory conds, HMO - Fire Doors 5, HMO - Fire Doors 5, HMO - Fire Doors 5, HMO - Fire Mandatory conds, HMO - Fire Doors 5, HMO - Fire Doors 6,	IMO -			
Furniture Mandatory conds, HMO - Licensing Loft Insulation, HMO - Property Chges Mandatory Strangty Maist Mandatory of and EMO - Rubbish Recyc Mandatory conds, HMO - Tenant Agriculture Mandatory Conds (National Mandatory Conds) (National Mandatory Cond	int			
Mandatory conds, Heating, Management/Repairs, Mangement/Repairs, Structural fireworks				



#### Licence No.

#### 2015/01100/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

61 Tisbury Road Hove BN3 3BL

Ward

Central Hove

Name & Address of Licence Holder	
Hardwick Hartley Partnership, 204 Church Road Hove BN3 2DJ	
Name & Address of Person Managing	
,	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = BEDSIT, No of Units = 11, Occupancy = 11, No of Storeys = 5	
Number of Rooms Total Number of Rooms 11	
a) Sleeping b) Living Rooms	
N - 1 10   10 - 11 - 15   11 - 15   11 - 15   12 - 15   12 - 15   13 - 1	4 <b>F</b> L4
Number of Self Contained Flats: 0 Number of Non Self Co	nt. Flats: 0
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers	
c) W.C.s	
Licence Details	
Commencement date: 21/10/2015 Duration of licence:	20/09/2019
Maximum number of persons or households permitted to occupy HMO under cond	ditions of licence:
Households 11 Persons 11	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference num	nber

Summary of conditions of licence

Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Other fire works, Structural fire works



#### Licence No.

#### 2015/01145/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

68 Brunswick Place Hove BN3 1NB

Ward

Brunswick And Adelaide

Name & Address of Licen	ce Holder		
The Baron Homes Corporation	Ltd, 10 Prince Albert St	reet Brighton BN1 1HE	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	d HMO (No of storeys, o	etc)	
Property Type = BEDSIT, No o	of Units = 18, Occupancy	/ = 18, No of Storeys = 6	
Number of Rooms	Total Number of	f Rooms 30	
a) Sleeping ###		ving Rooms	
a) Sieeping	D) Liv	ang Rooms	
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Flat	s: 18
Number of Self Contained Fi	als:	Number of Non Self Cont. Flat	S. 10
Shared Amenities	Number Desc	ription	
a) Kitchen	6 Besc	приоп	
b) Bathrooms/Showers	6		
c) W.C.s	6		
Licence Details			
Commencement date:	29/07/2015	Duration of licence:	05/05/2020
Maximum number of person	s or households permi	tted to occupy HMO under conditions	of licence:
Households 18	Persons 18		
Information referred to a	residential property t	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie	cence		
HMO - Elec Mandatory conds,	HMO - Fire Mandatory	conds, HMO - Furniture Mandatory conds	, HMO -

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/01218/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

41 The Crestway Brighton BN1 7BX

Ward

Hollingdean And Stanmer

Name & Address of Licence	Holder		
Mr Craig Dwyer-Smith, 26 Hove P	ark Way Hove BN3 6F	PT	
Name & Address of Person I	Managing		
Mr Dan Lyons, 21 Bramber Road	Seaford BN25 1AG		
Property Description			
Short description of licensed H	MO (No of storeys, et	c)	
Property Type = SHARED HOUSI	Ξ, No of Units = 1, Occ	cupancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of I	Rooms 8	
a) Sleeping	b) Livir	ng Rooms	
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities N	lumber Descri	ption	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	06/01/2016	Duration of licence:	09/03/2020
	00.020.0		00/00/2020
Maximum number of persons o	r households permitt	ed to occupy HMO under conditions	of licence:
Households 7 Pe	ersons 7		
i iouseiioius / Fe	130113		
Information referred to a res	idential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licen	ce		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, other fire works



#### Licence No.

#### 2015/01316/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

54 Argyle Road Brighton BN1 4QB

Ward

Preston Park

Name & Address of Licen	ce Holder		
Mr & Mrs James & Kim McCal	oe, 5 Bowerhill Cottages Legshea	th Lane East Grinstead RH19 4	JN
Name & Address of Perso	n Managing		
G4 Lets, 2 Hythe Road Bright	n BN1 6JS		
Property Description			
Short description of license	I HMO (No of storeys, etc)		
Property Type = SHARED HO	USE, No of Units = 1, Occupancy	= 7, No of Storeys = 4	
Number of Rooms	Total Number of Rooms	9	
a) Sleeping 7	b) Living Roon	ns 1	
Number of Self Contained F	ats: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number Description		
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Licence Details			
Commencement date:	10/06/2015	Duration of licence:	13/03/2020
Maximum number of person	s or households permitted to o	ccupy HMO under conditions	of licence:
Households 7	Persons 7		
Information referred to a	esidential property tribunal	or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie	ence		
	atory conds, HMO - Fire Mandator	y conds, HMO - Furniture Mand	latory conds,

Fire Alarm, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs



#### Licence No.

#### 2015/01318/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 51 Ditchling Rise Brighton BN1 4QN

Ward

Preston Park

Name & Address of Licen	ce Holder		
Mr & Mrs Jeremy Barrett, Rusl	nett House Rushett Lane I	Norton Nr Faversham Kent ME13 0SG	
Name & Address of Perso	n Managing		
G4 Lets, 2 Hythe Road Brighton	on BN1 6JS		
Property Description			
Short description of licensed	d HMO (No of storeys, et	c)	
Property Type = SHARED HO	USE, No of Units = 1, Occ	cupancy = 10, No of Storeys = 4	
Number of Dooms	Total Number of	Rooms 13	
Number of Rooms			
a) Sleeping 10	b) Livir	ng Rooms 1	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number Descri	ption	
a) Kitchen	2		
b) Bathrooms/Showers c) W.C.s	4		
c) w.c.s	4		
Licence Details			
Commencement date:	10/06/2015	Duration of licence:	13/03/2020
Maximum number of person	s or households permitt	ed to occupy HMO under conditions of I	icence:
Households 10	Persons 10		
10	10		
Information referred to a	residential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Mandatory conds, HMO - Gas	ec Mandatory conds, HMC Mandatory conds, HMO -	O - Fire Mandatory conds, HMO - Furniture Property Chges Mandatory conds, HMO - IMO - RubbishRecyc Mandatory conds, HM	

Tenant Agrmnt Mandatory conds, Management / Repairs, Mangement / Repairs, Other Fire works, Structural Fire works



#### Licence No.

#### 2015/01319/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

19 Ditchling Road Brighton BN1 4SB

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder			
Mr Chowsit & Mrs Susan Tsan	g-Ping, 30 Holmbı	ury Avenue C	rowthorne Berkshire RG45 6TQ	
Name & Address of Perso	n Managing			
G4 Lets, 2 Hythe Road Brighto	n BN1 6JS			
Property Description				
Short description of licensed	d HMO (No of stor	reys, etc)		
Property Type = SHARED HO	USE, No of Units =	= 1, Occupan	cy = 10, No of Storeys = 4	
Number of Rooms	Total Num	ber of Room	ns 11	
a) Sleeping 10		b) Living Ro	oms 1	
Number of Self Contained Fl	ats:	0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number	Description		
a) Kitchen	1	-		
o) Bathrooms/Showers	3			
c) W.C.s	2			
Lanca Datalla				
Licence Details				
Commencement date:	10/06/201	15	Duration of licence:	13/03/2020
Maximum numbar of navoan	a ar hausahalda	normitted to	account LIMO under conditions of I	iaanaa
waxiiilulii iluliiber oi person	s of flousefloids	permitted to	occupy HMO under conditions of I	icerice.
Households 10	Persons	10		
nformation referred to a	residential prop	erty tribuna	al or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of lic				
			e Doors 8, HMO - Fire Mandatory cor Mandatory conds, HMO - Licensing R	

HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs



#### Licence No.

#### 2015/01320/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

8 Beaconsfield Road Brighton BN1 4QH

Ward

St. Peter's And North Laine

Name & Address of Licer	nce Holder		
Mr Chowsit & Mrs Susan Tsa	ng-Ping, 30 Holmbury Aven	ue Crowthorne Berkshire RG45 6TQ	
Name & Address of Pers	on Managing		
G4 Lets, 2 Hythe Road Bright	on BN1 6JS		
Property Description			
Short description of license	d HMO (No of storeys, etc	:)	
Property Type = SHARED HC	USE, No of Units = 1, Occu	upancy = 9, No of Storeys = 3	
Number of Rooms	Total Number of R	Rooms 11	
a) Sleeping 9	ρ) Γινιιί	g Rooms 1	
Number of Self Contained F	lete: 0	Number of New Colf Court El	-4 1
Number of Self Contained F	lats: 0	Number of Non Self Cont. FI	ats: 1
Shared Amenities	Number Descrip	ation	
a) Kitchen	2	a.o.i	
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	10/06/2015	Duration of licence:	13/03/2020
	10.00.20.0		19.00.2020
Maximum number of persor	s or households permitte	ed to occupy HMO under condition	s of licence:
Households 9	Persons 9		
Information referred to a	residential property tril	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li			
HMO - Elec Mandatory conds	, HMO - Fire Mandatory cor	nds, HMO - Furniture Mandatory cond	ds, HMO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/01332/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 48 Rose Hill Close Brighton BN1 4HT

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
Mr & Mrs Rob & Pauline Rans	om, 36 Tongdean Aven	ue Hove BN3 6TN	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys,	etc)	
Property Type = SHARED HO	USE, No of Units = 1, C	Occupancy = 9, No of Storeys = 4	
Number of Rooms	Total Number of	of Rooms 11	
a) Sleeping 9	b) Li	iving Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number Desc	cription	
a) Kitchen	2		
b) Bathrooms/Showers	3		
c) W.C.s	3		
Licence Details			
Commencement date:	10/06/2015	Duration of licence:	13/03/2020
			•
Maximum number of person	s or nousenoids perm	nitted to occupy HMO under conditions of I	icence:
Households 9	Persons 9		
Information referred to a	residential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie	cence		
UMO Floc Mandatory conde		conde HMO - Furniture Mandatory conde HI	MO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -Repairs Bathroom 17, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Other Fire Works



#### Licence No.

#### 2015/01337/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

43 Beaconsfield Road Brighton Brighton & Hove BN1 4QH

Ward

Preston Park

Name & Address of Licen	ice Holder		
Mr & Mrs Adrian & Judith Bato	helor, Barnfield Lodge	e Picts Lane Cowfold RH13 8AT	
Name & Address of Perso	on Managing		
G4 Lets, 2 Hythe Road Brighton	on BN1 6JS		
Property Description			
Short description of license	d HMO (No of storey	s, etc)	
Property Type = SHARED HO	USE, No of Units = 1,	Occupancy = 8, No of Storeys = 3	
Number of Rooms	Total Number		
a) Sleeping 8	b)	Living Rooms 1	
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number De	escription	
a) Kitchen	2		
b) Bathrooms/Showers c) W.C.s	2		
C) VV.O.S			
Licence Details			
Commencement date:	17/07/2015	Duration of licence:	13/03/2020
Maximum number of person	e or households nor	mitted to occupy HMO under conditions of	iconco:
maximum number of person	s or nousenoids per	mitted to occupy himo under conditions of	icence.
Households 8	Persons 8		
Information referred to a	residential propert	ty tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie Additional facilities, HMO - Ele		HMO - Fire Mandatory conds, HMO - Furniture I	Mandatory

Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2015/01341/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

16 Church Road Portslade BN41 1LA

Ward

South Portslade

Name & Address of Licence	Holder		
Ms Carly Houston, 27 Westbourne	e Gardens Hove BN3 5PL		
Name & Address of Person I	Managing		
,			
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Occupan	cy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Room	ns 6	
a) Sleeping	b) Living Ro		
a) Sieeping	b) Living No	oms	
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Flats	s: 0
Shared Amenities N	Number Description		
a) Kitchen			
b) Bathrooms/Showers c) W.C.s			
c) w.c.s			
Licence Details			
Commencement date:	05/06/2015	Duration of licence:	12/03/2020
Commencement date.	03/00/2013	Duration of ficerice.	12/03/2020
Maximum number of persons o	r households permitted to	occupy HMO under conditions of	of licence:
Households 6 Po	ersons 6		
Information referred to a res	idential property tribuna	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Common of conditions of lines			

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2015/01456/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

30 Newmarket Road Brighton BN2 3QF

Ward

Hanover And Elm Grove

Nama 8 Adduses of License Helden	
Name & Address of Licence Holder	
Ms Gail Brooks, 5 Hartington Road Brighton BN2 3LJ	
Name & Address of Person Managing	
John Hilton Ltd, 100 Church Street Brighton BN1 1UJ	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 4	
Number of Rooms Total Number of Rooms 9	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	: 0
Shared Amenities Number Description	
Shared Amenities Number Description  a) Kitchen	
a) Kitchen	
a) Kitchen b) Bathrooms/Showers c) W.C.s	
a) Kitchen b) Bathrooms/Showers	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details	01/04/2020
a) Kitchen b) Bathrooms/Showers c) W.C.s	01/04/2020
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details	
A) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 04/08/2015 Duration of licence:  Maximum number of persons or households permitted to occupy HMO under conditions of	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 04/08/2015 Duration of licence:	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 04/08/2015 Duration of licence:  Maximum number of persons or households permitted to occupy HMO under conditions of Households 6 Persons 6	
A) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 04/08/2015 Duration of licence:  Maximum number of persons or households permitted to occupy HMO under conditions of Households 6 Persons 6  Information referred to a residential property tribunal or Lands Tribunal:	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 04/08/2015 Duration of licence:  Maximum number of persons or households permitted to occupy HMO under conditions of Households 6 Persons 6	

Summary of conditions of licence

Additional Facilities, Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Other Fire works, Structural fire works



#### Licence No.

#### 2015/01503/HMO/PS

#### **REGISTER ENTRY FOR** (Address of licensed HMO)

26 Bevendean Crescent Brighton BN2 4RA

Ward

Moulsecoomb And Bevendean

Name & Address of Licence Holder			
Mr Oliver Dorman, 8 Bramble Ris	se Brighton BN1 5GF		
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed F	IMO (No of storeys, etc)		
Property Type = SHARED HOUS	SE, No of Units = 1, Occupa	ncy = 7, No of Storeys = 3	
Number of Rooms	Total Number of Roo	ms 9	
a) Sleeping	b) Living R		
a) Sieeping	b) Living in	OOMS	
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities	Number Descriptio	n	
a) Kitchen			
b) Bathrooms/Showers c) W.C.s			
c) w.o.s			
Licence Details			
Commencement date:	13/10/2015	Duration of licence:	25/03/2020
Commencement date.	13/10/2013	Duration of licence.	23/03/2020
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
Households 7 F	Persons 7		
Information referred to a res	sidential property tribu	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/01509/HMO/PS

#### **REGISTER ENTRY FOR** (Address of licensed HMO)

Fairhaven 17 Park Road Brighton BN1 9AA

Ward

Hollingdean And Stanmer

Name & Address of Licence Holder	
Mr Oliver Dorman, 8 Bramble Rise Brighton BN1 5GF	
Name & Address of Person Managing	
,	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 9, No of Storeys = 3	
, , , , , , , , , , , , , , , , , , , ,	
Number of Rooms Total Number of Rooms 10	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Con	t. Flats: 0
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers	
c) W.C.s	
Licence Details	
Commencement date: 13/10/2015 Duration of licence:	26/03/2020
Sommencement date. 13/10/2019 Duration of incence.	20/03/2020
Maximum number of persons or households permitted to occupy HMO under condi	tions of licence:
Households 9 Persons 9	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference numb	Jer
Summary of conditions of license	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/01516/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

14 Bedford Square Brighton BN1 2PN

		ward	Reger	ncy
Name & Address of Licenc	e Holder			
Mr Nicholas Heanen, 21A Bedfo	ord Square Brighton E	BN1 2PL		
Name & Address of Persor	n Managing			
,				
Property Description				
Short description of licensed	HMO (No of storeys	etc)		
Property Type = SHARED HOU	-	-	revs = 5	
Troporty Type Official Entropy	10,	To, No or otol	icyc c	
Number of Rooms	Total Number	of Rooms 10		
a) Sleeping 10	b) L	iving Rooms		
Number of Self Contained Fla	ts: 1	Number of Non S	Self Cont. Flats:	10
Shared Amenities	Number Des	cription		
a) Kitchen	4	Сприоп		
b) Bathrooms/Showers	9			
c) W.C.s	9			
Licence Details				
Liochico Botano		_		
Commencement date:	29/07/2015	Duration of lic	ence:	29/09/2019
Maximum number of persons	or households pern	nitted to occupy HMO unde	er conditions of li	cence:
Havrach alda 40	Down and 10	_		
Households 10	Persons 10			
Information referred to a re	esidential property	rtribunal or Lands Tribu	ınal:	
None				
Decision of Tribunal		Referen	ce number	
Summary of conditions of lice				
HMO - Elec Mandatory conds, I	HMO - Fire Mandatory	/ conds, HMO - Furniture Ma	andatory conds, HN	лО - Gas

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/01541/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 57 Clifton Street Brighton BN1 3PG

Ward

St. Peter's And North Laine

Name & Address of Licence Holder		
Mr James Powell, 48 Borough Street Brighton	on BN1 3BG	
Name & Address of Person Managing	l .	
Property Moves Ltd, 109 Church Road Hove	BN3 2AF	
December December 1		
Property Description	atomorphism atom	
Short description of licensed HMO (No of	• • •	
Property Type = SHARED HOUSE, No of Un	nits = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms Total N	Number of Rooms 7	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flats:	0 Number of Non Self Con	t. Flats: 0
Shared Amenities Number	Description	
a) Kitchen		
b) Bathrooms/Showers		
c) W.C.s		
Licence Details		
Commencement date: 19/08/	Duration of licence:	26/03/2020
Maximum number of persons or househol	lds permitted to occupy HMO under condi	tions of licence:
Households 5 Persons	5	
Information referred to a residential p	property tribunal or Lands Tribunal:	
	• •	
None		
None Decision of Tribunal	Reference numb	per

Additional facilities, Electrical Works, Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Management/repairs, Structural fire works



#### Licence No.

#### 2015/01642/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

42 Grand Parade Brighton BN2 9QA

Ward

Queen's Park

Name & Address of Licence Holder	
Mr Jeffrey Moine, 5 Darcey Drive Brighton BN1 8LF	
Name & Address of Person Managing	
,	
Dunautic Description	
Property Description  Short description of licensed HMO (No of storage etc.)	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 8, Occupancy = 10, No of Storeys = 5	
Number of Rooms Total Number of Rooms 10	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. F	Flats: 0
Shared Amenities Number Description	
a) Kitchen	
a) Kitchen b) Bathrooms/Showers c) W.C.s	
a) Kitchen b) Bathrooms/Showers	
a) Kitchen b) Bathrooms/Showers c) W.C.s	10/04/2018
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 14/03/2016 Duration of licence:	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 14/03/2016 Duration of licence:	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 14/03/2016 Duration of licence:  Maximum number of persons or households permitted to occupy HMO under condition Households 10 Persons 10	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 14/03/2016 Duration of licence:  Maximum number of persons or households permitted to occupy HMO under condition Households 10 Persons 10  Information referred to a residential property tribunal or Lands Tribunal:	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 14/03/2016 Duration of licence:  Maximum number of persons or households permitted to occupy HMO under condition Households 10 Persons 10	

#### Summary of conditions of licence

Additional facilities, Fire alarms, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Not Assigned, Other Fire Works



#### Licence No.

#### 2015/01671/HMO/PS

#### **REGISTER ENTRY FOR** (Address of licensed HMO)

58 Nesbitt Road Brighton BN2 4BL

Ward

Moulsecoomb And Bevendean

Name & Address of Licence Holder			
Mr Colin Woodcock, 17 Namrik	Mews Hove BN3 2TF		
Name & Address of Persor	n Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOU	SE, No of Units = 1, Occu	pancy = 6, No of Storeys = 4	
Number of Rooms	Total Number of Ro	ooms 7	
a) Sleeping	b) Living	ROOMS	
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities	Number Descript	ion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	28/05/2015	Duration of licence:	13/12/2019
Commencement date:	26/05/2015	Duration of ficence:	13/12/2019
Maximum number of persons	or households permitted	d to occupy HMO under conditions	of licence:
Households 6	Persons 6		
Information referred to a re	sidential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/01707/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

69 Hollingdean Terrace Brighton BN1 7HB

Ward

Hollingdean And Stanmer

Name & Address of Licence	Holdor		
		e Brockham Betchworth Surrey RH3 7H	e e
wii Stephen worgan, September C	ottage Glerilleid Clos	e Blockham Betchworth Surrey Rh3 /h	S
Name & Address of Person N	Managing		
name a nacioce en l'electric	nariaging		
,			
Property Description			
Short description of licensed HI	MO (No of storeys, e	tc)	
Property Type = SHARED HOUSE	E, No of Units = 5, Oc	cupancy = 5, No of Storeys = 3	
		_	
Number of Rooms	Total Number of	Rooms 6	
a) Sleeping	b) Livi	ng Rooms	
	T		1
Number of Self Contained Flats	0	Number of Non Self Cont. Flat	s: 0
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s	umber Descr	iption	
Licence Details			
1	7		
Commencement date:	22/09/2015	Duration of licence:	01/04/2020
Maximum number of persons or	households permit	ted to occupy HMO under conditions	of licence:
Households 5 Pe	ersons 5		
Information referred to a resi	dential property to	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/01712/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

7 St Leonards Road Brighton BN2 3AJ

Ward

Hanover And Elm Grove

Name & Address of Licence H	older	
Roni Devere, 78 Saltdean Drive Briç	ghton BN2 8SD	
Name & Address of Person Ma	anaging	
,		
Property Description		
Short description of licensed HM0	O (No of storeys, etc)	
Property Type = SHARED HOUSE,	No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Decree	Total Number of Booms 0	
Number of Rooms	Total Number of Rooms 8	
a) Sleeping ###	b) Living Rooms 2	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	1
Number of Self Contained Flats.	Number of Non-Sen Cont. Flats.	ı
Shared Amenities Nu	mber Description	
a) Kitchen	1	
b) Bathrooms/Showers	1	
c) W.C.s	1	
Licence Details		
_		
Commencement date:	10/07/2015 Duration of licence:	26/11/2019
Maximum number of persons or h	nouseholds permitted to occupy HMO under conditions of li	cence:
Households 5 Pers	sons 5	
Tiouscholus 5 Tells	50115	
Information referred to a resid	ential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence	e ) - Fire Mandatory conds. HMO - Furniture Mandatory conds. HN	ЛО - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/repairs, Structural fire works, management/repairs



#### Licence No.

#### 2015/01729/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 4 Upper Hollingdean Road Brighton BN1 7GA

Ward

Hollingdean And Stanmer

Name & Address of Licence Holder	
Mr Dimitrios Mantazis, 53 Grantham Road Brighton BN1 6EF	
MI DIMINIST MARIAZIS, SO STARBAIT ROCK DIIGHON DIVI OLI	
Name & Address of Person Managing	
,	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6	6, No of Storeys = 3
Number of Decision	-
Number of Rooms Total Number of Rooms	7
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Self Contained Flats:	mber of Non Self Cont. Flats: 0
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s	
Licence Details	
Commencement date: 07/05/2015	Duration of licence: 18/12/2019
Maximum number of persons or households permitted to occu	upy HMO under conditions of licence:
Households 6 Persons 6	
Information referred to a residential property tribunal or	Lands Tribunal:
None	
Decision of Tribunal	Reference number

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Other Fire Works, Structural Fire Works



#### Licence No.

#### 2015/01869/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

12 Pevensey Road Brighton BN2 3AG

Ward

Hanover And Elm Grove

Name & Address of Licence Holder	
Mill House Enterprises Ltd, Mr Don & Mrs Susan Rayward The Mill House Henfield Common Sou	ıth Henfield
Name & Address of Person Managing	
G4 Lets, 2 Hythe Road Brighton BN1 6JS	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms 7 a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	:: 0
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s	
Licence Details	
Commencement date: 22/07/2015 Duration of licence:	21/04/2020
Maximum number of persons or households permitted to occupy HMO under conditions o	f licence:
Households 5 Persons 5	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of licence	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Structural fire works



#### Licence No.

#### 2015/01900/HMO/PS

#### **REGISTER ENTRY FOR** (Address of licensed HMO)

26 Portland Road Hove BN3 5DJ

Ward

Westbourne

Name & Address of Licence Holder	
Mrs Karen Dodd, Old School House Offham Sussex BN7 3QB	
N OALL CD M :	
Name & Address of Person Managing	
,	
Dronouty Deceriation	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 9, Occupancy = 9, No of Storeys = 3	
Number of Rooms Total Number of Rooms 9	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. F	lats: 0
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers	
c) W.C.s	
License Deteile	
Licence Details	
Commencement date: 11/12/2015 Duration of licence:	23/03/2020
Maximum number of persons or households permitted to occupy HMO under condition	s of licence:
Households 9 Persons 9	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summany of conditions of license	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO -Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Bathroom 17, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs



#### Licence No.

#### 2015/01928/HMO/PS

### REGISTER ENTRY FOR (Address of licensed HMO)

9 Grafton Street Brighton BN2 1AQ

Ward

Queen's Park

Name & Address of Licence Holder	
Mr Michael J W Reynell, 18 Hampton Court Crescent East Molese	y Surrey KT8 9JF
Name & Address of Person Managing	
,	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy =	7, No of Storeys = 4
Number of Rooms Total Number of Rooms	7
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Nu	umber of Non Self Cont. Flats: 0
Number of Self Contained Flats.	midel of Non Self Cont. I lats.
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers	
c) W.C.s	
Licence Details	
05/00/0045	07/04/0000
Commencement date: 05/06/2015	Duration of licence: 27/04/2020
Maximum number of persons or households permitted to occur	upy HMO under conditions of licence:
Households 7 Persons 7	
Information referred to a residential property tribunal or	Lands Tribunal:
None	
Decision of Tribunal	Reference number
Summary of conditions of licence	

Additional Facilities, Fire Alarm, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Bedrooms, HMO - Licensing Loft Insulation, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Other Fire works, Structural Fire Works



#### Licence No.

#### 2015/02046/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

21A Beaconsfield Road Brighton BN1 4QH

Ward

Preston Park

Name & Address of Licence	Holder		
Mr & Mrs Rob & Pauline Ransom		ve RN3 6TN	
WI & WIS TOD & Ladille Talison	, 30 Tongucan Avenue Tio	VC DINO OTTV	
Name & Address of Person	Managing		
G4 Lets, 2 Hythe Road Brighton I			
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Occupa	ancy = 7, No of Storeys = 3	
N	TatalN all and CD		
Number of Rooms	Total Number of Roc		
a) Sleeping	b) Living F	Rooms	
Number of Self Contained Flats	<b>5</b> : 0	Number of Non Self Cont. Flat	ts: 0
	N		
	Number Description	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	10/06/2015	Duration of licence:	13/03/2020
Maximum number of persons of	r households permitted	to occupy HMO under conditions	of licence:
Households 7 P	ersons 7		
Information referred to a res	sidential property tribu	nal or Lands Tribunal:	
None	nachtial property tribu	nai or Earlas Mibaliai.	
Decision of Tribunal		Reference number	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/02096/HMO/PS

### REGISTER ENTRY FOR (Address of licensed HMO)

53 Barnett Road Brighton BN1 7GJ

Ward

Hollingdean And Stanmer

Name & Address of Licence	Holder		
Mr David Symons, 4 Acre Garder		thing BN11 4LN	
···· ··· - · · · · · · · · · · · ·		<u></u>	
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed H	MO (No of storeys, et	c)	
Property Type = SHARED HOUS	E, No of Units = 1, Occ	upancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of F	Rooms 6	
a) Sleeping	h) l ivin	g Rooms	
a) 5.65pmg	2) 2	g reeme	
Number of Self Contained Flats	: 0	Number of Non Self Cont. Fla	its: 0
Shared Amenities	lumber Descrip	otion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	06/07/2015	<b>Duration of licence:</b>	23/04/2020
Maximum number of persons o	r households permitte	ed to occupy HMO under conditions	of licence:
_		,	
Households 6 P	ersons 6		
Information referred to a res	idential property tri	bunal or Lands Tribunal:	
Information referred to a res	idential property tri	bunal or Lands Tribunal:	
	idential property tri	bunal or Lands Tribunal:  Reference number	

Summary of conditions of licence

Additional Facilities, Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Other Fire works, Structural fire works, Ventilation



#### Licence No.

#### 2015/02105/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

81 Hollingdean Terrace Brighton BN1 7HB

Ward

Hollingdean And Stanmer

Name & Address of Licen	ce Holder		
Mr Simon Hedger Grace, 15 S	outhdown Road Brighton BN	1 6FH	
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of licensed	d HMO (No of storeys, etc)		
Property Type = SHARED HO	USE, No of Units = 1, Occup	ancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Ro	oms 8	
a) Sleeping	b) Living		
a) Sieeping	b) Living	Rooms	
Number of Calf Cantained El	-t	Number of New Colf Cont. Flo	40.
Number of Self Contained FI	ats: 0	Number of Non Self Cont. Fla	its: 0
Shared Amenities	Number Descripti	on	
a) Kitchen	Transor Booonpa	<b></b>	
b) Bathrooms/Showers			
c) W.C.s			
ĺ			
Licence Details			
0	00/00/0045	Donation of Bosses	00/04/0000
Commencement date:	02/09/2015	Duration of licence:	23/04/2020
Maximum number of person	s or households permitted	to occupy HMO under conditions	of licence:
Households 6	Persons 6		
nouselloids	Persons		
Information referred to a i	residential p <u>roperty tribu</u>	ınal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Additional Facilities, Fire Alarm, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Works, Structural Fire Works, Ventilation



#### Licence No.

#### 2015/02131/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

22 Cowper Street Hove BN3 5BP

Ward

Westbourne

Name & Address of Licence Holder	
Mr Michael Soufis-Law, 22 Cowper Street Hove East Sussex BN3 5BP	
Name & Address of Person Managing	
,	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms Total Number of Rooms 6	
a) Sleeping b) Living Rooms	
a) diceping	
Number of Self Contained Flats: 0 Number of Non Self Cont. I	Flats: 0
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers c) W.C.s	
<u> </u>	
Licence Details	
Commencement date: 17/06/2015 Duration of licence:	26/04/2020
Maximum number of persons or households permitted to occupy HMO under condition	ns of licence:
Households 5 Persons 5	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of licence	

Fire Alarm, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Works



#### Licence No.

#### 2015/02182/HMO/PS

#### **REGISTER ENTRY FOR** (Address of licensed HMO)

88 Preston Drove Brighton BN1 6LB

Ward

Preston Park

Name & Address of Licen			
Seaside Capital Ltd, 48 Hill Bro	w Hove BN3 6QH		
Name & Address of Perso	n Managing		
Mr Dan Lyons, Brighton Accom	modation Agency 21 Brambe	r Road Seaford BN25 1AG	
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOL	JSE, No of Units = 1, Occupa	ncy = 8, No of Storeys = 4	
Number of Decision	Total Newsbar of D		
Number of Rooms	Total Number of Roo		
a) Sleeping	b) Living R	ooms	
		_	
Number of Self Contained Fla	ats: 0	Number of Non Self Cont. Flats	s: 0
Shared Amenities	Number Description	n	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
		Γ	
Commencement date:	07/08/2015	Duration of licence:	27/04/2020
Maximum number of persons	or households permitted t	o occupy HMO under conditions o	of licence:
Households 8	Persons 8		
Information referred to a r	esidential property tribur	nal or Lands Tribunal:	
Information referred to a r	esidential property tribui	nal or Lands Tribunal:	
	esidential property tribui	nal or Lands Tribunal:  Reference number	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2015/02192/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 23 Old Shoreham Road Brighton BN1 5DQ

Ward

Preston Park

Name & Address of Licence H	Holder		
Seaside Capital Ltd, 48 Hill Brow H	love BN3 6QH		
Name & Address of Person M	anaging		
Mr Dan Lyons, Brighton Accommod	dation Agency 21 Brar	mber Road Seaford BN25 1AG	
Property Description			
Short description of licensed HM	O (No of storeys, etc	c)	
Property Type = SHARED HOUSE	, No of Units = 1, Occ	upancy = 7, No of Storeys = 4	
Number of Rooms	Total Number of F	Rooms 8	
a) Sleeping	b) Livin	g Rooms	
Number of Self Contained Flats:	0	Number of Non Self Cont. Flats	: 0
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s	umber Descrip	otion	
Licence Details			
_			
Commencement date:	22/09/2015	Duration of licence:	27/04/2020
Maximum number of persons or	households permitte	ed to occupy HMO under conditions o	flicence:
Households 7 Per	rsons 7		
Information referred to a resid	dential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licens	•		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Not Assigned, Structural fire works



#### Licence No.

#### 2015/02223/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

32A Boundary Road Hove BN3 4EF

Ward

Wish

Name & Address of Licer	nce Holder		
Mr Pasquale Malacaria, 8 Dry	den Court Renfrew Road Lon	don SE11 4NH	
Name & Address of Pers	on Managing		
,			
Duanante Dananistian			
Property Description	LUMO (Alexandra)		
Short description of license	-		
Property Type = SHARED HC	USE, No of Units = 1, Occup	ancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Ro	oms 6	
a) Sleeping	b) Living I	Rooms	
, , ,	, 3		
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats	s: 0
	0		
Shared Amenities	Number Description	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Licence Details			
Commencement date:	07/08/2015	Duration of licence:	28/04/2020
Maximum number of nerces	as ar hausahalda narmittad	to account UMO under conditions of	fliannau
maximum number of persor	is or nousenoids permitted	to occupy HMO under conditions of	or licence:
Households 5	Persons 5		
Information referred to a	residential property tribu	ınal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	cence		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/02447/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

51 Buckingham Road Brighton BN1 3RQ

Ward

St. Peter's And North Laine

Name & Address of Licence	e Holder		
Lincoln Holland Holdings Ltd, M		Street Cuckfield RH17 5JJ	
Name & Address of Persor	Managing		
Hove Lets, 204 Church Road H	ove BN3 2DJ		
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOU	SE, No of Units = 1, Occupa	ancy = 6, No of Storeys = 5	
Number of Rooms	Total Number of Roc	oms 6	
a) Sleeping	b) Living F		
a) clooping	S) Living i	toomo	
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Flat	ts: 0
rumber of den domanieur la	0	Number of Non Cent Cont. Flat	0
Shared Amenities	Number Description	on	
a) Kitchen	·		
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Licence Details			
Commencement date:	22/12/2015	Duration of licence:	10/05/2020
Maximum number of persons	or households permitted	to occupy HMO under conditions	of licence:
Households 6	Persons 6		
i iouseiioius 0	- G130113 U		
Information referred to a re	sidential property tribu	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
0			

#### Summary of conditions of licence

Additioinal facilities, Additional facilities, Electrical works, Fire alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other fire works, Structural fire works



#### Licence No.

#### 2015/02474/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

56 Hartington Road Brighton BN2 3PB

Ward

Hanover And Elm Grove

Nama O Adduses of Linears	I la lalau		
Name & Address of Licence		TIMO OLID	
Ms Meena Bahia-Tailor, 84 Monti	rose Avenue Twickenham	TW2 6HD	
Name O Address of Dansey	Managaria		
Name & Address of Person	5 5		
01 Property Letting Ltd, 64 St Jar	nes' Street Brighton BN2	IPJ	
Property Description			
Short description of licensed H	IMO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Occup	ancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Ro	oms 8	
a) Sleeping	b) Living I	Rooms	
		$\overline{}$	
Number of Self Contained Flats	<b>3</b> : 0	Number of Non Self Cont. Fla	ts: 0
	Number Description	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Electrice Botaine			
Commencement date:	17/07/2015	<b>Duration of licence:</b>	31/03/2020
Maximum number of persons of	or households permitted	to occupy HMO under conditions	of licence:
Households 6 P	ersons 6		
Information referred to a res	sidential property tribu	ınal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/02533/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

33 Stanmer Villas Brighton BN1 7HQ

Ward

Hollingdean And Stanmer

Name & Address of Licence	Holder		
Mr David Humphrey, Clock Cottag		eter Hants SO21 1PO	
ivii David Humphrey, Clock Colla	ge itchen Abbas winches	Ster Harits SOZT TBQ	
Name & Address of Person	Managing		
G4 Lets, 2 Hythe Road Brighton E			
O+ Lots, 2 Trytho Road Brighton L	3141 000		
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Occur	pancy = 6, No of Storeys = 3	
	<u> </u>	•	
Number of Rooms	Total Number of Ro	ooms 6	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Flats	o: 0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities N	Number Descript	ion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	10/09/2015	Duration of licence:	17/03/2020
Maximum number of persons of	r households permitter	d to occupy HMO under conditions	of licence:
maximum number of persons o	i nousenolus permittet	to occupy nime under conditions	of ficerice.
Households 6 P	ersons 6		
Information referred to a res	idential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
0			

#### Summary of conditions of licence

Gas Supply and appliances, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/02565/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 27-28 Belvedere Terrace Brighton BN1 3AF

Ward

Regency

		Wald	,geney
Name & Address of Licen	ce Holder		
Chestnut Development Co Ltd		hton BN1 1HE	
Name & Address of Perso	n Managing		
The Baron Homes Corporation	Ltd, 10 Prince Albert Street	Brighton BN1 1HE	
Property Description			
Property Description	LUMO (No of otorovo oto)		
Short description of licensed			
Property Type = SHARED HO	JSE, No of Units = 22, Occu	pancy = 22, No of Storeys = 5	
Number of Rooms	Total Number of Ro	oms 22	
a) Sleeping	b) Living I	Rooms	
, , <u>,                                  </u>	, •		
Number of Self Contained FI	ats: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities	Number Description	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
0	40/44/0045	B. office of Process	4.4/05/0000
Commencement date:	12/11/2015	Duration of licence:	14/05/2020
Maximum number of person	s or households permitted	to occupy HMO under conditions	of licence:
Households 22	Persons 22		
Information referred to a i	residential property tribu	ınal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie	conco		

**Summary of conditions of licence**Additional Facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs



#### Licence No.

#### 2015/02638/HMO/PS

#### **REGISTER ENTRY FOR** (Address of licensed HMO)

36 Livingstone Road Hove BN3 3WP

Ward

Goldsmid

Name & Address of Licence	a Haldan		
		NO CLI	
Mr Spencer Orman, 79 Hove Pa	TK ROAG HOVE EAST SUSSEX B	IN3 OLL	
Name & Address of Person	Managing		
Mr Dan Lyons, Brighton Accomm		Road Seaford BN25 1AG	
Wil Ball Lyono, Brighton Accomi	nodation rigericy 21 Bramber	Troda Ocalora Biv20 1710	
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOUS	SE, No of Units = 1, Occupan	cy = 5, No of Storeys = 4	
		_	
Number of Rooms	Total Number of Room	ns 5	
a) Sleeping	b) Living Ro	oms	
		1	
Number of Self Contained Flat	ts: 0	Number of Non Self Cont. Flats	:: 0
Shared Amenities	Number Description		
a) Kitchen	Number Description		
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commonoament data	09/12/2015	Duration of licence:	19/05/2020
Commencement date:	09/12/2015	Duration of licence:	19/05/2020
Maximum number of persons	or households permitted to	occupy HMO under conditions of	f licence:
Households 5	Persons 5		
Information referred to a re	sidential property tribuna	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice	nco		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2015/02658/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

24 Atlingworth Street Brighton BN2 1PL

Ward

Queen's Park

Name & Address of Licer	ice Holder			
Mr J Snell & Mrs J Bamford, E	Basement Flat 57 Mari	ne Parade Brighton BN2 1PL		
Name & Address of Perso	on Managing			
Mr David Pay, Youngs Brighton	on 39 Upper St James	Street Brighton BN2 1JN		
Property Description				
Short description of license	d HMO (No of storey	s, etc)		
Property Type = SHARED HC	USE, No of Units = 8	Occupancy = 8, No of Storey	ys = 4	
Number of Dooms	Total Numba	of Dooms 0		
Number of Rooms	Total Numbe			
a) Sleeping 8	b)	Living Rooms		
Number of Self Contained F	lats:	Number of Non	Self Cont. Flats:	8
Shared Amenities		scription		
a) Kitchen	8			
b) Bathrooms/Showers c) W.C.s	3			
o,				
Licence Details				
	10/11/0015	<b>-</b>		10/00/00 10
Commencement date:	12/11/2015	Duration of lic	cence:	13/08/2019
Maximum number of person	ıs or households pe	mitted to occupy HMO und	er conditions of li	cence:
Households 8	Persons 8			
Households 8	Persons 8			
Information referred to a	residential proper	y tribunal or Lands Tribu	unal:	
None				
Decision of Tribunal		Referen	ce number	
Summary of conditions of li HMO - Elec Mandatory conds	, HMO - Fire Mandato			

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, HMO Lic - Heating, Management/Repairs, Other Fire Works



#### Licence No.

#### 2015/02785/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

118 Portland Road Hove BN3 5DN

Ward

Westbourne

ame & Address of Licence Holder
r Ian Bunday, 15-17 Middle Street Brighton BN1 1AL
ame & Address of Person Managing
r Dan Lyons, Brighton Accommodation Agency 74 Lewes Road Brighton BN2 3HZ
vanauty, Dagavintian
roperty Description hort description of licensed HMO (No of storeys, etc)
roperty Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3
operty Type - STANED HOUSE, NO OF Office - 1, Occupancy - 0, No of Storeys - 3
umber of Rooms 7
Sleeping b) Living Rooms
umber of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
hared Amenities  Kitchen  Bathrooms/Showers  W.C.s  Description
icence Details
ommencement date: 19/02/2016 Duration of licence: 28/05/2020
aximum number of persons or households permitted to occupy HMO under conditions of licence:
ouseholds 6 Persons 6
formation referred to a residential property tribunal or Lands Tribunal:
one
ecision of Tribunal Reference number
ummary of conditions of licence ectrical works, HMO - Flec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO -

Electrical works, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Fire Notices 1, HMO - Fire Test Certificates, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Other Fire works



#### Licence No.

#### 2015/02789/HMO/PS

#### **REGISTER ENTRY FOR** (Address of licensed HMO)

5 Clifton Road Brighton BN1 3HP

Ward

Regency

Name & Address of Licence	Holder		
Mr Ian Bunday, 15-17 Middle Stre	et Brighton BN1 1AL		
Name & Address of Person	3 3		
Mr Dan Lyons, Brighton Accomm	odation Agency 74 Lewes F	Road Brighton BN2 3HZ	
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Occupa	ncy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Roo	ms 7	
a) Sleeping	b) Living R	_	
a) Siceping	b) Living IV	001113	
Number of Calf Cantained Flate	0	Number of New Colf Court Flate	
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Flats	: 0
Shared Amenities I	Number Description	n	
a) Kitchen	Tumber Description	•	
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	07/08/2015	Duration of licence:	26/05/2020
	01700/2010		20,00,2020
Maximum number of persons of	r households permitted to	o occupy HMO under conditions o	f licence:
Households 6 P	ersons 6		
•			
Information referred to a res	idential property tribur	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licer	200		

Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works, Ventilation



#### Licence No.

#### 2015/02845/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

204 Ditchling Road Brighton BN1 6JE

Ward

Hollingdean And Stanmer

Name & Address of Licence	Holder		
Mrs Patricia Cobb, 3 Hylden Clos			
Tring i autora Copp., 3 i tylucii Clos	DIGITION DIAZ ODI		
Name & Address of Person	Managing		
S J Lettings Ltd, 52 Lewes Road			
Property Description			
Short description of licensed H	IMO (No of storeys, etc)		
Property Type = SHARED HOUS	SE, No of Units = 1, Occupa	ancy = 7, No of Storeys = 3	
Newskay of Deans	Tatal Namelan of Dan		
Number of Rooms	Total Number of Roo		
a) Sleeping	b) Living F	Rooms	
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Flat	ts: 0
Observed Association	Normalis and December 41	_	
	Number Description	on	
a) Kitchen			
b) Bathrooms/Showers c) W.C.s			
c) w.c.s			
Licence Details			
Commencement date:	16/07/2015	Duration of licence:	30/03/2020
Maximum number of persons of	or households permitted	to occupy HMO under conditions	of licence:
Households 7 F	Persons 7		
Information referred to a res	sidential property tribu	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
0			

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Other Fire works



#### Licence No.

#### 2015/02850/HMO/PS

#### **REGISTER ENTRY FOR** (Address of licensed HMO)

Flat 1 16A York Place Brighton BN1 4GU

Ward

St. Peter's And North Laine

Name & Address of Licence	Holder		
Harwood Properties Ltd, 99 Wes	tern Road Hove East S	Sussex BN3 1FA	
Name & Address of Person	Managing		
,			
D ( D ) (			
Property Description			
Short description of licensed F	-	·	
Property Type = SHARED HOUS	SE, No of Units = 1, Oc	ccupancy = 5, No of Storeys = 4	
Number of Rooms	Total Number of	Rooms 5	
a) Sleeping	h) Liv	ing Rooms	
a) 0.00pg	<i>2)</i> 2.10		
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Fla	ts: 0
Number of Jen Contained Flat.	J. U	Number of Non Sen Sont. The	
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s	Number Descr	ription	
Licence Details			
		1	
Commencement date:	07/01/2016	Duration of licence:	27/05/2020
Maximum number of persons of	or households permit	tted to occupy HMO under conditions	of licence:
Households 5 F	ersons 5		
Information referred to a res	sidential property t	ribunal or Lands Tribunal:	
None	montal proporty t		
Decision of Tribunal		Reference number	
Summary of conditions of lices	200		

Additional facilities, Fire alarms, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Emergency Lighting 1, HMO - Fire General 1, HMO - Fire General 2, HMO - Fire Mandatory conds, HMO - Fire Notices 1, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - General 1, HMO - General 6, HMO - General 7, HMO - General Electrical 1, HMO - General Electrical 2, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO -Tenant Agrmnt Mandatory conds, Structural Fire Works, Structural Fire works, Structural fire works, Timescale, structural fire works





#### Licence No.

#### 2015/02853/HMO/PS

#### **REGISTER ENTRY FOR** (Address of licensed HMO)

20 Queens Park Road Brighton BN2 0GL

Ward

Queen's Park

Name & Address of Licence H	lolder		
Mr Ermylos Savvides, 131 Kings Ro			
IVII EIIIIYIOS Savvides, 131 Kiilys Ko	Dau Brighton Biv i ZHH		
Name & Address of Person M	anaging		
My Lets Ltd, 4A Gildredge Road Ea			
Wy Leto Ltd, 471 Ollareage Hoad La	SUDUING BIVET TILE		
Property Description			
Short description of licensed HM	O (No of storeys, etc)		
Property Type = SHARED HOUSE,	No of Units = 1, Occupanc	y = 15, No of Storeys = 3	
Number of Rooms	Total Number of Rooms	s 12	
a) Sleeping	b) Living Roo	ms	
Number of Self Contained Flats:	0	Number of Non Self Cont. Flats	: 0
Shared Amenities Nu	mber Description		
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
L'annua Batalla			
Licence Details			
Commencement date:	01/12/2016	Duration of licence:	18/05/2018
Maximum number of persons or	households permitted to o	occupy HMO under conditions o	f licence:
Households 15 Per	sons 15		
Information referred to a resid	lential property tribuna	l or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licence			

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/02862/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

53 Stanley Road Brighton BN1 4NH

Ward

St. Peter's And North Laine

Name & Address of Licence	Holder		
Mr Yasir Rana, Batchelors Emms		orsham West Sussex RH13 0QG	
Name & Address of Person	Managing		
Pavilion Properties Ltd, 128-129 L	ewes Road Brighton	BN2 3LG	
Property Description			
Short description of licensed H	MO (No of storeys, e	etc)	
Property Type = SHARED HOUS	E, No of Units = 1, Oc	cupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 7	
a) Sleeping		ing Rooms	
a) Sieeping	D) LIV	ing Rooms	
Number of Self Contained Flats	.: 0	Number of Non Self Cont. Flat	s: 0
Number of Self Contained Flats	. 0	Number of Non Sen Cont. Flat	<b>5.</b> 0
Shared Amenities	lumber Descr	ription	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Licence Details			
Commencement date:	13/11/2015	Duration of licence:	31/05/2020
Maximum number of persons o	r households nermit	ted to occupy HMO under conditions	of licence:
	- Households permit		or neerice.
Households 6 P	ersons 6		
Information reformed to a re-	idential muonomina	vibsel su l suda Tuibsel	
Information referred to a res	idential property t	ribunal of Lands Tribunal:	
None		Doforonos number	
Decision of Tribunal		Reference number	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / repairs, Structural fire works, electrical works



#### Licence No.

#### 2015/02874/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

41 Old Shoreham Road Hove BN3 7BE

Ward

Hove Park

Name & Address of Lice	nce Holder		
Mr Paul Nash, 8 Bristol Street			
Name & Address of Pers	on Managing		
,			
Property Description			
Short description of license			
Property Type = SHARED HC	OUSE, No of Units = 6, Occup	ancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Ro	oms 7	
a) Sleeping	b) Living F	Rooms	
	, 3		
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats	s: 0
Shared Amenities	Number Description	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	23/11/2015	Duration of licence:	01/06/2020
	20.120.10		0.700,2020
Maximum number of person	ns or households permitted	to occupy HMO under conditions o	f licence:
Households 6	Persons 6		
Information referred to a	residential property tribu	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/02884/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

14 London Terrace Brighton BN1 4JP

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
Mr Jeremy Barrett, Rushett Ho	ouse Rushett Lane Norton	Faversham Kent ME13 0SG	
Name & Address of Perso	n Managing		
G4 Lets, 2 Hythe Road Brighto	on BN1 6JS		
Property Description			
Short description of licensed	d HMO (No of storeys, et	tc)	
Property Type = SHARED HO	USE, No of Units = 1, Occ	cupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 7	
a) Sleeping 5	D) LIVII	ng Rooms 1	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Fla	ats: 0
Shared Amenities	Number Descri	ption	
a) Kitchen b) Bathrooms/Showers	1 2		
c) W.C.s	2		
0) 11.0.0			
Licence Details			
Commencement date:	03/09/2015	Duration of licence:	02/06/2020
Maximum number of person	s or households permitt	ed to occupy HMO under conditions	s of licence:
		-	
Households 5	Persons 5		
Information referred to a	residential property tr	ibunal or Lands Tribunal:	
None	residential property ti	ibanai oi Lanas inibanai.	
Decision of Tribunal		Reference number	
200.0.011 01 111001101		110.0.0.00 110.000	
Mandatory conds, HMO - Prop	HMO - Fire Mandatory co perty Chges Mandatory co	onds, HMO - Furniture Mandatory cond nds, HMO - Property Maint Mandatory	conds, HMO -

Fire Works



#### Licence No.

#### 2015/02894/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

10 London Terrace Brighton BN1 4JP

Ward

St. Peter's And North Laine

Name & Address of Licence	Holder		
Mr Jeremy Barrett, Rushett House		n Faversham Kent ME13 0SG	
, , , , , , , , , , , , , , , , , ,			
Name & Address of Person I	Managing		
G4 Lets, 2 Hythe Road Brighton B	N1 6JS		
Property Description			
Short description of licensed HI	MO (No of storeys, e	etc)	
Property Type = SHARED HOUSI	E, No of Units = 1, Oc	ccupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of	i Baama - C	
a) Sleeping	b) Liv	ing Rooms	
	I		
Number of Self Contained Flats	. 0	Number of Non Self Cont. Flat	s: 0
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s	umber Descr	ription	
Licence Details			
,		1	
Commencement date:	03/09/2015	Duration of licence:	02/06/2020
Maximum number of persons o	households permit	tted to occupy HMO under conditions	of licence:
Households 5 Pe	ersons 5		
Information reformed to a real	dential musmout, t	wihaanaa ay lagada Tuibaanala	
Information referred to a res	idential property t	ribunal or Lands Tribunal:	
None  Decision of Tribunal		Reference number	
Decision of Tribunal		Reference number	
Summary of conditions of licen-	ce		

Additional Facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire works



#### Licence No.

#### 2015/02932/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

29 Caledonian Road Brighton BN2 3HX

Ward

St. Peter's And North Laine

Name & Address of Licence	Holder		
Mr James Ford, The Mill Mill Lane		dae Kent TN12 8DB	
TWI GAINES FOR THE WIII WIII LANG	, maidstoric road rollblic	age None 11412 ODD	
Name & Address of Person I	Managing		
Mr Dan Lyons, 21 Bramber Road			
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Occup	ancy = 7, No of Storeys = 4	
Nl	T. ( ) N		
Number of Rooms	Total Number of Ro	oms 8	
a) Sleeping	b) Living	Rooms	
		<u></u>	_
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flats	s: 0
Shared Amenities N	lumber Descripti	on	
Shared Amenities  a) Kitchen	lumber Descripti	on	
	lumber Descripti	on	
a) Kitchen	lumber Descripti	on	
a) Kitchen b) Bathrooms/Showers c) W.C.s	lumber Descripti	on	
a) Kitchen b) Bathrooms/Showers	lumber Descripti	on	
a) Kitchen b) Bathrooms/Showers c) W.C.s	Jumber Descripti	Duration of licence:	14/05/2020
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:	25/09/2015	Ţ	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons o	25/09/2015	Duration of licence:	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons o	25/09/2015 r households permitted ersons 7	Duration of licence: [ to occupy HMO under conditions o	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons of thouseholds 7 Persons	25/09/2015 r households permitted ersons 7	Duration of licence: [ to occupy HMO under conditions o	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons of thouseholds 7  Information referred to a reserved.	25/09/2015 r households permitted ersons 7	Duration of licence: [ to occupy HMO under conditions o	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other fire works



#### Licence No.

#### 2015/02937/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 45 Park Crescent Road Brighton BN2 3HS

Ward

St. Peter's And North Laine

Name & Address of Licence Holder			
Mr James Ford, The Mill Mill Lane Maidstone Road Tonbridge Kent TN12 8DB			
Name & Address of Person Managing			
Mr Dan Lyons, 21 Bramber Road Seaford BN25 1AG			
Property Description			
Short description of licensed HMO (No of storeys, etc)			
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 7, No of Storeys =	4		
Number of Rooms Total Number of Rooms 8  a) Sleeping b) Living Rooms			
a) Sleeping b) Living Rooms			
Number of Self Contained Flats: 0 Number of Non Self	Cont. Flats: 0		
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s			
Licence Details			
Commencement date: 27/11/2015 Duration of licence	e: 14/05/2020		
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
Households 7 Persons 7			
Information referred to a residential property tribunal or Lands Tribunal	:		
None			
Decision of Tribunal Reference n	number		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2015/02997/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

81 Washington Street Brighton BN2 9SR

Ward

Hanover And Elm Grove

Name & Address of Licence	e Holder		
Mr Peter Bell, 30 Hilda Vale Ro		N	
Name & Address of Person	n Managing		
Mr Dan Lyons, 21 Bramber Roa	nd Seaford East Sussex BN	N25 1AG	
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOU	ISE, No of Units = 1, Occup	pancy = 7, No of Storeys = 4	
Number of Rooms	Total Number of Ro	ooms 7	
a) Sleeping	b) Living		
a) olcoping	b) Living	TOOMS	
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Flat	:s: 0
Number of Self Contained Fia	0	Number of Non Sen Cont. I la	.s. U
Shared Amenities	Number Descript	ion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	27/11/2015	Duration of licence:	14/05/2020
Manifestore and a second and a second			-6 li
waximum number of persons	or nousenoids permitted	I to occupy HMO under conditions	of licence:
Households 7	Persons 7		
Information referred to a re	esidential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2015/03040/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

Bodhisattva Buddhist Centre 3 Lansdowne Road Hove BN3 1DN

Ward

Goldsmid

Name & Address of Licence Holder		
Ms Mary Diskin, Bodhisattva Buddhist Cen		
Name & Address of Person Managir	ng	
,		
Property Description		
Property Description  Short description of licensed HMO (No o	of storage atc)	
	Units = 1, Occupancy = 29, No of Storeys = 5	
Troperty Type – STIANED TIOUSE, NO UN	Office - 1, Occupancy - 23, No of Otorcys - 3	
Number of Rooms Total	l Number of Rooms 43	
a) Sleeping	b) Living Rooms	
_		
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats	:: 0
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s	Description	
Licence Details		
Commencement date: 07/0	07/2016 Duration of licence:	11/01/2020
Maximum number of persons or househ	holds permitted to occupy HMO under conditions o	f licence:
Households 29 Persons	29	
Information referred to a residential	property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural Fire Works



#### Licence No.

#### 2015/03174/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

61 Hawkhurst Road Brighton BN1 9GF

Ward

Hollingdean And Stanmer

Name & Address of Licen	ce Holder		
Mr Elliott Newlyn, 12 Frith Road			
The Emoti North, 12 i har rea	3 1 10 10 17 to		
Name & Address of Perso	n Managing		
Brand Vaughan,			
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOL	JSE, No of Units = 1, Occup	pancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Ro	oms 7	
a) Sleeping	b) Living	Rooms	
November of Oalf Oantain and El	-4	Normalism of New Oalf Coart Florid	4
Number of Self Contained Fla	ats: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities	Number Descripti	on	
a) Kitchen	- Trainison - Booonipa	<b></b>	
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	28/08/2015	Duration of licence:	16/06/2020
Commencement date.	20/00/2013	Duration of ficerice.	10/00/2020
Maximum number of persons	or households permitted	to occupy HMO under conditions	of licence:
Households 6	Persons 6		
Information referred to a r	esidential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
0			

Summary of conditions of licence

Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2015/03258/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

68 Jevington Drive Brighton BN2 4DG

Ward

Moulsecoomb And Bevendean

Name & Address of Licence F	lolder		
Mr Simon Hedger Grace, 15 South	down Road Brighton BN1 6FH		
Name & Address of Person M	anaging		
1			
Property Description			
Short description of licensed HM	O (No of storeys, etc)		
Property Type = SHARED HOUSE	, No of Units = 1, Occupancy = 6, No of Storeys = 3		
Number of Rooms	Total Number of Rooms 9		
a) Sleeping	b) Living Rooms		
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats	: 0	
Shared Amenities Nu	ımber Description		
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	06/01/2016 Duration of licence:	21/06/2020	
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
Households 6 Per	rsons 6		
Information referred to a resid	dential property tribunal or Lands Tribunal:		
Information referred to a residence None	dential property tribunal or Lands Tribunal:		
	dential property tribunal or Lands Tribunal:  Reference number		

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Doors 4, HMO - Fire Doors 8, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO -Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



## Licence No.

### 2015/03339/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

85 Coombe Road Brighton BN2 4ED

Ward

Moulsecoomb And Bevendean

Name & Address of Licence Holder	
Mr & Mrs M & J Dmochowski, Phoenix Flaunden Lane Boving	gdon Herts HP3 0PA
Name & Address of Person Managing	
Kendrick Property Services Ltd, Carlton House 28-29 Carlton	Terrace Brighton BN41 1UR
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupan	icy = 5, No of Storeys = 0
	•
Number of Rooms Total Number of Room	
a) Sleeping b) Living Ro	ooms 2
Number of Self Contained Flats: 0	Number of Non Self Cont. Flats: 1
Shared Amenities Number Description	ı
a) Kitchen 1	
b) Bathrooms/Showers 2	
c) W.C.s 2	
Licence Details	
Commencement date: 24/08/2015	Duration of licence: 29/06/2020
Maximum number of persons or households permitted to	a accurat HMO under conditions of licence:
Maximum number of persons of nouseholds permitted to	occupy time under conditions of ficence.
Households 5 Persons 5	
Information referred to a residential property tribun	al or Lands Tribunal:
None	
Decision of Tribunal	Reference number
Summary of conditions of licence Fire Alarm, HMO - Elec Mandatory conds, HMO - Fire Manda HMO - Gas Mandatory conds, HMO - Property Chges Manda conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenar	tory conds, HMO - Property Maint Mandatory

Repairs



#### Licence No.

#### 2015/03380/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Maisonette 29 Elder Place Brighton BN1 4GF

Ward

St. Peter's And North Laine

Name & Address of Licence	e Holder	
Mr Rodney Emberson, Hillygrou	und Hatchet Lane Beaulieu Hampshire SO42 7WA	
Name & Address of Person	n Managing	
Tanat-Jones & Company (Mana	agement) Ltd, Palmeira Avenue Mansions 19 Church Road I	Hove BN3 2FA
Property Description		
Short description of licensed		
Property Type = SHARED HOU	JSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping	b) Living Rooms	
-,	, J	
Number of Self Contained Fla	nts: 0 Number of Non Self Cont.	Flats: 0
Shared Amenities	Number Description	
a) Kitchen		
b) Bathrooms/Showers		
c) W.C.s		
Licence Details		
Licence Details		
Commencement date:	08/12/2015 Duration of licence:	24/06/2020
Maximum number of persons	or households permitted to occupy HMO under condition	one of licence:
	or nouseholds permitted to occupy nino under condition	nis of licence.
Households 5	Persons 5	
Info	- 1 d - 1 d	
	esidential property tribunal or Lands Tribunal:	
None	Defenders would	
Decision of Tribunal	Reference number	Γ
Summary of conditions of lice	ence	

Additional Facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, HMO Lic - Fire Safety Works, Management/Repairs, Ventilation



#### Licence No.

#### 2015/03431/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

14 South Street Brighton BN1 1AP

Ward

Regency

Name & Address of Licence	Holder		
Mr Tom Ghibaldan, 59 Braemore	Road Hove BN3 4HA		
Name & Address of Person	Managing		
Greenfend Ltd T/as Cambridge R	esidential, 117-118 Westerr	Road Hove BN3 1DB	
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Occupar	cy = 5, No of Storeys = 4	
Number of Rooms	Total Number of Roon	ns 6	
a) Sleeping	b) Living Ro	oms	
		]	
Number of Self Contained Flats	<b>5</b> : 0	Number of Non Self Cont. Flats	. 0
Channel Amenities	Normalian Dagawinstian		
Shared Amenities a) Kitchen	Number Description		
b) Bathrooms/Showers			
c) W.C.s			
,			
Licence Details			
•	10/00/0015	<b>5</b> [	00/00/0000
Commencement date:	19/08/2015	Duration of licence:	26/06/2020
Maximum number of persons of	or households permitted to	occupy HMO under conditions of	flicence:
Households 5 P	ersons 5		
•			
Information referred to a res	idential property tribun	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licer	100		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/03491/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

9 York Grove Brighton BN1 3TT

Ward

Preston Park

Name & Address of Licen	ce Holder		
Investsave Ltd, 4A Gildredge I			
Name & Address of Perso	on Managing		
,			
D ( D ) (			
Property Description	d LIMO (No of storous sto)		
Short description of license		7 N 60	
Property Type = SHARED HO	USE, No of Units = 1, Occupa	ancy = 7, No of Storeys = 4	
Number of Rooms	Total Number of Roo	oms 8	
a) Sleeping	b) Living R	Rooms	
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Flat	s: 0
Shared Amenities	Number Description	n	
a) Kitchen b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	05/11/2015	Duration of licence:	30/06/2020
Maximum number of person	s or households permitted t	to occupy HMO under conditions	of licence:
		o coupy time under conditions	or notified.
Households 7	Persons 7		
Information referred to a	residential property tribu	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Means of escape



#### Licence No.

#### 2015/03503/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

43 Widdicombe Way Brighton BN2 4TH

Ward

Moulsecoomb And Bevendean

N			
Name & Address of Licence			
Mr & Mrs Mohammad & Nina Gho	olami, 30 Backwoods Lar	ne Lindfield RH16 2ED	
Name & Address of Person	Managing		
,			
Down to Down to the			
Property Description	WO (1)		
Short description of licensed H			
Property Type = SHARED HOUS	E, No of Units = 1, Occup	pancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Ro	ooms 6	
a) Sleeping	b) Living		
a) Sieeping	b) Living	Rooms	
Normalis and Calif Campballing of Flater		Number of New Colf Court Florid	4
Number of Self Contained Flats	0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities	Number Descript	ion	
a) Kitchen	Number Descript		
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	06/01/2016	Duration of licence:	01/07/2020
Maximum number of persons of	r households permitted	d to occupy HMO under conditions	of licence:
_		. ,	
Households 5 P	ersons 5		
lusta	الماد		
Information referred to a res	idential property trib	unar or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
0			

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



### Licence No.

### 2015/03589/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

79 Prince's Crescent Brighton BN2 3RA

Ward

St. Peter's And North Laine

Name & Address of Licer	ice Holder		
Mr Barry Cooke, 150 Carden	Avenue Brighton BN1 8NH		
Name & Address of Person			
Kendrick Property Services Lt	d, Carlton House 28-29 Carlton 1	errace Brighton BN41 1UR	
Property Description			
Short description of license	d HMO (No of storeys, etc)		
Property Type = SHARED HC	USE, No of Units = 1, Occupanc	y = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms	s 9	
a) Sleeping ###			
a) Sieeping	b) Living Roo	IIIS J	
	.,	N 1 5N 0 50 1 50 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats	:1
Charad Amonitics	Number Description		
Shared Amenities a) Kitchen	Number Description		
b) Bathrooms/Showers	2		
c) W.C.s	2		
,			
Licence Details			
Commencement date:	24/08/2015	Duration of licence:	19/07/2020
Maximum number of persor	s or households permitted to	occupy HMO under conditions o	f licence:
Households 5	Persons 5		
Information referred to a	residential property tribuna	l or Lands Tribunal	
None	rootaontiai property tribuna	- or Earlao Pribaliali	
Decision of Tribunal		Reference number	
		TOTOTOTION HUMBON	
HMO - Gas Mandatory conds,	atory conds, HMO - Fire Mandato HMO - Property Chges Mandato	ory conds, HMO - Furniture Manda ory conds, HMO - Property Maint M : Agrmnt Mandatory conds, Manag	landatory

Repairs



#### Licence No.

#### 2015/03709/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

31 Park Road Brighton BN1 9AA

Ward

Hollingdean And Stanmer

Name & Address of Licer			
Mr Yong Fu Chang, 31 Park F	coad Brighton BN1 9AA		
Name O Address of Davis	an Managalan		
Name & Address of Pers	on Managing		
<u> </u>			
Property Description			
Short description of license	d HMO (No of storeys etc)		
•	• • • •	- C. No. of Charava - 2	
Property Type = SHARED HC	OUSE, No of Units = 1, Occupancy	7 = 6, NO 01 Storeys = 3	
Number of Rooms	Total Number of Rooms	7	
a) Sleeping 6	b) Living Roor	ms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ats: 0
Shared Amenities	Number Description		
a) Kitchen	2		
b) Bathrooms/Showers	6		
c) W.C.s	6		
Licence Details			
Licence Details			
Commencement date:	19/02/2016	Duration of licence:	04/11/2020
			6.12
Maximum number of persor	s or households permitted to o	ccupy HMO under conditions	S OT IICENCE:
Households 6	Persons 6		
Information referred to a	residential property tribunal	or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li			
Additional facilities, Enlargem	ent of Bedroom, Fire alarms, HMC	) - Elec Mandatory conds, HMC	) - Fire

Additional facilities, Enlargement of Bedroom, Fire alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works, Ventilation



#### Licence No.

#### 2015/03722/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

35 Slinfold Close Brighton BN2 0YS

Ward

East Brighton

Name & Address of Licenc	e Holder		
Ms Sharmila Edekar, 8, Y Ddol,	Carmarthen, SA31 2AZ		
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOU	SE, No of Units = 1, Occupa	ncy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Roo	ms 7	
a) Sleeping	b) Living R	ooms	
		7	_
Number of Self Contained Flat	ts: 0	Number of Non Self Cont. Flats:	0
Shared Amenities	Number Description	1	
a) Kitchen	Number Description	•	
b) Bathrooms/Showers			
c) W.C.s			
0) 11.0.0			
Licence Details			
Commencement date:	20/11/2015	Duration of licence:	11/07/2020
Maximum number of persons	or households permitted to	o occupy HMO under conditions of	licence:
Households 5	Persons 5		
Information referred to a re	sidential property tribur	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
0			

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2015/03778/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

35 Newmarket Road Brighton BN2 3QG

Ward

Hanover And Elm Grove

Name & Address of Licence H	Holder	
Mr Stephen Elderfield, 11 Brangwy		
Name & Address of Person M	lanaging	
MTM Property Services Ltd, 108A	Lewes Road Brighton BN2 4AE	
Property Description	IO (No of atomics ato)	
Short description of licensed HM		
Property Type = SHARED HOUSE	, No of Units = 1, Occupancy = 6, No of Storeys = 4	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	umber Description	
Licence Details		
Commencement date:	01/10/2015 Duration of licence:	14/07/2020
Maximum number of persons or	households permitted to occupy HMO under conditions of li	cence:
Households 6 Per	rsons 6	
Information referred to a resid	dential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence HMO - Elec Mandatory conds, HMO	<b>e</b> O - Fire Blanket, HMO - Fire Mandatory conds, HMO - Fire Notice	es 1,

HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds,

HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt

Mandatory conds, Management / Repairs



#### Licence No.

#### 2015/03799/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

26 May Road Brighton BN2 3EB

Ward

Hanover And Elm Grove

Name & Address of Licence	Holder		_
Mr Craig Dwyer-Smith, 26 Hove F			
ivii Craig Dwyer-Smith, 20 Hove i	ark way hove bito of 1		
Name & Address of Person	Managing		
Dan Lyons, 21 Bramber Road Se			
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Occup	ancy = 7, No of Storeys = 3	
Number of Decision	Total Number - 5 D -	0	
Number of Rooms	Total Number of Roo		
a) Sleeping	b) Living F	Rooms	
Number of Self Contained Flats	0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities	Number Description	n	
a) Kitchen	dumber Description	5H	
b) Bathrooms/Showers			
c) W.C.s			
0) W.O.3			
Licence Details			
_	22////22/2		1-10-10000
Commencement date:	23/11/2015	Duration of licence:	15/07/2020
Maximum number of persons o	r households permitted	to occupy HMO under conditions	of licence:
Households 7 P	ersons 7		
nouseriolus / P	ersons /		
Information referred to a res	idential property tribu	ınal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Works, Structural fire Works



#### Licence No.

#### 2015/03800/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

Flat At 129 Islingword Road Brighton BN2 9SH

Ward

Hanover And Elm Grove

Name & Address of Licence Holder	
Mr Craig Dwyer-Smith, 26 Hove Park Way Hove East Sussex BN3 6PT	
Name & Address of Person Managing	
Dan Lyons, 21 Bramber Road Seaford BN25 1AG	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms 7	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0	
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers	
s) W C s	
c) W.C.s	
Licence Details	
Licence Details	
Licence Details	
Licence Details  Commencement date: 13/11/2015 Duration of licence: 15/07/2020  Maximum number of persons or households permitted to occupy HMO under conditions of licence:	
Licence Details  Commencement date: 13/11/2015 Duration of licence: 15/07/2020	
Licence Details  Commencement date: 13/11/2015 Duration of licence: 15/07/2020  Maximum number of persons or households permitted to occupy HMO under conditions of licence:	
Licence Details  Commencement date: 13/11/2015 Duration of licence: 15/07/2020  Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households 6 Persons 6	
Licence Details  Commencement date: 13/11/2015 Duration of licence: 15/07/2020  Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households 6 Persons 6  Information referred to a residential property tribunal or Lands Tribunal:	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2015/03810/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

100 Hanover Terrace Brighton BN2 9SP

Ward

Hanover And Elm Grove

Name & Address of Licence	e Holder		
Mr James Day, 36 Church Lane	Stagsden Bedford MK43 8S	H	
Name & Address of Person	n Managing		
Arington Ltd, 15 Station Road B	urgess Hill West Sussex RH	15 9DE	
<b>-</b>			
Property Description	LIMO (Alexandra)		
Short description of licensed	-		
Property Type = SHARED HOU	SE, No of Units = 1, Occupa	ncy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooi	ms 6	
a) Sleeping	b) Living Ro	ooms	
Number of Self Contained Fla	its: 0	Number of Non Self Cont. Flats	s: 0
Shared Amenities	Number Description	n	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
		,	
Commencement date:	28/08/2015	Duration of licence:	15/07/2020
Maximum number of persons	or households permitted to	o occupy HMO under conditions o	of licence:
	-		
Households 5	Persons 5		
Information referred to a re	esidential property tribur	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

#### Summary of conditions of licence

Additional facilities, Fire alarm works, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, LOFT INSULATION, Structural fire works



#### Licence No.

#### 2015/03959/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 92 Newick Road Brighton BN1 9JH

Ward

Moulsecoomb And Bevendean

Name & Address of Licen	ce Holder		
Mr Oliver Dorman, 8 Bramble	Rise Brighton BN1 5GF		
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, e	tc)	
Property Type = SHARED HO	USE, No of Units = 1, Oct	cupancy = 9, No of Storeys = 3	
Number of Doses	Total Number of	Doomo 40	
Number of Rooms	Total Number of		
a) Sleeping	b) Livii	ng Rooms	
			Г
Number of Self Contained Fi	lats: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities	Number Descri	iption	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	13/10/2015	Duration of licence:	23/07/2020
Massimosom massimon of manage		to d to a county LIMO under conditions	of lineman.
waximum number of person	s or nousenoids permitt	ted to occupy HMO under conditions	of licence:
Households 9	Persons 9		
Information referred to a	rosidontial property t	ribunal or Lands Tribunal:	
None	residential property tr	TOUTIAL OF LATIUS TRIDUITAL.	
Decision of Tribunal		Reference number	
Decision of Hibunal		Neierence number	
Summary of conditions of lie	cence		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/04000/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 25 Wilbury Grove Hove BN3 3JQ

Ward

Goldsmid

Name & Address of Licence			
Mr Granville Ball, 44 Kempshott	Road Horsham RH12 2EY		
Name & Address of Person	Managing		
Mr Stephen Ball, 44 Kempshott I	Road Horsham RH12 2EY		
Property Description			
Short description of licensed I	HMO (No of storeys, etc)		
Property Type = SHARED HOUS	SE, No of Units = 1, Occupan	cy = 6, No of Storeys = 3	
		_	
Number of Rooms	Total Number of Roon	ns 6	
a) Sleeping	b) Living Ro	oms	
Number of Self Contained Flat	s: 0	Number of Non Self Cont. Flats	s: 0
		_	
Shared Amenities	Number Description		
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commonoment data	22/10/2015	Duration of licence:	28/06/2020
Commencement date:	22/10/2015	Duration of licence:	28/06/2020
Maximum number of persons	or households permitted to	occupy HMO under conditions of	of licence:
Households 6	Persons 6		
Information referred to a re	sidential property tribun	al or Lands Tribunal:	
	sidential property tribuni	ai oi Lanus muunai.	
None		Defenses womber	
Decision of Tribunal		Reference number	
Summary of conditions of lies			

Fire alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2015/04037/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Charter House 32A Western Road Hove BN3 1AF

Ward

Brunswick And Adelaide

Name & Address of Licenc	e Holder		
First Charterhouse Investments	Ltd, 34-35 Western Roa	ad Hove BN3 1AF	
Name & Address of Persor	n Managing		
Kudos Ventures, J Jones T/A K	udos Ventures Gemini I	House 136 - 140 Old Shoreham Road,	Hove BN3 7BD
D			
Property Description	LIMO (No of atomore o	4-1	
Short description of licensed	-		
Property Type = SHARED HOL	JSE, No of Units = 1, Oc	cupancy = 5, No of Storeys = 4	
Number of Rooms	Total Number of	Rooms 6	
a) Sleeping	b) Livi	ng Rooms	
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Fla	its: 0
Shared Amenities	Number Descr	iption	
a) Kitchen			
b) Bathrooms/Showers c) W.C.s			
c) w.c.s			
Licence Details			
Commencement date:	08/10/2015	Duration of licence:	29/07/2020
Maximum number of persons	or households permit	ted to occupy HMO under conditions	of licence:
Households 5	Persons 5		
		I	
Information referred to a re	esidential property ti	ribunal or Lands Tribunal:	
None			
None Decision of Tribunal		Reference number	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2015/04044/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

7 Franklin Road Brighton BN2 3AD

Ward

Hanover And Elm Grove

Name & Address of Licer	nce Holder		
Mr James Howarth, 26 Richm	ond Road Brighton BN2 3RN		
Name & Address of Perse	on Managing		
G K White & Co Ltd, 165 Lew	es Road Brighton BN2 3LG		
Property Description			
Short description of license	d HMO (No of storeys, etc)		
Property Type = SHARED HC	OUSE, No of Units = 1, Occupa	ancy = 6, No of Storeys = 3	
		_	
Number of Rooms	Total Number of Roo	oms 7	
a) Sleeping	b) Living F	Rooms	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fl	ats: 0
Shared Amenities	Number Description	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
License Deteile			
Licence Details			
Commencement date:	05/11/2015	Duration of licence:	05/04/2020
Maximum number of persor	ns or households permitted	to occupy HMO under condition	s of licence:
Households 6	Persons 6		
Information referred to a	residential property tribu	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/04232/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 29 Widdicombe Way Brighton BN2 4TH

Ward

Moulsecoomb And Bevendean

Name & Address of Licence	a Holder		
Mrs Caroline Way, 29 High Street			
Twie Gardinie Way, 20 Figh Gard	or wangiora in to ronz		
Name & Address of Person	Managing		
Sure Property Solutions Ltd	ighton BN2 1 IN		
Property Description			
Short description of licensed l	HMO (No of storeys, etc)		
Property Type = SHARED HOUS	SE, No of Units = 1, Occup	ancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Ro	oms 5	
a) Sleeping	b) Living F	Rooms	
Number of Self Contained Flat	es: 0	Number of Non Self Cont. Flats	: 0
	<u> </u>		
Shared Amenities	Number Description	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	23/11/2015	Duration of licence:	14/04/2020
		L	
Maximum number of persons	or households permitted	to occupy HMO under conditions o	f licence:
Households 5	Persons 5		
Information referred to a re	sidential property tribu	ınal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summany of conditions of lies			

Summary of conditions of licence Electrical Certificates, Gas Certificates, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/04255/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

179 Old Shoreham Road Hove BN3 7EA

Ward

Hove Park

Name of Address and Street	an Haldan		
Name & Address of Licen			
Mr Vincent O'Rourke, 140 Wo	odland Drive Hove East Suss	ex BN3 6DE	
N 0.411 CD			
Name & Address of Person			
Khalil Properties Ltd, 124 Lew	es Road Brighton BN1 3LG		
D ( D ) (			
Property Description			
Short description of license	-		
Property Type = SHARED HO	USE, No of Units = 1, Occupa	ancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of Roo	oms 8	
a) Sleeping	b) Living F		
a) Sieeping	b) Living P	COOMS	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flat	s: 0
Observat Association	N. alama Baratata		
Shared Amenities a) Kitchen	Number Description	on	
b) Bathrooms/Showers			
c) W.C.s			
<i>s,</i>			
Licence Details			
Commencement date:	25/01/2016	Duration of licence:	09/08/2020
Maximum number of person	s or households permitted	to occupy HMO under conditions	of licence:
		,	
Households 7	Persons 7		
		ual au Lauda Tuibuuali	
Information referred to a	residential property tribu	nal or Lands Tribunal:	
None		Defense a mount	
Decision of Tribunal		Reference number	
Summary of conditions of lie	cence		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2015/04337/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

13 Inverness Road Brighton BN2 3JB

Ward

St. Peter's And North Laine

Name & Address of Licence	Holder		
Seaside Capital Limited, 48 Hill B	row Hove East Sussex BN3	6QH	
Name & Address of Person I	Managing		
Dan Lyons, 21 Bramber Road Sea	aford East Sussex BN25 1A	G	
Property Description			
Short description of licensed H	-		
Property Type = SHARED HOUS	E, No of Units = 1, Occupan	cy = 7, No of Storeys = 4	
Number of Rooms	Total Number of Room	ns 8	
a) Sleeping	b) Living Ro	ooms	
	-		
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flats	s: 0
		_	
Shared Amenities N	Number Description	ı	
a) Kitchen			
b) Bathrooms/Showers c) W.C.s			
C) W.C.S			
Licence Details			
		,	
Commencement date:	02/11/2015	Duration of licence:	13/08/2020
Maximum number of persons o	r households permitted to	occupy HMO under conditions of	of licence:
Hawashalda 7 B	7		
Households 7 Pe	ersons 7		
Information referred to a res	idential property tri <u>bun</u>	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Doolololi or Iribanai		Neierence mumber	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other fire safety works



#### Licence No.

#### 2015/04364/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

5 Belgrave Place Brighton BN2 1EL

Ward

East Brighton

Name & Address of Licen	ce Holder		
Safeguide Ltd			
Dosalands North Common D	and Wiveletiald Groon Pl	J17 7D I	
Name & Address of Perso	n Managing		
Safeguide Ltd, PO Box 460 Ha	aywards Heath RH17 7F7	Г	
Property Description			
Short description of license	d HMO (No of storeys, e	etc)	
Property Type = BEDSIT, No			
Troperty Type - BEBOTT, No.	oring - 1, Occupancy -	- 3, NO 01 Oloreys – 3	
Number of Rooms	Total Number of	Rooms 7	
a) Sleeping	b) Liv	ing Rooms	
	-,		
Number of Calf Cantained F	lete:	Number of New Colf Court Flot	. 0
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flat	s: 0
Shared Amenities	Number Descr	ription	
<ul><li>a) Kitchen</li><li>b) Bathrooms/Showers</li></ul>	2		
c) W.C.s	2		
c) w.o.s			
Licence Details			
		1	
Commencement date:	22/12/2015	Duration of licence:	02/10/2020
Massimosom massimology of manage	bb-ld	stad ta aaassuus LIMO suudan aanditiana	of lineman.
waximum number of person	s or nousenoids permit	ted to occupy HMO under conditions	of licence:
Households 3	Persons 3		
		_	
Information referred to a	residential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Cummany of canditions of !!	2000		
Summary of conditions of lie	Jence		

Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / repairs, structural fire works



#### Licence No.

#### 2015/04467/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) Second And Third Floor Maisonette 81 St Georges Road Brighton RN2 1FF

Ward

East Brighton

Name & Address of Licence	e Holder		
Investsave Ltd, 176 Church Roa	ad Hove BN3 2DJ		
Name & Address of Person			
My Lets Ltd, 4A Gildredge Road	d Eastbourne BN21 4RL		
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOU	ISE, No of Units = 1, Occupar	ncy = 5, No of Storeys = 2	
Number of Rooms	Total Number of Roor	ns 6	
a) Sleeping	b) Living Ro		
a) Sieeping	b) Living Re	Joins	
Nous have at Oalt Oastalise of Florida	4	Nowe have at New Oalt Coast Flate	. 0
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Flats	: 0
Shared Amenities	Number Description		
a) Kitchen	Number Description	•	
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
0	07/44/0045	Duration of licence:	00/00/0000
Commencement date:	27/11/2015	Duration of licence:	26/08/2020
Maximum number of persons	or households permitted to	o occupy HMO under conditions o	f licence:
Households 5	Persons 5		
nousellolus 3	reisuils 0		
Information referred to a re	esidential property tribun	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Fire Alarm, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works, Ventilation



#### Licence No.

#### 2015/04501/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

5 Wheatfield Way Brighton BN2 4RQ

Ward

Moulsecoomb And Bevendean

Name & Address of Licence Holder	
Wright Brighton Homes LLP, The Old Casino 28 Fourth Avenue Hove BN3 2PJ	
Name & Address of Person Managing	
,	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms Total Number of Rooms 8	
a) Sleeping b) Living Rooms	
b) Living Noome	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flat	ts: 0
ramber of deli contained riats.	.3.
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers	
c) W.C.s	
Licence Details	
Commencement date: 27/11/2015 Duration of licence:	25/08/2020
Maximum number of persons or households permitted to occupy HMO under conditions	of licence:
maximum number of persons of nouseholds permitted to occupy nino under conditions	of ficerice.
Households 6 Persons 6	
Information referred to a residential property tribunal or Lands Tribunal:	
None  Decision of Tribunal Reference number	
Decision of Tribunal Reference number	
Summary of conditions of licence	

Additional facilities, Fire alarm, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/04503/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

142 Springfield Road Brighton BN1 6BZ

Ward

**Preston Park** 

Name & Address of Licence	Holder		
Mr Geoff Grantham, Freeland Co	ottage Henfield Road Small	Dole West Sussex BN5 9XJ	
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed H	HMO (No of storevs. etc)		
Property Type = SHARED HOUS		ancy = 5. No of Storeys = 3	
	, , , , , , , , , , , , , , , , , , , ,		
Number of Rooms	Total Number of Roc	oms 6	
a) Sleeping	b) Living F	Rooms	
			_
Number of Self Contained Flat	s: 0	Number of Non Self Cont. Flat	s: 0
Shared Amenities	Number Description	on	
a) Kitchen	·		
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
	00/00/0045	<b>-</b>	00/00/0000
Commencement date:	28/09/2015	Duration of licence:	28/08/2020
Maximum number of persons of	or households permitted	to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Information referred to a res	sidential property tribu	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Additional Facilities, Fire Alarm, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Other Fire works, Structural Fire Works



#### Licence No.

#### 2015/04504/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

368 Old Shoreham Road Hove BN3 7HA

Ward

Hangleton And Knoll

Name & Address of Licence Holder	
Mr Maurice Kifford, 3 Princes Square Hove East Sussex BN3 4GE	
Name & Address of Person Managing	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 8, No of Storeys = 3	
Number of Rooms Total Number of Rooms 9	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	: 0
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers c) W.C.s	
Licence Details	
07/44/0045	05/00/0000
Commencement date: 27/11/2015 Duration of licence:	25/08/2020
Maximum number of persons or households permitted to occupy HMO under conditions o	flicence:
Households 8 Persons 8	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
9	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2015/04512/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

22-23 London Road Brighton BN1 4JB

Ward

St. Peter's And North Laine

Nama 9 Adduses of Licenses	Holdon		
Name & Address of Licence			
Mr Simon Farncombe, 24 Tongde	an Lane Brighton BN1 5	JD	
Name & Address of Person I			
S J Lettings Ltd, 52 Lewes Road B	3righton BN2 3HW		
Property Description			
Short description of licensed H	MO (No of storeys, etc)	)	
Property Type = SHARED HOUSI	E, No of Units = 1, Occu	pancy = 6, No of Storeys = 4	
Number of Deci-	Tatal November (C)		
Number of Rooms	Total Number of Ro	ooms 6	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flat	s: 0
Shared Amenities N	lumber Descript	tion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	09/12/2015	Duration of licence:	14/07/2020
Commencement date:	09/12/2015	Duration of licence:	14/07/2020
Maximum number of persons o	r households permitte	d to occupy HMO under conditions	of licence:
Households 6 Pe	ersons 6		
Information referred to a res	idential property trik	unal or Lands Tribunal:	
None	idential property trib	odnaror Lanus Tribunai.	
Decision of Tribunal		Reference number	
Decision of Lungual		Reference number	

Summary of conditions of licence

Fire alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/04531/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

First Floor And Second Floor Maisonette 60 Preston Road Brighton RN1 40F

Ward

Preston Park

Name & Address of Licence H	lolder		
Mr Jonathan Brand, Flat 30 30 Oval	I Road London NW1 7DE		
Name & Address of Person Ma	anaging		
,			
Property Description			
Short description of licensed HM	O (No of storeys, etc)		
Property Type = SHARED HOUSE,	No of Units = 1, Occupand	cy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Room	s 7	
a) Sleeping	b) Living Roo		
a) diceping	b) Living No.	JIII 3	
Number of Self Contained Flats:	0	Number of Non Self Cont. Flats	s: 0
Shared Amenities Nu	mber Description		
a) Kitchen			
b) Bathrooms/Showers c) W.C.s			
C) W.O.S			
Licence Details			
Commonount data:	22/42/2045	Duration of linears	25/00/2020
Commencement date:	22/12/2015	Duration of licence:	25/08/2020
Maximum number of persons or I	households permitted to	occupy HMO under conditions o	f licence:
Households 6 Per	sons 6		
Information referred to a resid	lential property tribuna	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
0	_		

Summary of conditions of licence

Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2015/04553/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

50 Viaduct Road Brighton BN1 4ND

Ward

St. Peter's And North Laine

Name & Address of Licence Holder	
Mr Mark Haskett, 29 Quarry Bank Tonbridge Kent TN9 2QZ	
Name & Address of Person Managing	
Mr Dan Lyons, Brighton Accommodation Agency 74 Lewes Road Brighton BN2 3HZ	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms Total Number of Rooms 7	
a) Sleeping 6 b) Living Rooms 1	
, , <del>,</del> , <del>_</del>	
Number of Self Contained Flats: 0 Number of Non Self Con	nt. Flats:
Shared Amenities Number Description	
a) Kitchen 2	
b) Bathrooms/Showers 2	
c) W.C.s	
Licence Details	
Commencement date: 12/02/2016 Duration of licence:	27/08/2020
Maximum number of persons or households permitted to occupy HMO under condi	tions of licence:
Households 6 Persons 6	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference numbers 1997 R	ber
Summary of conditions of licence  HMO - Flec Mandatory conds HMO - Fire Mandatory conds HMO - Furniture Mandatory	conds HMO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/04589/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

33 Hallett Road Brighton BN2 9ZN

Ward

Hanover And Elm Grove

Name & Address of Licence	e Holder		
Mrs Laura Dwyer-Smith, 26 Hov	e Park Way Hove BN3 6F	PT	
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed	HMO (No of storevs. etc	)	
Property Type = SHARED HOUS	-		
Number of Rooms	Total Number of R	ooms 7	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Flat	ts: 0	Number of Non Self Cont. Flat	ts: 0
Number of Self Contained Flat	.s: 0	Number of Non Self Cont. Flat	IS: 0
Shared Amenities	Number Descrip	tion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	22/12/2015	Duration of licence:	25/08/2020
Commencement date.	22/12/2015	Duration of ficence.	23/06/2020
Maximum number of persons	or households permitte	d to occupy HMO under conditions	of licence:
Households 6	Persons 6		
Information referred to a re	sidential property trib	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/04591/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

96 Coombe Road Brighton BN2 4EE

Ward

Moulsecoomb And Bevendean

Name & Address of Licence H	older		
Mosaica Properties Ltd, 81-85 High	Street Brentwood CM14 4	RR	
Name & Address of Person Ma	anaging		
Mr Dan Lyons, 21 Bramber Road Se	eaford BN25 1AG		
Property Description			
Short description of licensed HMG	O (No of storeys, etc)		
Property Type = SHARED HOUSE,	No of Units = 1, Occupand	cy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Room	s 7	
a) Sleeping	b) Living Roo	oms	
Number of Self Contained Flats:	0	Number of Non Self Cont. Flats:	0
Shared Amenities Nu	mber Description		
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Linamaa Dataila			
Licence Details			
Commencement date:	22/12/2015	Duration of licence:	25/08/2020
Maximum number of persons or h	nouseholds permitted to	occupy HMO under conditions of	licence:
Households 6 Pers	sons 6		
Information referred to a resid	antial property tribuse	al ar Landa Tribunal	
Information referred to a resid	ential property tribuna	ar or Lands Tribunal:	
None		Defense	
Decision of Tribunal		Reference number	
Summary of conditions of license	_		

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/04672/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

86 Roedale Road Brighton BN1 7GD

Ward

Hollingdean And Stanmer

Name & Address of Licence Holder	
Mr Craig Dwyer-Smith, 26 Hove Park Way Hove East Sussex BN3 6PT	
Name & Address of Person Managing	
Mr Dan Lyons, 21 Bramber Road Seaford East Sussex BN25 1AG	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 7, No of Storeys = 3	
Number of Books	
Number of Rooms Total Number of Rooms 8	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats:	0
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers	
c) W.C.s	
Licence Details	
Commencement date: 08/03/2016 Duration of licence:	03/09/2020
Maximum number of persons or households permitted to ecouny HMO under conditions of light	onool
Maximum number of persons or households permitted to occupy HMO under conditions of lic	ence.
Households 7 Persons 7	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
O	

#### Summary of conditions of licence

Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Ventilation



#### Licence No.

#### 2015/04674/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

103 Hollingdean Road Brighton BN2 4AA

Ward

Hollingdean And Stanmer

Name & Address of Licence Holder	
Ir Craig Dwyer-Smith, 26 Hove Park Way Hove East Sussex BN3 6PT	
Name & Address of Person Managing	
Ir Dan Lyons, 21 Bramber Road Seaford BN25 1AG	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 7, No of Storeys = 3	
Number of Rooms Total Number of Rooms 8	
b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0	
Shared Amenities Number Description	
ı) Kitchen	
b) Bathrooms/Showers	
e) W.C.s	
Licence Details	
Commencement date: 19/02/2016 Duration of licence: 03/09/2020	
Maximum number of persons or households permitted to occupy HMO under conditions of licence:	
louseholds 7 Persons 7	
nformation referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	

Additional Facilities, Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO -Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO -Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/04675/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

170 Lewes Road Brighton BN2 3LD

Ward

Hanover And Elm Grove

Name & Address of Licence	Holder		
Mr Craig Dwyer-Smith, 26 Hove F		SAY RN3 6PT	
ivii Craig Dwyer-Smith, 20 Hove i	ark way Hove Last Sus	SEX DIAG OF I	
Name & Address of Person	Managing		
Mr Dan Lyons, 21 Bramber Road			
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Occup	pancy = 6, No of Storeys = 3	
Number of Decres	Total Number of D	ama 7	
Number of Rooms	Total Number of Ro		
a) Sleeping	b) Living	Rooms	
Number of Self Contained Flats	0	Number of Non Self Cont. Flat	s: 0
Shared Amenities N	Number Descripti	on	
a) Kitchen		<b></b>	
b) Bathrooms/Showers			
c) W.C.s			
,			
Licence Details			
Commencement date:	08/03/2016	Duration of licence:	03/09/2020
Commencement date.	06/03/2010	Duration of ficerice.	03/09/2020
Maximum number of persons o	r households permitted	to occupy HMO under conditions	of licence:
Households 6 P	ersons 6		
Information referred to a res	idential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Additional Facilities, Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/04676/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

27 Coldean Lane Brighton BN1 9GD

Ward

Hollingdean And Stanmer

Name & Address of Licen	ce Holder		
Mr Craig Dwyer-Smith, 26 Hov	e Park Way Hove East Suss	ex BN3 6PT	
Name & Address of Perso	n Managing		
Mr Dan Lyons, 21 Bramber Ro	ad Seaford BN25 1AG		
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOL	JSE, No of Units = 1, Occup	ancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of Ro	oms 8	
a) Sleeping	b) Living		
a, olooping	5) Living	TOOMS	
Number of Self Contained Fla	ats: 0	Number of Non Self Cont. Fla	ts: 0
Number of Sen Contained Fig	115.	Number of Non Sen Cont. Fla	is. 0
Shared Amenities	Number Descripti	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	19/02/2016	Duration of licence:	03/09/2020
Maximum number of persons	or households permitted	to occupy HMO under conditions	of licence:
Households 7	Persons 7		
Information referred to a r	esidential property tribu	ınal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
0			

Summary of conditions of licence

Additional Facilities, Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/04822/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

73 Lincoln Street Brighton BN2 9UG

Ward

Hanover And Elm Grove

Name & Address of Licence	ce Holder	
Mr & Mrs Julian & Susan Bayle	y, Hope Cottage Piltdown TN22 3XN	
Name & Address of Perso	n Managing	
Brighton Accommodation Agen	cy, 76 Islingword Road Brighton BN2 9SL	
December 1997		
Property Description	LIMO (No. of adaptive ada)	
Short description of licensed	• • •	
Property Type = SHARED HOU	JSE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 6	b) Living Rooms	
Number of Self Contained Fla	Number of Non Self Cont. Fla	ts: 0
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Commencement date:	16/05/2016 Duration of licence:	26/09/2020
Maximum number of persons	or households permitted to occupy HMO under conditions	of licence:
Households 6	Persons 6	
nouseriolus	reisons	
Information referred to a re	esidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/04894/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

15 Hollingdean Road Brighton BN2 4AA

Ward

Hollingdean And Stanmer

Name & Address of Licence	Holder		
Mr J Crooks, 43 Queens Road Ha		 1EG	
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed H	MO (No of storeys, e	etc)	
Property Type = SHARED HOUS	E, No of Units = 1, Oc	ccupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 5	
a) Sleeping		ing Rooms	
a) olcoping	b) Liv		
Number of Self Contained Flats	.: 0	Number of Non Self Cont. Fla	ts: 1
Number of Self Contained Flats	. 0	Number of Non-Sen Cont. Fla	1
Shared Amenities	lumber Desci	ription	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	05/02/2016	Duration of licence:	19/08/2019
<b>M</b>			. 6 12
waximum number of persons o	r nousenoias permi	tted to occupy HMO under conditions	of licence:
Households 5 P	ersons 5		
Information referred to a res	idential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Ventilation 2, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/repairs



#### Licence No.

#### 2015/04896/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

56 Cobden Road Brighton BN2 9TJ

Ward

Hanover And Elm Grove

Name & Address of Licer			
Mr Bradley Hamilton, 108A Le	wes Road Brighton BN2 4	AE	
Nama <sup>8</sup> Address of Days	on Monoging		
Name & Address of Pers			
Mr Toby Hamilton, 108A Lewe	S Road Brighton BNZ 4AE	<u> </u>	
Property Description			
Short description of license	d HMO (No of storeys, et	rc)	
Property Type = SHARED HC	OUSE, No of Units = 1, Occ	cupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of I	Rooms 7	
a) Sleeping 6	b) Livir	ng Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fl	ats: 1
Shared Amenities	Number Descri	ption	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	16/12/2015	Duration of licence:	17/09/2020
Maximum number of persor	ıs or households permitt	ed to occupy HMO under condition	s of licence:
	•		
Households 6	Persons 6		
Information referred to a	residential property tr	ibunal or Lands Tribunal:	
None	, се пенити регорогој		
Decision of Tribunal		Reference number	
Summary of conditions of li HMO - Elec Mandatory conds		onds. HMO - Furniture Mandatory cond	ds. HMO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/04899/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

32 Vernon Terrace Brighton BN1 3JH

Ward

Regency

Name & Address of Licen	ice Holder		
Mr Matthew Sorokin, 77A Rutl	and Road Hove BN3 5FE		
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, etc)		
Property Type = SHARED HO	USE, No of Units = 9, Occup	pancy = 9, No of Storeys = 5	
		•	
Number of Rooms	Total Number of Ro		
a) Sleeping	b) Living	Rooms	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities	Number Descripti	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
	22//2/22/2	<b>-</b>	1-1001000
Commencement date:	06/10/2016	Duration of licence:	15/06/2020
Maximum number of person	s or households permitted	to occupy HMO under conditions	of licence:
Households 9	Persons 9		
Information referred to a	residential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Fire Alarm, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/04917/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

10 Auckland Drive Brighton BN2 4JS

Ward

Moulsecoomb And Bevendean

Name & Address of Licence Holder
Mr Stephen Rice, 27 Browning Avenue Bournemouth Dorset BH5 1NS
Name & Address of Person Managing
MTM Property Services Ltd, 108A Lewes Road Brighton BN2 4AE
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 8, No of Storeys = 3
Number of Rooms Total Number of Rooms 9
a) Sleeping b) Living Rooms
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
Shared Amenities Number Description
a) Kitchen
b) Bathrooms/Showers
b) Bathrooms/Showers c) W.C.s
c) W.C.s
c) W.C.s
Commencement date:  04/12/2015  Duration of licence: 11/10/2020
c) W.C.s  Licence Details
Commencement date:  04/12/2015  Duration of licence: 11/10/2020
Licence Details  Commencement date: 04/12/2015 Duration of licence: 11/10/2020  Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households 8 Persons 8
Licence Details  Commencement date: 04/12/2015 Duration of licence: 11/10/2020  Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households 8 Persons 8  Information referred to a residential property tribunal or Lands Tribunal:
Licence Details  Commencement date: 04/12/2015 Duration of licence: 11/10/2020  Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households 8 Persons 8

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/04919/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

41 St Martins Place Brighton BN2 3LE

Ward

Hanover And Elm Grove

Name & Address of Licence	ce Holder		
Mr James Lang, 81 Osborne Ro			
-	-		
Name & Address of Person	n Managing		
Ms Zena Trow, 31 Upper St Jan	mes Street Brighton BN2 1	JN	
Property Description			
Short description of licensed	-		
Property Type = SHARED HOL	JSE, No of Units = 1, Occu	pancy = 5, No of Storeys = 4	
Number of Rooms	Total Number of Ro	ooms 6	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Fla	nts: 0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities	Number Descript	ion	
a) Kitchen			
b) Bathrooms/Showers c) W.C.s			
0) 11.5.5			
Licence Details			
	10/00/00/10		17/00/0000
Commencement date:	10/03/2016	Duration of licence:	15/09/2020
Maximum number of persons	or households permitted	d to occupy HMO under conditions	of licence:
Households 5	Persons 5		
TIVUSGIIVIUS J	1 0130113		
Information referred to a re	esidential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Elec Certificates, Fire Alarms, Gas Safety, HMO - Furniture Mandatory conds, HMO - Licensing Bathroom 1, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Licensing Kitchen, Not Assigned, Proposed Loft Conversion



#### Licence No.

#### 2015/04924/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 45 Newmarket Road Brighton BN2 3QG

Ward

Hanover And Elm Grove

Name & Address of Licer	nce Holder	
Mr Ahmed Abbas, 10-12 Lewe	es Road Brighton BN2 3HP	
Name & Address of Perso	on Managing	
Kendrick Property Services Lt	td, Carlton House 28-29 Carlton Terrace Brighton BN41 1UR	
Property Description		
Short description of license	d HMO (No of storeys, etc)	
Property Type = SHARED HC	DUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
N	T (d) N of the (D) of D	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping 6	b) Living Rooms 1	
Number of Self Contained F	Flats: 0 Number of Non Self Cont. Flats:	0
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	2 2	
c) W.C.s		
Licence Details		
Commencement date:	16/06/2016 Duration of licence:	16/09/2020
Maximum number of person	ns or households permitted to occupy HMO under conditions of	licence:
Households 6	Persons 6	
Information referred to a	residential property tribunal or Lands Tribunal:	
None	residential property tribuliar of Lands Tribulial.	
Decision of Tribunal	Reference number	
Summary of conditions of li HMO - Elec Mandatory conds	<b>icence</b> s, HMO - Fire Alarm Systems 7, HMO - Fire Blanket, HMO - Fire Mano	datory
	datory conds, HMO - Gas Mandatory conds, HMO - Property Chges M	

conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/04930/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

14 Brewer Street Brighton BN2 3HH

Ward

St. Peter's And North Laine

Name & Address of Licence	ce Holder		
Mr Jeremy Crooks, 43 Queens	Road Haywards Heath RH	16 1EG	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOL			
Troporty Type Ornace Troe	700, 110 01 011110 1, 0000	parity 0, 140 of otoroys 1	
Number of Rooms	Total Number of Ro	ooms 6	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Fla	ats: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Descript	ion	
Licence Details			
Commencement date:	05/02/2016	Duration of licence:	19/08/2019
Maximum number of persons	or households permitted	d to occupy HMO under conditions	of licence:
Households 6	Persons 6		
Information referred to a re	esidential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Ventilation 2, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural Fire Works



#### Licence No.

#### 2015/04932/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

25 Hollingdean Road Brighton BN2 4AA

Ward

Hollingdean And Stanmer

Name & Address of Licence	Holder		
Mr Jeremy Crooks, 43 Queens Ro	ad Haywards Heath RI	H16 1EG	
Name & Address of Person N	Managing		
,			
Dranauty Description			
Property Description  Short description of licensed HI	MO (No of storous, etc	.\	
•	•		
Property Type = Not Assigned, No.	or Units = 1, Occupan	cy = 6, No or Storeys = 3	
Number of Rooms	Total Number of R	dooms 7	
a) Sleeping	b) Livin	g Rooms	
Number of Self Contained Flats:	0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s	umber Descrip	otion	
Licence Details			
Commencement date:	05/02/2016	Duration of licence:	19/08/2019
Maximum number of persons or	households permitte	ed to occupy HMO under conditions	of licence:
Households 6 Pe	ersons 6		
Information referred to a resi	dential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summany of conditions of licens			

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Kitchen 1, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/04939/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

48 Buller Road Brighton BN2 4BJ

Ward

Moulsecoomb And Bevendean

Name & Address of Licence H	older		
Mr Dirk Slabbert, Hazel Cottage Wa	arren Road Woodingdean Brig	nton BN2 6DA	
Name & Address of Person Ma	anaging		
,			
Property Description			
Short description of licensed HM	O (No of storeys, etc)		
Property Type = SHARED HOUSE,	No of Units = 1, Occupancy =	5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms	7	
a) Sleeping	b) Living Rooms		
Number of Self Contained Flats:	0 <b>N</b>	umber of Non Self Cont. Flats	:: 0
Shared Amenities Nu	mber Description		
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Licence Details			
Commencement date:	27/11/2015	Duration of licence:	03/08/2020
		L	
Maximum number of persons or l	households permitted to occ	cupy HMO under conditions o	f licence:
Households 5 Per	sons 5		
Information referred to a resid	lential property tribunal o	r Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management



#### Licence No.

#### 2015/04945/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

72 Widdicombe Way Brighton BN2 4TJ

Ward

Moulsecoomb And Bevendean

Name & Address of Licenc	e Holder		
Mr Bradley Hamilton, 108A Lew	es Road Brighton BN2	4AE	
Name & Address of Persor	Managing		
MTM Property Services Ltd, 108	SA Lewes Road Brighto	n BN2 4AE	
Durant Danietics			
Property Description	UMO (No of otorovo e	40)	
Short description of licensed		·	
Property Type = SHARED HOU	SE, No of Units = 1, Oc	ccupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 6	
a) Sleeping	b) Liv	ing Rooms	
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities	Number Descr	ription	
a) Kitchen			
b) Bathrooms/Showers c) W.C.s			
Licence Details			
Commencement date:	15/03/2016	Duration of licence:	30/09/2020
Commencement date.	15/03/2010	Duration of ficence.	30/09/2020
Maximum number of persons	or households permit	tted to occupy HMO under conditions	of licence:
Households 5	Persons 5	]	
		1	
Information referred to a re	sidential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Electrical works, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural Fire Works



#### Licence No.

#### 2015/04952/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

31 Hollingdean Road Brighton BN2 4AA

Ward

Hollingdean And Stanmer

Name & Address of Licence	Holder		
Mr Jeremy Crooks, 43 Queens R	oad Haywards Heath F	RH16 1EG	
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed H	MO (No of storeys, et	tc)	
Property Type = SHARED HOUS	E, No of Units = 1, Occ	cupancy = 6, No of Storeys = 3	
Number of Dooms	Total Number of	Doomo 6	
Number of Rooms	Total Number of		
a) Sleeping	b) Livii	ng Rooms	
Number of Self Contained Flats	0	Number of Non Self Cont. Flat	s: 1
	Number Descri	iption	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
0	05/00/0046	Describes of House	04/00/0040
Commencement date:	05/02/2016	Duration of licence:	21/08/2019
Maximum number of persons o	r households permitt	ted to occupy HMO under conditions	of licence:
Households 6 P	ersons 6		
Information referred to a res	idential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licer			

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Structural Fire Works



#### Licence No.

#### 2015/04953/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

96 Lansdowne Place Hove BN3 1FH

Ward

Brunswick And Adelaide

Name & Address of Licence Holder
Mr Brian Trevor Cox, 40 Hillbrow Hove BN3 6QH
Name & Address of Person Managing
,
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 13, Occupancy = 13, No of Storeys = 5
Number of Booms Total Number of Booms 45
Number of Rooms Total Number of Rooms 15
a) Sleeping b) Living Rooms
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
Shared Amenities Number Description
a) Kitchen
b) Bathrooms/Showers
c) W.C.s
Licence Details
<b>a</b> 111
Commencement date: 18/12/2015 Duration of licence: 02/05/2020
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Households 13 Persons 13
Information referred to a residential property tribunal or Lands Tribunal:
None
Decision of Tribunal Reference number
Summary of conditions of licence

Additional facilities, Fire alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO -Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other fire works



#### Licence No.

#### 2015/04967/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

56A Preston Road Brighton BN1 4QF

Ward

Preston Park

Name & Address of Lice	nce Holder	
Mr Ashley Bennett, 204 Church	ch Road Hove East Sussex BN3 2DJ	
Name & Address of Pers	bn Managing	
,		
Dranauty Description		
Property Description	d LIMO (No of storous ats)	
Short description of license	•	
Property Type = SHARED HC	DUSE, No of Units = 1, Occupancy = 6, No of Storeys = 4	
Number of Rooms	Total Number of Rooms 10	
a) Sleeping 6	b) Living Rooms	
,	, ,	
Number of Self Contained F	lats: 0 Number of Non Self Co	ont. Flats:
Tunner or con contamour		011111111111111111111111111111111111111
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Licence Details		
Commencement date:	16/06/2016 Duration of licence:	20/09/2020
Maximum number of persor	ns or households permitted to occupy HMO under con	ditions of licence:
Households 6	Persons 6	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference nur	mber
Summary of conditions of I		
	, HMO - Fire Blanket, HMO - Fire Doors 5, HMO - Fire Ma	indatory conds, HMO

HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Doors 5, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Kitchen 3, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs



#### Licence No.

#### 2015/04999/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

89 Hanover Terrace Brighton BN2 9SP

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder		
Mr Jamil Alqadhi, 19 Ditton Ro	oad Surbiton Surrey KT6 6F	RE	
Name & Address of Perso	on Managing		
Mr Jim Quintana, Q Sales Let	tings 195 Lewes Road Brig	ghton BN2 3LA	
Property Description			
Short description of license	d HMO (No of storeys, etc	c)	
Property Type = SHARED HO	USE, No of Units = 1, Occ	upancy = 6, No of Storeys = 4	
Nhan af Danser	Tatal Namela an of F	<b>.</b>	
Number of Rooms	Total Number of R		
a) Sleeping 5	b) Livin	g Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fl	ats: 0
Shared Amenities	Number Descrip	otion	
a) Kitchen	1		
b) Bathrooms/Showers c) W.C.s	2 2		
0) 11.0.0			
Licence Details			
Commencement date:	20/11/2015	Duration of licence:	23/03/2020
Maximum number of person	s or households permitte	ed to occupy HMO under conditions	s of licence:
	_		
Households 6	Persons 6		
Information referred to a	residential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	00000		
Summary of conditions of li- HMO - Elec Mandatory conds,		nds, HMO - Furniture Mandatory cond	ls, HMO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/05057/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

24 Franklin Street Brighton BN2 3AL

Ward

Hanover And Elm Grove

Name & Address of Licence	e Holder		
Ms Susie Strachan, 18 Aymer I			
Name & Address of Perso	n Managing		
Mr Ian Wilkinson, 24 Elm Grove	Brighton BN2 3DD		
Durananta Daganiatian			
Property Description  Short description of licensed	HMO (No of storous	otc)	
•		•	
Property Type = SHARED HOC	JSE, NO OI OIIIIS = 1, O	occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number o	of Rooms 6	
a) Sleeping 5	b) Li	ving Rooms 1	
Number of Self Contained Fla	nts: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description 1 1 2	cription	
Licence Details			
Commencement date:	11/07/2016	Duration of licence:	27/09/2020
Maximum number of persons	or households perm	itted to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Information referred to a r	esidential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic HMO - Elec Mandatory conds,		MO - Fire Mandatory conds, HMO - Furnit	ture

HMO - Elec Mandatory conds, HMO - Fire Doors 4, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Ventilation 2, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/05076/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

47 St Pauls Street Brighton BN2 3HR

Ward

St. Peter's And North Laine

Name & Address of Licence	Holder		
Haydan Ltd, 1 Selborne Road Hov	ve East Sussex BN3 1AJ		
Name & Address of Person I	Managing		
Mr Dan Lyons, 21 Bramber Road	Seaford BN25 1AG		
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Occup	ancy = 7, No of Storeys = 4	
		•	
Number of Rooms	Total Number of Ro	oms 8	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flats	s: 0
	lumber Descripti	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
		,	
Commencement date:	08/12/2015	Duration of licence:	28/09/2020
Maximum number of persons o	r households nermitted	to occupy HMO under conditions of	of licence:
		to cocupy rimo under conditions t	51 11001100.
Households 7 Po	ersons 7		
Information referred to a res	idential property tribi	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
0			

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/05084/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

78A Elm Grove Brighton BN2 3DD

Ward

Hanover And Elm Grove

Name & Address of Licence	e Holder		
Mr. Anwar Osman, 45 Goldstone	Villas Hove East Sussex E	BN3 3RT	
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed I	HMO (No of storevs. etc)		
Property Type = SHARED HOUS	•	ancy = 5. No of Storevs = 4	
Number of Rooms	Total Number of Roc	oms 6	
a) Sleeping	b) Living F	Rooms	
Number of Self Contained Flat	ts: 0	Number of Non Self Cont. Flat	s: 0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description	on	
Licence Details			
	20112/52:2	::	
Commencement date:	08/12/2015	Duration of licence:	28/09/2020
Maximum number of persons	or households permitted	to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Information referred to a re	sidential property tribu	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/05086/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

3-4 East Street Brighton BN1 1HP

Ward

Regency

Name & Address of Licenc	e Holder		
Ms Cheryl McDonnell, 44 Wood	and Avenue Hove BN3 6BL		
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOU	SE, No of Units = 5, Occupar	cy = 9, No of Storeys = 5	
Number of Dooms	Total Number of Door	E	
Number of Rooms Total Number of Rooms 5			
a) Sleeping	b) Living Ro	ooms	
		7	_
Number of Self Contained Flat	ts: 0	Number of Non Self Cont. Flats:	0
Shared Amenities	Number Description		
a) Kitchen	Number Description		
b) Bathrooms/Showers			
c) W.C.s			
0) 11.0.0			
Licence Details			
Commencement date:	11/01/2016	Duration of licence:	17/06/2020
Maximum number of persons	or households permitted to	occupy HMO under conditions of	licence:
Households 9	Persons 9		
Information referred to a re	sidential property tribun	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
0			

Summary of conditions of licence

Gas, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - General 1, HMO - General 7, HMO - General Electrical 1, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Other Fire Works, Timescales, structural Fire works



#### Licence No.

#### 2015/05114/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

14 Bernard Road Brighton BN2 3EQ

Ward

Hanover And Elm Grove

Name & Address of Licence	Holder		
		Wooton Under Edge Gloucestersh	ire GL12 7QZ
Name & Address of Person	Managing		
G4 Lets, 2 Hythe Road Brighton	BN1 6JS		
Property Description			
Short description of licensed H	IMO (No of storeys, etc)		
Property Type = SHARED HOUS	SE, No of Units = 1, Occupar	ncy = 7, No of Storeys = 3	
Number of Rooms	Total Number of Roon	ns 9	
a) Sleeping	b) Living Ro	noms	
u) 5.55pg	<i>5)</i>		
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Flats	s: 0
		J	
Shared Amenities	Number Description	ı	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
		г	
Commencement date:	10/03/2016	Duration of licence:	12/10/2020
Maximum number of persons of	or households permitted to	occupy HMO under conditions o	of licence:
Households 7 F	Persons 7		
Information referred to a res	sidential property tribun	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Electrical certificates, Gas certificates, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/05125/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 22C Sillwood Street Brighton BN1 2PS

Ward

Regency

Name & Address of Licence	Holder		
Mr John Standing, 6 Barrowfield	Close Hove BN3 6TP		
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed H	IMO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Occupa	ancy = 9, No of Storeys = 3	
Number of Rooms	Total Number of Roo	ms 7	
a) Sleeping	b) Living R	COOMS	
N			
Number of Self Contained Flats	<b>S</b> : 0	Number of Non Self Cont. Flats:	0
Shared Amenities	Number Description	n	
a) Kitchen	Tumber Description	···	
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	01/04/2016	Duration of licence:	30/09/2020
Commencement date.	01/04/2010	Duration of ficence.	30/09/2020
Maximum number of persons of	or households permitted t	o occupy HMO under conditions of I	icence:
Households 9 P	Persons 9		
1			
Information referred to a res	sidential property tribu	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licer	100		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/05130/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

9 Fairlight Place Brighton BN2 3AH

Ward

Hanover And Elm Grove

Name & Address of Licenc	e Holder			
Mr Patrick Spiers, The Old Meeting House Church Walk Torrington Devon EX38 8HS				
Name & Address of Persor	n Managing			
Kendrick Property Services Ltd,	10-12 Lewes Road Brighton BN2 3HP			
Property Description				
Short description of licensed	HMO (No of storeys, etc)			
Property Type = Not Assigned, I	No of Units = 1, Occupancy = 5, No of Storeys = 4			
Number of Rooms	Total Number of Rooms 6			
a) Sleeping 5	b) Living Rooms 1			
Number of Self Contained Fla	ts: 0 Number of Non Self Cont.	Flats: 0		
Shared Amenities	Number Description			
a) Kitchen	1			
b) Bathrooms/Showers	2			
c) W.C.s	2			
Licence Details				
Commencement date:	17/05/2016 Duration of licence:	30/09/2020		
Maximum number of persons	or households permitted to occupy HMO under condition	ns of licence:		
-		ns of licence:		
-	or households permitted to occupy HMO under condition  Persons 5	ns of licence:		
Households 5		ns of licence:		
Households 5	Persons 5	ons of licence:		
Households 5 Information referred to a re	Persons 5			

Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/05150/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

34 Buckingham Place Brighton BN1 3PJ

Ward

St. Peter's And North Laine

Name & Address of Licence Holder		
The Consolata Fathers, 3 Salisbury Avenue Fin	nchley London N3 3AJ	
Name & Address of Person Managing		
Jonathan Rolls Managing Agents, 244 Eastern	Road Brighton BN2 5TA	
Property Description	arava atal	
Short description of licensed HMO (No of sto		
Property Type = SHARED HOUSE, No of Units	s = 2, Occupancy = 7, No of Storeys = 5	
Number of Rooms Total Nur	mber of Rooms 14	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	0
Shared Amenities Number	Description	
a) Kitchen		
b) Bathrooms/Showers c) W.C.s		
Licence Details		
Commencement date: 22/12/20	Duration of licence:	23/05/2020
Commencement date: 22/12/20	Duration of licence:	23/05/2020
Maximum number of persons or households	s permitted to occupy HMO under conditions of I	icence:
Households 7 Persons	7	
	· ·	
Information referred to a residential pro	perty tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence		

Additional facilities, Fire alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2015/05209/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

3 Eaton Gardens Hove BN3 3TL

Ward

Goldsmid

Name & Address of Licence	e Holder		
Mr James Doody, Flat A 16 The	Drive Hove BN3 3JA		
Name & Address of Person	n Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOL	JSE, No of Units = 11, Occi	upancy = 12, No of Storeys = 4	
Number of Rooms	Total Number of Ro	ooms 11	
a) Sleeping	b) Living	Rooms	
			_
Number of Self Contained Fla	its: 0	Number of Non Self Cont. Flat	ts: 0
		_	
Shared Amenities	Number Descript	ion	
a) Kitchen			
b) Bathrooms/Showers c) W.C.s			
c) vv.c.s			
Licence Details			
Commencement date:	15/03/2016	Duration of licence:	06/10/2020
Maximum number of persons	or households permitted	I to occupy HMO under conditions	of licence:
		to cocupy time under conditions	
Households 12	Persons 12		
Information referred to a re	esidential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
0			

Summary of conditions of licence

Additional Facilities, Additional facilities, Fire alarms, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - General 1, HMO - General 6, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Management/repairs, Not Assigned, Other fire works



#### Licence No.

#### 2015/05295/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

7A Hove Park Villas Hove BN3 6HP

Ward

Goldsmid

Name & Address of Licen	ce Holder		
Mr Keith Upton, 47 Kingsley R	oad Brighton BN1 5NH		
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	d HMO (No of storeys, etc	c)	
Property Type = SHARED HO	USE, No of Units = 6, Occ	upancy = 6, No of Storeys = 4	
Number of Doses	Total Number of F	Doomo 6	
Number of Rooms	Total Number of F		
a) Sleeping	b) Livin	g Rooms	
	<del></del>		1
Number of Self Contained FI	ats: 0	Number of Non Self Cont. Flat	s: 0
Shared Amenities	Number Descrip	otion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	05/02/2016	Duration of licence:	11/07/2020
waximum number of person	s or nousenolds permitte	ed to occupy HMO under conditions	OT IICENCE:
Households 6	Persons 6		
Information referred to a	residential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie	cence		

Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO -Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO -Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/05298/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

6 Bentham Road Brighton BN2 9XD

Ward

Hanover And Elm Grove

Name & Address of Licen		
Mr Peter McHugh, 21 Glendor	Road Hove BN3 4LP	
Name & Address of Perso	n Managing	
,		
Property Description		
Short description of licenses	HMO (No of storous atc)	
•		Otenna
Property Type = SHARED HO	USE, No of Units = 1, Occupancy = 5, No of	Storeys = 3
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 5	b) Living Rooms 1	
,	, 3	
Number of Self Contained Fl	ats: 0 Number of	f Non Self Cont. Flats: 0
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Commencement date:	17/05/2016 <b>Duratio</b> r	n of licence: 10/10/2020
	11700/2010	13/10/2020
Maximum number of person	s or households permitted to occupy HM0	O under conditions of licence:
Households 5	Persons 5	
<u> </u>	<u> </u>	
Information referred to a	esidential property tribunal or Lands	Tribunal:
None		
Decision of Tribunal	Re	eference number
Summary of conditions of lie	ence	
	HMO - Fire Mandatory conds, HMO - Furnit	ure Mandatory conds, HMO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Ventilation 2, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/05321/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 35 Baker Street Brighton BN1 4JN

Ward

St. Peter's And North Laine

Name & Address of Licence Holder		
M & G Properties (Sussex) Ltd, Saxon Down Cui	ilfail Lewes BN7 2BE	
Name & Address of Person Managing		
Coapt Ltd, 108A Lewes Road Brighton BN2 4AE		
Property Description		
Short description of licensed HMO (No of stor	• • •	
Property Type = SHARED HOUSE, No of Units =	= 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms Total Num	ber of Rooms 7	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	0
	Description	
a) Kitchen		
b) Bathrooms/Showers c) W.C.s		
C) VV.O.3		
Licence Details		
Licence Details  Commencement date: 21/01/201	6 Duration of licence:	20/08/2019
Commencement date: 21/01/201	6 Duration of licence: permitted to occupy HMO under conditions of	
Commencement date: 21/01/201  Maximum number of persons or households	permitted to occupy HMO under conditions of	
Commencement date: 21/01/201		
Commencement date: 21/01/201  Maximum number of persons or households	permitted to occupy HMO under conditions of	
Commencement date: 21/01/201  Maximum number of persons or households   Households   6   Persons	permitted to occupy HMO under conditions of	
Commencement date: 21/01/201  Maximum number of persons or households   Households 6 Persons  Information referred to a residential prop	permitted to occupy HMO under conditions of	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/05336/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

11 Park Crescent Road Brighton BN2 3HT

Ward

St. Peter's And North Laine

Name & Address of Licence Holde	r	
Ms Caroline Salkeld, Norwood Southdow		
Name & Address of Person Manag	ing	
John Hilton Estate Agents, 127 Lewes Ro	pad Brighton BN2 3LG	
Property Description	of storough stol	
Short description of licensed HMO (No		
Property Type = SHARED HOUSE, No o	f Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms Tot	tal Number of Rooms 6	
a) Sleeping 5	b) Living Rooms	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats	: 0
Shared Amenities Number	Description	
a) Kitchen 1 b) Bathrooms/Showers 1		
c) W.C.s		
Licence Details		
Commencement date: 15	5/10/2015 Duration of licence:	14/10/2020
Maximum number of persons or house	eholds permitted to occupy HMO under conditions o	f licence:
Households 5 Persons	5	
	al property tribunal or Lands Tribunal:	
None  Decision of Tribunal	Defense a serie to	
Decision of Tribunal	Reference number	
<b>Summary of conditions of licence</b> HMO - Elec Mandatory conds, HMO - Fin	e Mandatory conds, HMO - Furniture Mandatory conds,	HMO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/05350/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 25 Brunswick Place Hove BN3 1ND

Ward

Brunswick And Adelaide

Name & Address of Licence	o Holdov		
		-	
Mr Bashir Ahmed, 80 Dyke Roa	a Avenue Brighton BN1 5L		
Nama & Address of Dayson	Monoging		
Name & Address of Person		2040	
Mr Alexander Raheem, 83 Pank	nurst Avenue Brighton Biv	2 9AD	
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = BEDSIT, No of	Units = 15. Occupancy = 1	8. No of Storevs = 6	
	· · · · · · · · · · · · · · · · · · ·	.,	
Number of Rooms	Total Number of Ro	oms 17	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Fla	<b>ts</b> : 0	Number of Non Self Cont. Flats:	0
Shared Amenities	Number Descripti	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Licence Details			
Commencement date:	09/03/2016	Duration of licence:	12/10/2020
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
		to occupy rime under conditions of	
Households 18	Persons 18		
Information referred to a re	scidential property tribe	unal ar Landa Tribunal	
Information referred to a re	sidential property tribi	inar or Lanus Tribunai:	
None  Decision of Tribunal		Potoronoo number	
Decizion di Tunniai		Reference number	
Summary of conditions of lies	noo		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/05462/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Darwin House 31 Selborne Road Hove BN3 3AL

Ward

Brunswick And Adelaide

Name & Address of Licence	Holder		
L3H Ltd, 204 Church Road Hove	BN3 2DJ		
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed H	MO (No of storeys, etc	<b>:</b> )	
Property Type = BEDSIT, No of U	Jnits = 8, Occupancy = 8	3, No of Storeys = 4	
		_	
Number of Rooms	Total Number of R	ooms 8	
a) Sleeping	b) Living	g Rooms	
Number of Self Contained Flats	<b>::</b> 0	Number of Non Self Cont. Flat	s: 0
Shared Amenities N	Number Descrip	tion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Licence Details			
Commencement date:	16/03/2016	Duration of licence:	19/10/2020
Maritim and the second and the second		1110	
maximum number of persons o	r nousenoids permitte	d to occupy HMO under conditions	of licence:
Households 8 P	ersons 8		
Information referred to a res	idential property tril	ounal or Lands Tribunal:	
None			
Decision of Tribunal		D. (	
		Reference number	

#### Summary of conditions of licence

Additional facilities, Fire alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



Licence No.

2015/05473/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

8 Grafton Street Brighton BN2 1AQ

Ward

Queen's Park

Name & Address of Lice		
Ms Karen Dodd, Old School I	House Offham Sussex BN7 3QB	
Name & Address of Pers	on Managing	
,		
Dranauty Description		
Property Description	ad HMO (No of storous etc)	
Short description of license		
Property Type = BEDSIT, No	of Units = 6, Occupancy = 8, No of Storeys = 4	
Number of Rooms	Total Number of Rooms 9	
a) Sleeping 7	b) Living Rooms 6	
, , ,	, 3	
Number of Self Contained F	Flats: 0 Number of Non	Self Cont. Flats: 0
rumbor or com comumou i	Tunion of Non	
Shared Amenities	Number Description	
a) Kitchen	6	
b) Bathrooms/Showers	3	
c) W.C.s	3	
Licence Details		
Licence Details		
Commencement date:	06/01/2016 <b>Duration of lid</b>	cence: 26/09/2020
Maximum number of perso	ns or households permitted to occupy HMO und	ler conditions of licence:
Households 8	Persons 8	
Information referred to a	residential property tribunal or Lands Tribu	unal:
None		
Decision of Tribunal	Referen	nce number
Summary of conditions of I	icence	
	s, HMO - Fire Mandatory conds, HMO - Furniture Ma	andatory conds, HMO -

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Ventilation 3, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Other Fire Works, Other Fire works



#### Licence No.

#### 2015/05475/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

110 Queens Park Road Brighton BN2 0GG

Ward

Queen's Park

Name & Address of Licence	Holder		
		Green Lane Horley Surrey RH6 8JA	
·	<u>.                                      </u>	, ,	
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed H			
Property Type = Not Assigned, No.	o of Units = 1, Occupand	sy = 6, No of Storeys = 4	
Number of Rooms	Total Number of Ro	ooms 8	
a) Sleeping	b) Living	Rooms	
	, ,		
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flat	:s: 0
Shared Amenities N	Number Descript	tion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	14/12/2015	Duration of licence:	21/02/2020
Maximum number of persons o	r households permitte	d to occupy HMO under conditions	of licence:
Hamakalda O B			
Households 6 P	ersons 6		
Information referred to a res	idential property trib	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/05486/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

15 Hastings Road Brighton BN2 3AF

Ward

Hanover And Elm Grove

Name & Address of Licence Holder				
Mrs Alison Haagman, 153 Lewes Road Brighton BN2 3LG				
Name & Address of Person Managing				
Hove Lets Ltd, C/o Parkers Cornelius House 178-180 Church Road Hove BN3 2DJ				
Property Description				
Short description of licensed HMO (No of storeys, etc)				
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3				
Number of Rooms 7 Total Number of Rooms 8				
a) Sleeping b) Living Rooms 1				
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1				
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s  Number Description  1  c) Wescription				
Licence Details				
Commencement date: 18/05/2016 Duration of licence: 19/08/2020				
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
Households 5 Persons 5				
Information referred to a residential property tribunal or Lands Tribunal:				
None				
Decision of Tribunal Reference number				
Summary of conditions of licence HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas				

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/05507/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

1 Shaftesbury Road Brighton BN1 4NE

Ward

St. Peter's And North Laine

Name & Address of Licen			
Mr Alfred Haagman, 153 Lewe	s Road Brighton BN2 3	BLG	
Name & Address of Perso			
Hove Lets Ltd, C/o Parkers Co	ornelius House 178-18	O Church Road Hove BN3 2DJ	
Property Description			
Short description of license	d HMO (No of storeys,	, etc)	
Property Type = SHARED HO	USE, No of Units = 1, (	Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number	of Rooms 6	
a) Sleeping 6	D) L	iving Rooms 1	
			_
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Flats:	0
Shared Amenities		cription	
a) Kitchen     b) Bathrooms/Showers	2		
c) W.C.s	2		
,			
Licence Details			
•	0.4/0.5/0.04.0	¬	40/00/0000
Commencement date:	24/05/2016	Duration of licence:	19/08/2020
Maximum number of person	s or households pern	nitted to occupy HMO under conditions of	icence:
Households 6	Persons 6		
nousellolus	Persons 0		
Information referred to a	residential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licence HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Doors 5, HMO - Fire Mandatory conds, HMO			

HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Doors 5, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/05525/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

33 Selborne Road Hove BN3 3AL

Ward

Brunswick And Adelaide

Name & Address of Licen	ice Holder		
L3H Ltd, 204 Church Road Ho	ove BN3 2DJ		
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license			
Property Type = BEDSIT, No	of Units = 7, Occupancy = 7,	No of Storeys = 4	
Number of Rooms	Total Number of Ro	oms 7	
a) Sleeping	b) Living	Rooms	
a, 6.66pg	3) <u>-</u> g		
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ts: 0
Trainibor of Con Contamour	0	Number of Non Con Cont. The	0
Shared Amenities	Number Descripti	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	16/03/2016	Duration of licence:	21/10/2020
Maximum number of person	is or households permitted	to occupy HMO under conditions	of licence:
Households 7	Persons 7		
Information referred to a	residential property tribu	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, fire alarms, structural fire works



#### Licence No.

#### 2015/05530/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

13A Lewes Road Brighton BN2 3HP

Ward

St. Peter's And North Laine

Name & Address of Licence Holder	
Mr Michael Massingham, Nought South Way Lewes BN7 1LX	
Name & Address of Person Managing	
,	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = , Occupancy = 6, No of Storeys = 3	
Number of Rooms Total Number of Rooms	
a) Sleeping b) Living Rooms	
2, 2g	
Number of Self Contained Flats: 0 Number of Non Self Cont	. Flats: 0
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers c) W.C.s	
5, 11.6.6	
Licence Details	
45/94/949	0.4.4.0.40.00
Commencement date: 15/01/2016 Duration of licence:	31/10/2020
Maximum number of persons or households permitted to occupy HMO under conditi	ions of licence:
Households 6 Persons 6	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	er
Summary of conditions of license	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/05669/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

53 Barcombe Road Brighton BN1 9JR

Ward

Moulsecoomb And Bevendean

Name & Address of Licence Holder	
Dr Ryan Scott, First Floor Flat 4 Rugby Road Brighton BN1 6EB	
Name & Address of Person Managing	
Home James Residential Lets Ltd T/as Home James Lets, Kingsway 134-140 Church Road Hove	East Sussex
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 7, No of Storeys = 3	
Number of Rooms Total Number of Rooms 7	
a) Sleeping b) Living Rooms	
Notice to the control of the control	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats:	0
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s	
Licence Details	
Commencement date: 27/04/2016 Duration of licence:	28/10/2020
Maximum number of persons or households permitted to occupy HMO under conditions of	licence:
Households 7 Persons 7	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of license	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/05675/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

31 Marlborough Place Brighton BN1 1UA

Ward

St. Peter's And North Laine

Name & Address of Licer	ice Holder		
Hovepark Lettings, 56 Hamilto	on Street Saltcoats Ayrshire	KA21 5DS	
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, etc	)	
Property Type = SHARED HC	USE, No of Units = 1, Occu	pancy = 6, No of Storeys = 3	
		_	
Number of Rooms	Total Number of Ro	ooms 7	
a) Sleeping 6	b) Living	Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ats: 1
Shared Amenities	Number Descript	tion	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	3		
Licence Details			
Commencement date:	06/01/2016	Duration of licence:	29/10/2020
Maximum number of person	s or households permitted	d to occupy HMO under conditions	s of licence:
Households 0	Persons 6		
•			
Information referred to a	residential property trib	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	conco		
		hen, HMO - Elec Mandatory conds,	HMO - Fire
Blanket, HMO - Fire Emergen	cy Lighting 1, HMO - Fire M	andatory conds, HMO - Fire Notices	1, HMO - Fire

Additional Facilities, Electrical Works, Enlargement of Kitchen, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Emergency Lighting 1, HMO - Fire Mandatory conds, HMO - Fire Notices 1, HMO - Fire Recessed Lighting, HMO - Fire Test Certificates, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Loft Insulation, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Heating, Management / Repairs, Mangement / Repairs, Structural Fire Works





#### Licence No.

#### 2015/05724/HMO/PS

#### **REGISTER ENTRY FOR** (Address of licensed HMO)

70 Hova Villas Hove BN3 3DG

Ward

Central Hove

Name & Address of Licen	ce Holder
Mrs Susan Winter, 6 Nevill Wa	y Hove BN3 7QL
Name & Address of Perso	n Managing
Mr David Winter, 6 Nevill Way	Hove BN3 7QL
Property Description	
Short description of license	d HMO (No of storeys, etc)
Property Type = BEDSIT, No o	of Units = 11, Occupancy = 15, No of Storeys = 3
Number of Rooms	Total Number of Rooms 11
a) Sleeping 11	b) Living Rooms
a) Siceping 11	b) Living Noonis
Number of Self Contained Fl	ats: 0 Number of Non Self Cont. Flats: 1
Number of Self Contained Fi	ats: 0 Number of Non Self Cont. Flats: 1
Shared Amenities	Number Description
a) Kitchen	11
b) Bathrooms/Showers	3
c) W.C.s	3
Licence Details	
Commencement date:	13/10/2016 <b>Duration of licence:</b> 02/11/2020
Maximum number of person	s or households permitted to occupy HMO under conditions of licence:
Haveahalda 45	Damana 45
Households 15	Persons 15
Information referred to a	residential property tribunal or Lands Tribunal:
None	
Decision of Tribunal	Reference number
Fire Test Certificates, HMO - F	cence ec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing y Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -

Repairs Bathroom 17, HMO - Repairs Heating 5, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs



#### Licence No.

#### 2015/05851/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

9 Medina Villas Hove BN3 2RJ

Ward

Central Hove

Name & Address of Licence	Holder		
Mr Michael Paul Jameson, Weste	rn House 96 Western	Road Hove BN3 1FA	
Name & Address of Person I	Managing		
,			
Property Description			
Short description of licensed HI	MO (No of storeys, e	etc)	
Property Type = BEDSIT, No of U	nits = 8, Occupancy =	= 14, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 8	
a) Sleeping	b) Liv	ing Rooms	
Number of Self Contained Flats	. 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s	lumber Descr	ription	
Licence Details			
		1	
Commencement date:	15/03/2016	Duration of licence:	24/10/2020
Maximum number of persons of	r households permit	tted to occupy HMO under conditions	of licence:
Households 14 Pe	ersons 14		
Information referred to a res	dential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licen-	ce		

Elec Mandatory Conditions, Flre Doors, Fire Cupboards, Gas Safety, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Heating, Not Assigned



#### Licence No.

#### 2015/06020/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

22 New England Road Brighton BN1 3TU

Ward

Preston Park

Name & Address of Licence	Holder	
Mr David Symons, 110A St Jame		
IVII David Symons, 110A St Jame	SS Street Dilgition DNZ 1111	
Name & Address of Person	Managing	
name a Address of Ferson	managnig	
,		
Property Description		
Short description of licensed H	MO (No of storeys, etc)	
·	E, No of Units = 1, Occupancy = 7, No of Storeys =	- 2
Troperty Type - STIAINED 11003	E, No of Office - 1, Occupancy - 1, No of Storeys -	- 3
Number of Rooms	Total Number of Rooms 8	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flats	s: 0 Number of Non Sel	f Cont. Flats:
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Commencement date:	12/12/2016 Duration of licen	<b>ce:</b> 17/11/2020
Commencement date.	12/12/2010 Duration of licen	Ce. 17/11/2020
Maximum number of persons of	or households permitted to occupy HMO under o	conditions of licence:
Households 7 P	ersons 7	
nousellolus / P	ersons /	
Information referred to a res	sidential property tribunal or Lands Tribuna	al:
None		
Decision of Tribunal	Reference	number
Summary of conditions of licer	ice	

HMO - Elec Mandatory conds, HMO - Fire Doors 4, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/06065/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

41 Holland Road Hove BN3 1LG

Ward

Brunswick And Adelaide

Name & Address of Licen	ice Holder		
A.J.D.A. Delicata Partnership,	167 South Lambeth	n Road London SW8 1XW	
Name & Address of Perso	n Managing		
Mr David Delicata, Abbey Hote	el 14-19 Norfolk Terr	race Brighton BN1 3AD	
Property Description			
Short description of license	d HMO (No of store	eys, etc)	
Property Type = BEDSIT, No	of Units = 18, Occup	pancy = 18, No of Storeys = 5	
Number of Rooms	Total Numb	er of Rooms 21	
a) Sleeping	L	b) Living Rooms	
Number of Self Contained F	late:	0 Number of Non Self Cont. Fla	ts:
Number of Sen Contained Fi	ats.	Number of Non-Sen Cont. Fla	15.
Shared Amenities	Number D	Description	
a) Kitchen	9		
b) Bathrooms/Showers	3		
c) W.C.s	3		
Licence Details			
Commencement date:	15/04/2016	Duration of licence:	10/02/2020
Maximum number of person	is or households no	ermitted to occupy HMO under conditions	of licence:
Households 18	Persons 18	8	
Information referred to a	residential prope	rty tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li		LIMO Fire Mandatory condo LIMO Furnite	uro Mandatony

Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/06423/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

83 Upper Lewes Road Brighton BN2 3FF

Ward

St. Peter's And North Laine

Name & Address of Licence Holder		_
Mr Luke Beard, 4 Morecambe Road Brighton	n Fast Sussex BN1 8TI	
The Edito Board, Timorescambe Read Brighton	T Last Gassox Bit 1 6 T L	
Name & Address of Person Managing		
,		
Property Description		
Short description of licensed HMO (No of	storeys, etc)	
Property Type = SHARED HOUSE, No of Ur	nits = 1, Occupancy = 5, No of Storeys = 3	
Number of Booms Total N	dumber of Decree 7	
	Number of Rooms 7	
a) Sleeping 5	b) Living Rooms 1	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	1
Ohamad Amanikiaa	Paraminting.	
Shared Amenities Number a) Kitchen 1	Description	
b) Bathrooms/Showers 1		
c) W.C.s		
2		
Licence Details		
10/02	(0040 D	00/40/0000
Commencement date: 10/02	/2016 Duration of licence:	03/12/2020
Maximum number of persons or househo	lds permitted to occupy HMO under conditions of li	icence:
Households 0 Persons	5	
nouseriolas 0 Persons	5	
Information referred to a residential p	roperty tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence		
	andatory conds. HMO - Furniture Mandatory conds. HM	MO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/06428/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

13 Pembroke Crescent Hove BN3 5DH

Ward

Westbourne

Name & Address of Licence	Holder		
Mr R Pietraszko, 47 Sillwood Roa	ad Brighton BN1 2LE		
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed H	IMO (No of storevs. e	etc)	
Property Type = BEDSIT, No of U	-		
Property Type – BEDSIT, NO OF	Tills – 7, Occupancy -	- 7, No of Stoleys - 3	
Number of Rooms	Total Number of	Rooms 7	
a) Sleeping	h) Liv	ing Rooms	
a) Siceping	D) LIV	ing Noonis	
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number Desci	ription	
a) Kitchen	2		
b) Bathrooms/Showers	3		
c) W.C.s	3		
Licence Details			
	07/00/0047	]	00/10/000
Commencement date:	07/06/2017	Duration of licence:	29/12/2020
Maximum number of persons of	or households permit	tted to occupy HMO under conditions	of licence:
Households 7 P	Persons 7		
Information referred to a res	idential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licer	100		
Juninary of Conditions of licer	100		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Kitchen 4, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Heating 5, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, additional facilities



#### Licence No.

#### 2015/06459/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

73 Roundhill Crescent Brighton BN2 3GP

Ward

St. Peter's And North Laine

Name & Address of Licence		
Mr Nick Lowe Mrs Ester Pye, 28	Southville Road Thames Ditton Surrey KT7 0UL	
Name & Address of Person I		
G4 Lets, 2 Hythe Road Brighton B	N1 6JS	
Property Description		
Property Description  Short description of licensed HI	MO (No of storous atc)	
•	•	
Property Type = SHARED HOUSI	E, No of Units = 1, Occupancy = 6, No of Storeys = 4	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping 6	b) Living Rooms 1	
a) olooping	2) Living Noonie	
Number of Self Contained Flats	: 0 Number of Non Self Cont. F	lats: 0
Number of Self Contained Flats	Number of Non Seil Cont. F	iais: 0
Shared Amenities N	umber Description	
a) Kitchen	2	
b) Bathrooms/Showers	2	
c) W.C.s	3	
Licence Details		
0	40/00/0040	00/40/0000
Commencement date:	19/02/2016 Duration of licence:	06/12/2020
Maximum number of persons of	r households permitted to occupy HMO under condition	s of licence:
Households 6 Pe	ersons 6	
Information referred to a res	idential property tribunal or Lands Tribunal:	
None	asimal property tribunal of Editas Pribanal.	
Decision of Tribunal	Reference number	
Summary of conditions of licen- Additional Facilities, HMO - Elec N	<b>ce</b> ⁄landatory conds, HMO - Fire Mandatory conds, HMO - Furr	niture

Additional Facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/06464/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

55 Hartington Road Brighton BN2 3LJ

Ward

Hanover And Elm Grove

Name & Address of Licence	Holder		
Mr Andrew Marchant, Woodmans		k West Sussey GH30 7NF	
Will Andrew Warehant, Woodmans	green rann Einen Eiphoo	K West Sussex SGSO 7141	
Name & Address of Person	Managing		
G4 Lets Ltd, 2 Hythe Road Bright	5 5		
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Occup	ancy = 8, No of Storeys = 3	
Number of Decise	Total Number of Do	40	
Number of Rooms	Total Number of Ro		
a) Sleeping	b) Living	Rooms	
			_
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities N	lumber Descripti	on	
a) Kitchen	lumber Descripti	on	
b) Bathrooms/Showers			
c) W.C.s			
0) W.O.3			
Licence Details			
	20/20/20/		20//2/202
Commencement date:	09/02/2016	Duration of licence:	06/12/2020
Maximum number of persons o	r households permitted	to occupy HMO under conditions	of licence:
Hawaahalda O B			
Households 8 P	ersons 8		
Information referred to a res	idential property tribu	ınal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

#### Summary of conditions of licence

Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs



#### Licence No.

#### 2015/06481/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

4 Baden Road Brighton BN2 4DP

Ward

Moulsecoomb And Bevendean

Name & Address of Licen	ce Holder	
Mr Daniel Roper, 149 Caterha	m Drive Coulsdon Surrey CR5 1JQ	
Name & Address of Perso	on Managing	
Pavillion Properties Ltd, 127 L	ewes Road Brighton BN2 3LG	
Property Description		
Short description of license	d HMO (No of storeys, etc)	
Property Type = SHARED HO	USE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 5	b) Living Rooms 1	
		,
Number of Self Contained F	lats: 0 Number of Non Self Cont. Flats:	1
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Commencement date:	19/02/2016 Duration of licence:	23/12/2020
Maximum number of person	s or households permitted to occupy HMO under conditions of li	icence:
Households 0	Persons 5	
Tiouscrioius 0	Torsons	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of li	cence . HMO - Fire Mandatory conds. HMO - Furniture Mandatory conds. HM	MO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/06483/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

**Guernsey Hotel** 34 Oriental Place Brighton BN1 2LL

Ward

Regency

Name & Address of Licer	ice Holder		
01 Property Investment Ltd, T	he Old Factory 30-31 Devo	nshire Place Brighton BN2 1QB	
Name & Address of Person	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, etc	<b>c)</b>	
Property Type = BEDSIT, No	of Units = 14, Occupancy =	22, No of Storeys = 6	
Number of Decise	Total Number of P	Jaama 44	
Number of Rooms	Total Number of R		
a) Sleeping	b) Livin	g Rooms	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities	Number Descrip	tion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
0	00/40/0040	D. orthografilms	04/40/0000
Commencement date:	22/12/2016	Duration of licence:	21/12/2020
Maximum number of persor	s or households permitte	ed to occupy HMO under conditions	of licence:
Households 22	Persons 22		
Information referred to a	residential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	cence		

Additional Facilities, Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO -Property Maint Mandatory conds, HMO - Repairs Heating 5, HMO - RubbishRecyc Mandatory conds, HMO -Tenant Agrmnt Mandatory conds, Management, Other Fire Works



#### Licence No.

#### 2015/06626/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

9 Blaker Street Brighton BN2 0JJ

Ward

Queen's Park

Name & Address of Licence	Holder		
Mr Nicholas Muir, 11 Cranley Roa	ad Walton On Thames Sur	rey KT12 5BX	
Name & Address of Person	Managing		
Sure Property Solutions Ltd, 31 U	pper St James Street Brig	hton BN2 1JN	
Daniel Daniel Co.			
Property Description	MO (No of stamps ata)		
Short description of licensed H	-		
Property Type = SHARED HOUS	E, No of Units = 1, Occupa	ancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Roo	oms 5	
a) Sleeping	b) Living F	Rooms	
z) o.oopg	-,9		
Number of Self Contained Flats	:: 0	Number of Non Self Cont. Flats:	0
			<u> </u>
Shared Amenities	Number Description	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	18/10/2016	Duration of licence:	08/04/2020
Maximum number of persons of	r households permitted	to occupy HMO under conditions of	licence:
Households 5 P	ersons 5		
Information referred to a res	idential property tribu	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

#### Summary of conditions of licence

Additional facilities, Elec cert, Electrical works, Gas cert, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Not Assigned, other fire works



#### Licence No.

#### 2015/06645/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

43 Holland Road Hove BN3 1JE

Ward

Brunswick And Adelaide

Name & Address of Liceno	ce Holder		
Mr David Delicata, Abbey Hote	l 14-19 Norfolk Terrace E	Brighton BN1 3AD	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys, e	etc)	
Property Type = HMO Envelop	e - Bedsits, No of Units =	= 19, Occupancy = 19, No of Storeys = 6	
Number of Rooms	Total Number of	Rooms 19	
a) Sleeping	D) LIVI	ing Rooms	
Normalism of Calf Campains of Flo	47	Number of New Colf Court Flot	0
Number of Self Contained Fla	ats: 17	Number of Non Self Cont. Flat	s: 2
Shared Amenities	Number Descr	intion	
a) Kitchen	Number Descr	iption	
b) Bathrooms/Showers			
c) W.C.s			
,			
Licence Details			
Commencement date:	15/04/2016	Duration of licence:	10/02/2020
Commencement date.	13/04/2010	Duration of licence.	10/02/2020
Maximum number of persons	or households permit	ted to occupy HMO under conditions of	of licence:
Households 19	Persons 19		
10	10	1	
Information referred to a r	esidential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic	ence		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/06651/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

45 Holland Road Hove BN3 1JE

Ward

Brunswick And Adelaide

Name & Address of Licence			
Mr James Delicata, Abbey Hotel	14-19 Norfolk Terrace	Brighton BN1 3AD	
Name & Address of Person	Managing		
Mr David Delicata, Abbey Hotel 1	4-19 Norfolk Terrace I	Brighton BN1 3AD Brighton BN1 3AD	
Property Description	IMO (No of storous a	**a\	
Short description of licensed F	-	·	
Property Type = HMO Envelope	- Beasits, No of Units =	= 19, Occupancy = 19, No of Storeys = 6	
Number of Rooms	Total Number of	Rooms 19	
a) Sleeping	b) Livi	ing Rooms	
Number of Self Contained Flats	s: 17	Number of Non Self Cont. Flats	: 2
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Descr	ription	
Licence Details			
Commencement date:	15/04/2016	Duration of licence:	10/02/2020
Maximum number of persons	or households normit	tted to occupy HMO under conditions o	flicance
maximum number of persons of	induseriolus periili	-	i licelice.
Households 19 P	Persons 19		
Information referred to a res	sidential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licer	nce		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/06660/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

47 - 49 Holland Road Hove BN3 1JE

Ward

Brunswick And Adelaide

lame & Address of Licer	nce Holder	
.J.D.A. Delicata Partnership,	, 167 South Lambeth Road London SW8 1XW	
lame & Address of Pers	on Managing	
avid Delicata, Abbey Hotel 1	4-19 Norfolk Terrace Brighton BN1 3AD	
renerty Description		
Property Description	ed HMO (No of storeys, etc)	
•	, ,	
Toperty Type = HIMO Envelo	pe - Bedsits, No of Units = 41, Occupancy = 41, No of Storeys = 6	
umber of Rooms	Total Number of Rooms 41	
) Sleeping 41	b) Living Rooms 41	
umber of Self Contained F	lats: 31 Number of Non Self Cont. Flats	: 3
hared Amenities	Number Description	
) Kitchen ) Bathrooms/Showers	36	
) W.C.s	36	
icence Details		
ommencement date:	12/04/2016 Duration of licence:	10/02/2020
ommencement date.	12/04/2010 Buration of ficerice.	10/02/2020
aximum number of persor	ns or households permitted to occupy HMO under conditions o	f licence:
ouseholds 41	Persons 41	
nformation referred to a	residential property tribunal or Lands Tribunal:	
one		
ecision of Tribunal	Reference number	
ummary of conditions of li	i <b>cence</b> ec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture	e Mandatory

Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2015/06697/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

12/14 The Drive Hove BN3 3JA

Ward

Central Hove

Nous O Adduses of Lice	oo Haldan		
Name & Address of Licer			
Mr James Doody, 16 The Driv	'e hove bns sja		
Name & Address of Person	on Managing		
	ວາ <b>າ</b>		
,			
Property Description			
Short description of license	d HMO (No of storeys, etc	)	
Property Type = SHARED HC	OUSE, No of Units = 18, Occ	upancy = 20, No of Storeys = 4	
Number of Rooms	Total Number of R	ooms 20	
a) Sleeping 20	b) Livino	Rooms	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ats: 0
Number of Self Contained I	iats.	Number of Non Sen Cont. 1 is	0
Shared Amenities	Number Descrip	tion	
a) Kitchen	20		
b) Bathrooms/Showers	7		
c) W.C.s	10		
Licence Details			
Licence Details			
Commencement date:	06/05/2016	Duration of licence:	09/12/2020
Maximum number of persor	ns or households permitte	d to occupy HMO under conditions	s of licence:
Households 20	Persons 20		
nousenous 20	reisons 20		
Information referred to a	residential property tril	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Mandatory conds, HMO - Prop	, HMO - Fire Mandatory cor	ds, HMO - Furniture Mandatory cond ds, HMO - Property Maint Mandatory	

RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Other Fire works



#### Licence No.

#### 2015/06742/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 23 Norfolk Square Brighton BN1 2PD

Ward

Regency

				. 1393	
Name & Address of Licen					
Mr Mark Leclercq, 37 The Dow	ns London SW20	8HG			
Name & Address of Perso	n Managing				
Property Description					
Short description of licensed	d HMO (No of stor	reys, etc)			
Property Type = SHARED HO	USF. No of Units =	= 9. Occupan	cv = 13. No	of Storevs = 4	
1000113 1300 0111111125 110		o, occupan	10,110		
Number of Rooms	Total Num	ber of Roon	ıs 9		
a) Sleeping 9		b) Living Ro	oms	9	
,		, 0			
Number of Self Contained Fl	loto	0	Number	of Non Self Cont. Flats:	0
Number of Self Contained Fi	als.	U	Nulliber	of Non Sen Cont. Flats.	U
Shared Amenities		Description			
a) Kitchen b) Bathrooms/Showers	3				
c) W.C.s	5				
[					
Licence Details					
Commencement date:	18/05/201	16	Duratio	on of licence:	19/05/2020
Maximum number of person	s or households	permitted to	occupy HN	10 under conditions of I	icence:
Households 13	Persons	13			
Information referred to a i	residential prop	erty tribun	al or <u>Land</u> s	s Tribunal:	
None					
Decision of Tribunal			R	Reference number	
			·		
Summary of conditions of lid HMO - Elec Mandatory conds, conds, HMO - Furniture Manda	HMO - Fire Alarm				

conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural Fire Works



#### Licence No.

#### 2015/06746/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

387 Portland Road Hove BN3 5SG

Ward

Wish

Name & Address of Licence Holder	
Mr Stephen Hardwick, 204 Church Road Hove East Sussex BN3 2DJ	
Name & Address of Person Managing	
,	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = Not Assigned, No of Units = 6, Occupancy = 6, No of Storeys = 3	
, , , , , , , , , , , , , , , , , , ,	
Number of Rooms Total Number of Rooms 7	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	s: 0
Shared Amenities  Number  Description  a) Kitchen  b) Bathrooms/Showers c) W.C.s	
Licence Details	
Commencement date: 18/03/2016 Duration of licence:	21/12/2020
Maximum number of persons or households permitted to occupy HMO under conditions of	f licence:
Households 6 Persons 6	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2015/06757/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

71 Hillside Brighton BN2 4TF

Ward

Moulsecoomb And Bevendean

Name O Address 511	H-H	
Name & Address of Licence		
Ms Ruth Grier, 16 Freshfield Place	ce Brighton East Sussex BN2 0BN	
Name & Address of Person	Managing	
,		
<b>-</b>		
Property Description		
Short description of licensed F	IMO (No of storeys, etc)	
Property Type = SHARED HOUS	SE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flats	S: 0 Number of Non Self Cont. Flat	s: 0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description	
Licence Details		
Commencement date:	01/03/2016 <b>Duration of licence:</b>	21/12/2020
Maximum number of persons (	or households permitted to occupy HMO under conditions	of licence:
		or needles.
Households 5 P	Persons 5	
Information referred to a res	sidential property tribunal or Lands Tribunal:	
None	sidential property tribunal or Lands Tribunal:	
	Reference number	

Additinal facilities, Fire alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, STRUCTURAL FIRE WORKS



#### Licence No.

#### 2015/06758/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

54A Preston Road Brighton BN1 4QF

Ward

Preston Park

Name & Address of Licence	a Holder	
Mr Stephen Hardwick, 204 Churc	ch Road Hove East Sussex BN3 2DJ	
Name & Address of Person	Managing	
Name & Address of Person	managing	
,		
Property Description		
Short description of licensed I	HMO (No of storevs. etc)	
-	SE, No of Units = 5, Occupancy = 5, No of Storeys = 3	
Tropolty Typo Ormital Troot	se, no di cinto di coccapanto, di nicon etchologo	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flat	s: 0 Number of Non Self Cont. Flats	: 1
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Commencement date:	01/03/2016 Duration of licence:	21/12/2020
Maximum number of persons	or households permitted to occupy HMO under conditions o	f licence:
maximum number of persons	or nouseholds permitted to occupy rimo under conditions o	i licelice.
Households 5 F	Persons 5	
	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lice	nce	

Additional facilities, Fire alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Loft insulation, Structural fire works



#### Licence No.

#### 2016/00062/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

187 Hollingdean Terrace Brighton BN1 7HF

Ward

Hollingdean And Stanmer

Name & Address of Licer	ce Holder		
Mr Mark Leclercq, 37 The Dov	rns London SW20 8HG		
Name & Address of Perso	n Managing		
,			
Dranarty Description			
Property Description Short description of license	HMO (No of storous, atc)		
-	USE, No of Units = 6, Occupancy = 6	No of Storous = 2	
Property Type - SHARED HC		, NO OI Stoleys – 3	
Number of Rooms	Total Number of Rooms	6	
a) Sleeping 6	b) Living Rooms	1	
Number of Self Contained F	ats: 0 Nun	nber of Non Self Cont. Flats:	1
Shared Amenities	Number Description		
a) Kitchen b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	18/05/2016 <b>D</b>	uration of licence:	23/12/2020
Maximum number of person	s or households permitted to occu	py HMO under conditions of I	icence:
Households 6	Persons 6		
	residential property tribunal or l	Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li		Fire Planket HMO Fire Mane	latory

HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 6, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural Fire Works



#### Licence No.

#### 2016/00070/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

28 Islingword Street Brighton BN2 9UR

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder		
Ms Melanie Carter, Tamarchar	า House 11 Ranelagh Vill	las Hove BN3 6HE	
Name & Address of Perso	n Managing		
Mr David Hutcheson, 28 Isling	word Street Brighton BN2	2 9UR	
Property Description			
Short description of licensed	ાં HMO (No of storeys, લ	etc)	
Property Type = SHARED HO	USE, No of Units = 1, Oc	ccupancy = 5, No of Storeys = 4	
Number of Rooms	Total Number of	Rooms 5	
a) Sleeping	b) Liv	ing Rooms	
	<u></u>		
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Flats	.: 0
Shared Amenities	Number Descr	ription	
a) Kitchen	1	•	
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	26/05/2016	Duration of licence:	18/08/2020
Maximum number of person	s or households narmit	tted to occupy HMO under conditions o	f licence:
maximum number of persons	s or mousemonus permit	ice to occupy time under conditions o	i nocinoc.
Households 5	Persons 5		
Information referred to a r	residential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic	cence		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, STRUCTURAL FIRE WORKS



#### Licence No.

#### 2016/00152/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

51 Holland Road Hove BN3 1LG

Ward

Brunswick And Adelaide

Name & Address of Licen	ce Holder		
A.J.D.A. Delicata Partnership,	167 South Lambeth Road	d London SW8 1XW	
Name & Address of Perso	on Managing		
		4 24 D	
Mr James Delicata, 14-19 Nor	loik Terrace Brighton Biv	1 3AD	
Property Description			
Short description of license	d HMO (No of storeys, e	tc)	
Property Type = BEDSIT, No	of Units = 17, Occupancy	= 17, No of Storeys = 6	
,		•	
Number of Rooms	Total Number of	Rooms 17	
a) Sleeping	b) Livi	ng Rooms	
Number of Self Contained F	lats: 11	Number of Non Self Cont. Fla	its: 0
Shared Amenities	Number Descr	iption	
a) Kitchen	0		
b) Bathrooms/Showers	4		
c) W.C.s	4		
Licence Details			
Commencement date:	15/04/2016	Duration of licence:	10/02/2020
Maximum number of person	s or households permit	ted to occupy HMO under conditions	of licence:
Hawashalda 47	D		
Households 17	Persons 17		
Information referred to a	residential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	cence		

Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/00158/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

86 Upper Lewes Road Brighton BN2 3FF

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder	
Lindene GB Promotions Ltd, 1	2 Franklin Road Portslade East Sussex BN41 1AF	
Name & Address of Perso	on Managing	
,		
Property Description		
Short description of licensed	d HMO (No of storeys, etc)	
Property Type = SHARED HO	USE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
1 3 31	, , , , , , , , , , , , , , , , , , , ,	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping	b) Living Rooms	
Number of Self Contained Fl	lats: 0 Number of Non Self Cont. Flats:	0
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
0	40/00/0040	40/04/0004
Commencement date:	16/06/2016 Duration of licence:	12/01/2021
Maximum number of person	s or households permitted to occupy HMO under conditions of lic	cence:
-		
Households 6	Persons 6	
In Comment of the second		
	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / repairs



#### Licence No.

#### 2016/00248/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 6 Beaconsfield Road Brighton BN1 4QH

Ward

St. Peter's And North Laine

Name & Address of Licence Holder	
Ms Carly Houston, The Old Warehouse 2 Ashford Road Brighton East Sussex BN1 6LJ	
Name & Address of Person Managing	
Mr Andy Babbayan, The Old Warehouse 2 Ashford Road Brighton East Sussex BN1 6LJ	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 8, No of Storeys = 4	
Number of Rooms Total Number of Rooms 9	
a) Sleeping b) Living Rooms	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	s: 0
Number of Self Contained Flats:	· U
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers	
C) W.C.s	
Licence Details	
Commencement date: 21/04/2016 Duration of licence:	18/01/2021
Maximum number of persons or households permitted to occupy HMO under conditions o	f licence:
Households 8 Persons 8	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of licence	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/00297/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

27 Oriental Place Brighton BN1 2LL

			Ward	Regei	ncy
Name & Address of Licen	ce Holder				
Mr Michael Delicata & Ms Car	la Delicata, 16	67 South Lambeth F	Road London SV	V8 1XW	
Name & Address of Deve	n Manania				
Name & Address of Perso					
Mr James Delicata, 14 - 19 No	rfolk Terrace	Brighton BN1 3AD			
Property Description					
Short description of license	d HMO (No o	f storeys, etc)			
Property Type = BEDSIT, No o	•	• . ,	o of Storevs = 5		
Number of Rooms	Total	Number of Rooms	s 13		
a) Sleeping 5		b) Living Roo	ms 5		
Number of Self Contained F	lats:	0	Number of No	n Self Cont. Flats:	1
Shared Amenities	Number	Description			
a) Kitchen	5				
b) Bathrooms/Showers	2				
c) W.C.s	2				
Licence Details					
				-	
Commencement date:	31/08	8/2016	<b>Duration of</b>	licence:	10/02/2020
Maximum number of person	s or househ	olds permitted to c	occupy HMO ur	der conditions of li	icence:
			,		
Households 13	Persons	13			
Information referred to a	residential ı	property tribuna	l or Lands Tri	bunal:	
None		, ,			
Decision of Tribunal			Refere	ence number	
Summary of conditions of li	cence				
HMO - Elec Mandatory conds,		√landatory conds, H	MO - Furniture I	Mandatory conds, HI	MO -

Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs



#### Licence No.

#### 2016/00308/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

Apartment House 12-14 York Road Hove BN3 1DL

Ward

Brunswick And Adelaide

Name & Address of Licence	- Holder	
	Seneva House 77a Rutland Road Hove BN3 5FE	
Name & Address of Person	Managing	
,		
Property Description		
Short description of licensed H	HMO (No of storeys, etc)	
Property Type = BEDSIT, No of I	Units = 15, Occupancy = 15, No of Storeys = 4	
Number of Rooms	Total Number of Rooms 15	
a) Sleeping	b) Living Rooms	
a) 5.55pg	s) Living Nosilio	
Number of Self Contained Flat	s: 0 Number of Non Self Cont. Flats	:: 1
rumber of con contamod ride	indingor of non-controlled	
Shared Amenities	Number Description	
a) Kitchen	0	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Licence Details		
Commencement date:	10/11/2016 Duration of licence:	20/01/2021
Maximum number of persons	or households permitted to occupy HMO under conditions o	f licence:
		i ncence.
Households 15 F	Persons 15	
Information referred to a res	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lice	nce	

Additional Facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management Repairs, Structural Fire Works



#### Licence No.

#### 2016/00373/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

83 Hanover Street Brighton BN2 9SS

Ward

Hanover And Elm Grove

Name & Address of Licence	e Holder	
	e Street Selemston Polegate BN26 6UA	
	y out out of the control of the cont	
Name & Address of Person	ı Managing	
Mr Adam Tovey, 108A Lewes Re	oad Brighton BN2 4AE	
Property Description		
Short description of licensed	HMO (No of storeys, etc)	
Property Type = SHARED HOUS	SE, No of Units = 6, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flat	ts: 0 Number of Non Self Cont	. Flats: 0
Shared Amenities	Number Description	
Shared Amenides	Number Description	
a) Kitchen	•	
a) Kitchen b) Bathrooms/Showers		
b) Bathrooms/Showers	·	
<i>'</i>	·	
b) Bathrooms/Showers		
b) Bathrooms/Showers c) W.C.s  Licence Details		
b) Bathrooms/Showers c) W.C.s	31/03/2016 Duration of licence:	26/01/2021
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:		
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons	31/03/2016 Duration of licence: or households permitted to occupy HMO under condition	
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons	31/03/2016 Duration of licence:	
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons  Households 6	31/03/2016 Duration of licence:  or households permitted to occupy HMO under conditions  Persons 6	
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons  Households 6	31/03/2016 Duration of licence: or households permitted to occupy HMO under condition	
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons Households 6  Information referred to a re	31/03/2016 Duration of licence:  or households permitted to occupy HMO under conditions  Persons 6	ions of licence:

Summary of conditions of licence

Additional Facilities, Additional Facilities, Additional facilities, Enlargement of bedrooms, Fire Alarms, Fire alarms, Gas cert, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - General 1, HMO - General Electrical 1, HMO - General Electrical 2, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, HMO-Fire blanket, Structural Fire works



#### Licence No.

#### 2016/00402/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 33 Argyle Road Brighton BN1 4QB

Ward

Preston Park

Name & Address of Licence	Holder		
Mr Stephen Elderfield, 11 Brangw	yn Crescent Brighton BN	1 8XJ	
Name & Address of Person I	Managing		
MTM Property Services Ltd, 108A	Lewes Road Brighton Bl	N2 4AE	
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUSI	Ξ, No of Units = 1, Occup	ancy = 5, No of Storeys = 4	
		_	
Number of Rooms	Total Number of Ro	oms 5	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flats	s: 0
Shared Amenities N	lumber Descripti	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	21/06/2016	Duration of licence:	25/01/2021
Maximum number of persons of	r housaholds normittad	to occupy HMO under conditions of	of licence:
maximum number of persons of	nousenolus permitteu	to occupy rimo under conditions of	incence.
Households 5 Pe	ersons 5		
Information referred to a res	idential property tribu	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licen	CB		

Fire alarm, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/00427/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 21 St Martins Place Brighton BN2 3LE

Ward

Hanover And Elm Grove

Name & Address of Licence Holder	
Mr J Dodds & Mr F Wiles, 20 Clyde Road Brighton BN1 4NP	
Name & Address of Person Managing	
Property Moves Limited, The Old Casino 28 Fourth Avenue Hove Eas	st Sussex BN3 2PJ
Duamanto: Daganintian	
Property Description  Short description of licensed HMO (No of starous, etc.)	
Short description of licensed HMO (No of storeys, etc)	le of Otomore 2
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, N	io of Storeys = 3
Number of Rooms Total Number of Rooms 5	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Numb	er of Non Self Cont. Flats: 0
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers c) W.C.s	
,	
Licence Details	
Commencement date: 04/10/2016 Dur.	ation of licence: 26/01/2021
Commencement date: 04/10/2016 Duri	20/01/2021
Maximum number of persons or households permitted to occupy	HMO under conditions of licence:
Households 5 Persons 5	
Information referred to a residential property tribunal or La	nds Tribunal:
None	
Decision of Tribunal	Reference number

Summary of conditions of licence
Additional Facilities, Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO -Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO -Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs



#### Licence No.

#### 2016/00456/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

107 Freshfield Road Brighton BN2 0BL

Ward

Queen's Park

Name & Address of Licenc	e Holder		
Mr Thomas Booker, 23 De Mon		3AW	
Name & Address of Persor	n Managing		
,			
Property Description			
Short description of licensed	-		
Property Type = SHARED HOU	SE, No of Units = 1, Occ	upancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of F	Rooms 7	
a) Sleeping	b) Livin	g Rooms	
,	,		
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities	Number Descrip	otion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	12/05/2016	Duration of licence:	28/01/2021
Maximum number of persons	or households permitte	ed to occupy HMO under conditions	of licence:
Hawaahalda C	Domono C		
Households 6	Persons 6		
Information referred to a re	sidential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structrural fire works



#### Licence No.

#### 2016/00489/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

12 Chatsworth Road Brighton BN1 5DB

Ward

**Preston Park** 

Nama 9 Address of Licen		
Name & Address of Licen	nce Holder	
Mr Duncan Hague, 65 Waldeg	grave Road Brighton BN1 6GR	
Name & Address of Perso	on Managing	
,		
Property Description		
Short description of license	d HMO (No of storeys, etc)	
Property Type = BEDSIT, No	of Units = 7, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping	b) Living Rooms	
Number of Self Contained F	lats: 0 Number of Non Self Cont. Flats	s: 0
01	North Company of the	
Shared Amenities a) Kitchen	Number Description	
<b>,</b>		
n i Rathroome/Showere		
b) Bathrooms/Showers c) W.C.s		
b) Bathrooms/Showers c) W.C.s		
c) W.C.s  Licence Details		
c) W.C.s	03/05/2016 Duration of licence:	25/10/2020
c) W.C.s  Licence Details  Commencement date:	03/05/2016 Duration of licence:	
c) W.C.s  Licence Details  Commencement date:  Maximum number of person	ns or households permitted to occupy HMO under conditions o	
c) W.C.s  Licence Details  Commencement date:		
c) W.C.s  Licence Details  Commencement date:  Maximum number of person  Households  6	Persons 6	
c) W.C.s  Licence Details  Commencement date:  Maximum number of person  Households  6	ns or households permitted to occupy HMO under conditions o	
c) W.C.s  Licence Details  Commencement date:  Maximum number of person  Households 6  Information referred to a	Persons 6	

Summary of conditions of licence

Fire works, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



## Licence No.

#### 2016/00532/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

20 Buckingham Street Brighton BN1 3LT

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
Mr And Mrs Clive Senior And S	Susan Winter, 21 Benett	Drive Hove East Sussex BN3 6PL	
Name & Address of Perso	n Managing		
Home James Residential Lets	Ltd T/as Home James Lo	ets, Kingsway 134-140 Church Road Ho	ve East Sussex
Property Description			
Short description of licensed	l HMO (No of storeys, e	etc)	
Property Type = BEDSIT, No o	of Units = 1, Occupancy =	= 8, No of Storeys = 4	
Number of Rooms	Total Number of	Rooms 8	
a) Sleeping 6	b) Liv	ing Rooms 2	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Flat	ts: 1
Shared Amenities	Number Descr	ription	
a) Kitchen	2	- Parisir	
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Licence Details			
Commencement date:	09/06/2016	Duration of licence:	30/12/2020
Maximum number of person	s or households permit	tted to occupy HMO under conditions	of licence:
		¬	
Households 8	Persons 8		
Information referred to a	residential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Alarm Systems 4, HMO - Fire HMO - Fire Notices 1, HMO - F	Works, Fire EI / GI / Cup Blanket, HMO - Fire Eme Furniture Mandatory cond	boards 2, HMO - Elec Mandatory conds, ergency Lighting 2, HMO - Fire Mandator ds, HMO - Gas Mandatory conds, HMO - HMO - Property Maint Mandatory conds, I	y conds, Licensing

Repairs Ventilation 2, HMO - Repairs Windows 3, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Mangement / Repairs, Other Fire Works, Other Fire works, Structural Fire Works





## Licence No.

#### 2016/00542/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

17 Nyetimber Hill Brighton BN2 4TL

Ward

Moulsecoomb And Bevendean

lame & Address of Licenc	e Holder		
As Sue Trinder, 8 Bramble Rise	Brighton East Sussex BN1	5GF	
Name & Address of Persor	n Managing		
Property Description			
short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOU	SE, No of Units = 1, Occupa	ancy = 6, No of Storeys = 3	
lumber of Rooms	Total Number of Roo	oms 10	
) Sleeping 9	b) Living F	ROOMS	
lumber of Self Contained Fla	ts: 0	Number of Non Self Cont. Flats:	1
hared Amenities	Number Description		
) Kitchen	2 Description	וונ	
) Bathrooms/Showers	3		
) W.C.s	3		
icence Details			
Commencement date:	15/04/2016	Duration of licence:	02/02/2021
		_	
laximum number of persons	or households permitted	to occupy HMO under conditions of	licence:
louseholds 6	Persons 6		
nformation referred to a re	esidential property tribu	nal or Lands Tribunal:	
lone			
Decision of Tribunal		Reference number	
Summary of conditions of lice HMO - Elec Mandatory conds, I		s, HMO - Furniture Mandatory conds, H	IMO - Gas



## Licence No.

#### 2016/00545/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

21 Buckingham Street Brighton BN1 3LT

Ward

St. Peter's And North Laine

Name & Address of Licence	Holder		
Clive Senior And Susan Winter, 2	21 Benett Drive Hove East S	ussex BN3 6PL	
Name & Address of Person	Managing		
Home James Residential Lets Ltd	I T/as Home James Lets, Kir	ngsway 134-140 Church Road Hove	East Sussex
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = BEDSIT, No of U	Inits = 1, Occupancy = 8, No	of Storeys = 4	
November of Decree	Total Number of Doom		
Number of Rooms	Total Number of Room	s 8	
a) Sleeping 6	b) Living Ro	oms 2	
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Flats	: 1
			L
Shared Amenities	Number Description		
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	09/06/2016	Duration of licence:	30/12/2020
Maximum number of persons o	r households permitted to	occupy HMO under conditions of	f licence:
Households 8 P	ersons 8		
Information referred to a res	idential property tribuna	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Alarm Systems 4, HMO - Fire Bla HMO - Fire Notices 1, HMO - Fur Bedrooms, HMO - Property Chge	orks, Fire EI / GI / Cupboards nket, HMO - Fire Emergency niture Mandatory conds, HM s Mandatory conds, HMO - F vairs Windows 3, HMO - Rub	5 2, HMO - Elec Mandatory conds, F y Lighting 2, HMO - Fire Mandatory O - Gas Mandatory conds, HMO - L Property Maint Mandatory conds, HI bishRecyc Mandatory conds, HMO works, Structural Fire works	conds, icensing MO -





## Licence No.

#### 2016/00624/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

1 Bristol	Street
Brighton	
BN2 5JT	•

Ward

East Brighton

Name & Address of Licen	ce Holder		
Mrs Laura Dwyer-Smith, 26 Ho	ve Park Way Hove	East Sussex BN3 6PT	
Name & Address of Perso	n Managing		
Property Description			
Short description of licensed	•		
Property Type = SHARED HO	USE, No of Units =	1, Occupancy = 7, No of Storeys = 3	
Number of Rooms	Total Numl	per of Rooms 8	
a) Sleeping 7		b) Living Rooms 1	
z, e.eepg			
Number of Self Contained Fl	ats:	0 Number of Non Self Cont. F	lats: 0
tumber of och contained in		o Namber of New Cent Cont. 1	0
Shared Amenities	Number I	Description	
a) Kitchen	2	•	
o) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Licence Details			
Commencement date:	23/06/2016	Duration of licence:	04/02/2021
Marrian and a second			
waximum number of persons	s or nousenoids p	permitted to occupy HMO under condition	is of licence:
Households 7	Persons	7	
	esidential prope	erty tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lid HMO - Elec Mandatory conds.		et. HMO - Fire Doors 5. HMO - Fire Mandato	ry conds, HMO

- Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO -Property Maint Mandatory conds, HMO - Repairs Ventilation 2, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



## Licence No.

#### 2016/00629/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Second Floor And Third Floor Flat 100 Church Road Hove BN3 2FR

Ward

Central Hove

Nama O Addusas of License Helden
Name & Address of Licence Holder
Olivia Trading Ltd, Timbers Rookery Way Haywards Heath West Sussex RH16 4RE
Name & Address of Borson Managing
Name & Address of Person Managing
Pier Associates Ltd, T/a Just Lets 87 Church Road Hove East Sussex BN3 2BB
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3
-Toperty Type - STIANED TIOUSE, NO OF OTHER - 1, Occupancy - 5, NO OF Storeys - 3
Number of Rooms Total Number of Rooms 6
a) Sleeping b) Living Rooms 1
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1
Shared Amenities Number Description
a) Kitchen 1
b) Bathrooms/Showers 1
c) W.C.s1
Licence Details
Literite Details
Commencement date: 02/06/2016 Duration of licence: 04/02/2021
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Households 5 Persons 5
nformation referred to a residential property tribunal or Lands Tribunal:
None
Decision of Tribunal Reference number
Summary of conditions of licence Additional Facilities, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO -

Additional Facilities, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Other Fire works



## Licence No.

#### 2016/00745/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

Hereford House 16 - 24 Hereford Street Brighton BN2 1LF

Ward

Queen's Park

Name & Address of Lice	nce Holder		
Mr Joginder Vig, 14 Eaton Ga	ardens Hove East Sussex E	N3 3TP	
Name & Address of Pers	on Managing		
,			
Property Description			
Short description of license	ed HMO (No of storeys, et	c)	
Property Type = BEDSIT, No	•		
		-,	
Number of Rooms	Total Number of I	Rooms 29	
a) Sleeping	b) Livir	ng Rooms	
Number of Self Contained F	Flats: 0	Number of Non Self Cont. Flats	: 1
Shared Amenities	Number Descri	ption	
a) Kitchen	5		
b) Bathrooms/Showers c) W.C.s	36		
o, vv.o.s			
Licence Details			
Commencement date:	28/11/2016	Duration of licence:	15/02/2021
Maximum number of perso	ns or households permitt	ed to occupy HMO under conditions of	ilicence:
Households 9	Persons 25		
Information referred to a	residential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal	Reference number		
	lec Mandatory conds, HMC	) - Fire Mandatory conds, HMO - Furniture	



## Licence No.

#### 2016/00804/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

20 Carisbrooke Road Brighton BN2 3EF

Ward

Hanover And Elm Grove

Name & Address of Licence	Holder		
Mr Reinhardt Slabbert, Hazel Cot	tage Warren Road Brig	hton BN2 6DA	
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed H	MO (No of storeys, etc	<b>(</b> )	
Property Type = SHARED HOUS	E, No of Units = 1, Occu	ipancy = 5, No of Storeys = 4	
Normalis and Discours	Tadal Namela (CD	<b>F</b>	
Number of Rooms	Total Number of R		
a) Sleeping	b) Living	Rooms	
Number of Self Contained Flats	: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities N	lumber Descrip	tion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	21/04/2016	<b>Duration of licence:</b>	17/10/2020
Massimosum muumban af manaana		d to constitute and differen	of lineman.
waximum number of persons o	r nousenoias permitte	d to occupy HMO under conditions	of licence:
Households 5 P	ersons 5		
Information referred to a res	idential property trib	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence



## Licence No.

#### 2016/00816/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

51 Viaduct Road Brighton BN1 4ND

Ward

St. Peter's And North Laine

Name & Address of Licence Hole	der	
Dr Frances Wilkins, Flat C 61 Dunbar	Street Aberdeen Scotland AB24 3UA	
Name & Address of Person Man	aging	
1		
Property Description		
Short description of licensed HMO (	(No of storeys, etc)	
	o of Units = 1, Occupancy = 5, No of Storeys = 3	
,		
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 5	b) Living Rooms 1	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	1
Shared Amenities Number 1	ber Description	
b) Bathrooms/Showers 1		
c) W.C.s		
Licence Details		
Commencement date:	12/07/2016 Duration of licence:	17/02/2021
Maximum number of persons or hol	useholds permitted to occupy HMO under conditions of li	icence:
Households 5 Perso	ns 5	
	ntial property tribunal or Lands Tribunal:	
None Decision of Tribunal	Reference number	
	Reference number	
Summary of conditions of licence HMO - Elec Mandatory conds, HMO -	Fire Mandatory conds, HMO - Furniture Mandatory conds, HN	MO - Gas



## Licence No.

#### 2016/00852/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

15 Upper Rock Gardens Brighton BN2 1QE

Ward

Queen's Park

Name & Address of Licer	ace Holder		
Mr David Denis Beckley, 29 S		merset RA5 2I R	
IVII David Defils Deckley, 29 3	t Andrews Mews Wells 30	merset DAS ZED	
Name & Address of Person	on Managing		
	gg		
,			
Property Description			
Short description of license	d HMO (No of storeys, et	c)	
Property Type = BEDSIT, No	of Units = 9, Occupancy =	9, No of Storeys = 5	
	· · ·	·	
Number of Rooms	Total Number of I	Rooms 5	
a) Sleeping	b) Livir	ng Rooms	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number Descri	ption	
a) Kitchen	8		
b) Bathrooms/Showers	5		
c) W.C.s	3		
Licence Details			
0	40/00/0040	Demotion of the same	00/04/0004
Commencement date:	10/08/2016	Duration of licence:	26/01/2021
Maximum number of persor	is or households permitt	ed to occupy HMO under conditions	of licence:
Households 9	Persons 9		
0	5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		
Information referred to a	residential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	cence		

Additional Facilities, Electrical Works, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO -Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Heating 5, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Other Fire Works



## Licence No.

#### 2016/00903/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 21 Gladstone Place Brighton BN2 3QE

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder		
Mr Chris McCrow, 21 Gladsto	ne Place Brighton BN2 3C	QΕ	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of license	l d HMO (No of storevs. e	tc)	
-		cupancy = 7, No of Storeys = 3	
Topolly Type Olivated Tie	7, 000	oupuney 1, the el eleleyer e	
Number of Rooms	Total Number of	Rooms 7	
a) Sleeping 7	b) Livi	ng Rooms 1	
Number of Self Contained F	ats: 0	Number of Non Self Cont. Flats	s: 0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Descri	iption	
Licence Details			
Commencement date:	10/05/2016	Duration of licence:	21/06/2020
Maximum number of person	s or households permit	ted to occupy HMO under conditions o	of licence:
Households 7	Persons 7		
Information referred to a	residential property tr	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li		ands HMO Eurnitura Mandatory conde	HMO Gas



## Licence No.

#### 2016/00999/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

153 Portland Road Hove BN3 5QJ

Ward

Wish

Name & Address of Licence Holder	
Peoples Pubs Ltd, 218 Dyke Road Brighton East Sussex BN1 5AA	
Name & Address of Person Managing	
Federico Pedeira, 153 Portland Road Hove BN3 5QJ	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 9, Occupancy = 9, No of Storeys = 3	
Tropolly Type Orbital Process, the creating of Casapaney of the creating of	
Number of Rooms Total Number of Rooms 10	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	s: 0
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s	
Licence Details	
Commencement date: 18/10/2016 Duration of licence:	10/11/2020
Commencement date: 18/10/2016 Duration of licence:	10/11/2020
Maximum number of persons or households permitted to occupy HMO under conditions of	of licence:
Households 9 Persons 9	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	

Boiler cupboards, Fire Doors, Fire doors, Fire extinguishers, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - General 1, HMO - General 6, HMO - General Electrical 1, HMO - General Electrical 2, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Kitchen ventilation, Self closers



## Licence No.

#### 2016/01017/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

78 Richmond Road Brighton BN2 3RN

Ward

St. Peter's And North Laine

Name & Address of Licence	e Holder	
Mr Alfred Haagman, Meadowbro	ook House Brook Street Cuckfield RH17 5JJ	
Name & Address of Person		
Hove Lets Ltd, C/o Parkers Cor	nelius House 178-180 Church Road Hove BN3 2DJ	
Property Description		
Short description of licensed I	HMO (No of storeys, etc)	
	SE, No of Units = 1, Occupancy = 6, No of Storeys = 4	
Troperty Type – OFFARED FIOOR	5E, No of Office - 1, Occupancy - 0, No of Storeys - 4	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flat	s: 0 Number of Non Self Cont. Flats:	0
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Commencement date:	06/06/2016 Duration of licence:	20/02/2021
Maximum number of persons	or households permitted to occupy HMO under conditions of	licence:
Households 6	Persons 6	
Information referred to a re	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lice		MO Coo



## Licence No.

#### 2016/01029/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

54 Park Crescent Road Brighton BN2 3HS

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
Mr Robert Heller, C/o 47 Norfol	k Square Brighton BN	1 2PA	
Name & Address of Perso			
Homelets (Brighton) Ltd, 47 No	rfolk Square Brighton	East Sussex BN1 2PA	
D ( D ) (			
Property Description	LIMO (No. of character)	.1.)	
Short description of licensed			
Property Type = SHARED HOL	JSE, No of Units = 1, 0	Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number	of Rooms 6	
a) Sleeping	h) I	iving Rooms	
a) Siceping	5) L	Iving Rooms	
Normalis of Calf Campains of Fla		Number of New Colf Court Florid	
Number of Self Contained Fla	ats: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Des  1 2 2	cription	
Licence Details			
Commencement date:	03/06/2016	Duration of licence:	07/12/2020
Maximum number of persons	or households pern	nitted to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Information referred to a r	esidential property	rtribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic		roondo HMO. Euroituro Mandatory conda	LIMO Cas



## Licence No.

### 2016/01034/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

1 Willow Close Brighton BN2 6SX

Ward

Woodingdean

Name & Address of Licer			
Ms Abigail Knight, 124 Maple	Road Surbiton Surrey K	T6 4AU	
Name & Address of Pers	on Managing		
,			
D			
Property Description	LUMO (No of stores	1.)	
Short description of license	•	•	
Property Type = Not Assigned	I, No of Units = 5, Occup	pancy = 5, No of Storeys = 3	
Number of Rooms	Total Number o	of Rooms 6	
a) Sleeping 5		ving Rooms	
	5) 21	ving receive	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ts: 1
Number of Self Contained F	iats.	Number of Non Sen Cont. Fla	15.
Shared Amenities	Number Desc	cription	
a) Kitchen	1	inpuon	
b) Bathrooms/Showers	3		
c) W.C.s	4		
Licence Details			
Commencement date:	15/08/2016	Duration of licence:	01/03/2021
Maximum number of persor	ns or households permi	itted to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Information referred to a	residential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	cence		
		conds HMO - Furniture Mandatory conds	s HMO - Gas

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



## Licence No.

#### 2016/01053/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

76 Montgomery Street Hove BN3 5BE

Ward

Westbourne

Name & Address of Licer	ice Holder	
Mr Mark Dyer, 76 Old Shoreh	am Road Hove East Sussex BN3 6HL	
Name & Address of Person	on Managing	
,		
Property Description		
Short description of license	d HMO (No of storeys, etc)	
Property Type = SHARED HC	OUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping	b) Living Rooms	
		_
Number of Self Contained F	lats: 0 Number of Non Self Cont. Flat	s: 0
	N. alama Bara taga	
Shared Amenities a) Kitchen	Number Description	
b) Bathrooms/Showers	3	
c) W.C.s	4	
Licence Details		
Commonooment data:	07/06/2016 Duration of licence:	28/02/2021
Commencement date:	Duration of licence:	20/02/2021
Maximum number of persor	ns or households permitted to occupy HMO under conditions	of licence:
Households 5	Persons 5	
nousenoius	reisons	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of li	cence	



## Licence No.

#### 2016/01082/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

31 Sackville Road Hove BN3 3WA

Ward

Central Hove

Name & Address of Lice	nce Holder	
Mr Michael C Law-Smith, 12 I	Beechwood Avenue Brighton BN1 8EE	
Name & Address of Pers	on Managing	
,		
Property Description		
Short description of license	d HMO (No of storeys, etc.)	
•	of Units = 7, Occupancy = 9, No of Storeys = 3	
Troperty Type - BEBSIT, No	of Office – 7, Occupancy – 9, No of Storeys – 5	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping	b) Living Rooms	
Number of Self Contained F	lats: 0 Number of Non Self Cont. Flats:	1
Shared Amenities a) Kitchen	Number Description	
b) Bathrooms/Showers	3	
c) W.C.s	4	
Licence Details		
Commencement date:	18/10/2016 Duration of licence:	20/07/2020
Maximum number of persoi	ns or households permitted to occupy HMO under conditions of lic	ence:
Households 9	Persons 9	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of li	cence	s HMO -

Bathroom heating, Cooking appliance, Cooking appliances, Gas safety, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - General 1, HMO - General 6, HMO - General Electrical 1, HMO - General Electrical 2, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Not Assigned, Self closers, flat heating



## Licence No.

#### 2016/01133/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

6 Powis Grove Brighton BN1 3HF

Ward

Regency

			110	90.109
Name & Address of Licer	ce Holder			
Mr Thomas Heanen, 21A Bed		ahton BN1 2PL		
,,,		9		
Name & Address of Perso	on Managing			
Mr Nicholas Heanen, 21A Bed	ford Square Bri	ghton BN1 2PL		
Property Description				
Short description of license	d HMO (No of s	storeys, etc)		
Property Type = SHARED HC	USE, No of Uni	ts = 8, Occupano	cy = 8, No of Storeys = 4	
Number of Rooms	Total N	umber of Room	s 8	
	Total IV			
a) Sleeping		b) Living Roo	oms	
Number of Self Contained F	lete	2	Number of New Solf Cont. Elet	es: 0
Number of Self Contained F	ials:	2	Number of Non Self Cont. Flat	s: 0
Shared Amenities	Number	Description		
a) Kitchen	4			
b) Bathrooms/Showers	4			
c) W.C.s	6			
Licence Details				
Commencement date:	26/05/2	2016	Duration of licence:	11/10/2020
Maximum number of person	is or household	ds nermitted to	occupy HMO under conditions	of licence:
	-		occupy rime under conditions	01 11001100.
Households 8	Persons	8		
Information referred to a	residential pr	onerty tribuna	al or Lands Tribunal	
None	restaeritiai pr	operty tribune	ar or Eurius Tribunui.	
Decision of Tribunal			Reference number	
	00000			
Summary of conditions of li	cence		INAC Franciscos Manadatano acada	LIMO OF



## Licence No.

#### 2016/01233/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

23 Dorset Gardens Brighton BN2 1RL

Ward

Queen's Park

Name & Address of Lice	nce Holder		
Mr R & Mrs J Hallett, 'Golding		Sussex RH17 5JL	
Name & Address of Pers	on Managing		
G4 Lets, 2 Hythe Road Bright	on BN1 6JS		
Property Description			
Short description of license	d HMO (No of storeys, etc)		
Property Type = SHARED HO	)USE, No of Units = 1, Occup	ancy = 9, No of Storeys = 5	
Number of Rooms	Total Number of Ro	oms 12	
a) Sleeping	b) Living	Rooms	
	3) <u>-</u> g		
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats	: 0
Training of Contamour			
Shared Amenities	Number Descripti	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Licence Details			
Commencement date:	25/10/2016	Duration of licence:	09/03/2021
Maximum number of person	ns or households permitted	to occupy HMO under conditions o	f licence:
Households 8	Persons 9		
110u3GIIOIU3 0	1 6130113		
Information referred to a	residential property tribu	ınal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Additional bedroom to basement, Additonal bedroom, Gas certificates, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Increasing numbers, Kitchen Facilities, New Lounge, Ventilation, Washing facilities



## Licence No.

#### 2016/01240/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

7 Powis Grove Brighton BN1 3HF

Ward

Regency

		Wald	rtegei	Ю
Name & Address of Lice	nce Holder			
Mr Thomas Heanen, 21A Be	dford Square Brighton	n BN1 2PL		
Name & Address of Pers	5 5			
Mr Nicholas Heanen, 21A Be	dford Square Brighto	n BN1 2PL		
Property Description				
Short description of license	ed HMO (No of store	eys, etc)		
Property Type = SHARED Ho	OUSE, No of Units =	7, Occupancy = 7, No of Sto	reys = 4	
Number of Dooms	Total Numb	or of Dooms 7		
Number of Rooms		per of Rooms 7		
a) Sleeping	t	b) Living Rooms		
Number of Self Contained I	Flats:	1 Number of No	on Self Cont. Flats:	0
Shared Amenities	Number [	Description		
a) Kitchen	2			
b) Bathrooms/Showers	3			
c) W.C.s	4			
Licence Details				
Commencement date:	03/06/2016	Duration of	licence:	29/09/2020
Maximum number of perso	ns or nousenoias p	ermitted to occupy HMO u	naer conditions of I	cence:
Households 7	Persons	7		
Information referred to a	residential prope	erty tribunal or Lands Tri	ibunal:	
None				
Decision of Tribunal		Refer	ence number	
Summary of conditions of I	licence			



## Licence No.

#### 2016/01322/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

125 Upper Lewes Road Brighton BN2 3FD

Ward

St. Peter's And North Laine

Name & Address of Lice	nce Holder	
Mr Yasir Rana, Batchelors Er	nms Lane Barns Green Horsham RH13 0QG	
Name & Address of Pers	on Managing	
Pavilion Properties Ltd, 128-1	29 Lewes Road Brighton BN2 3LG	
Property Description		
Short description of license	ed HMO (No of storeys, etc)	
Property Type = SHARED HO	DUSE, No of Units = 1, Occupancy = 7, No of Storeys = 4	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping	b) Living Rooms	
a) Sieeping	b) Living Rooms	
Number of Self Contained F	Flats: 0 Number of Non Self C	Cont. Flats:
Number of Self Contained F	Number of Non-Sen C	Joint. Flats.
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	2	
c) W.C.s	2	
License Deteile		
Licence Details		
Commencement date:	30/08/2016 Duration of licence	: 17/04/2021
Maximum number of persor	ns or households permitted to occupy HMO under co	nditions of licence:
	B	
Households 7	Persons 7	
	Persons 7 residential property tribunal or Lands Tribunal:	
Information referred to a		ımber

Elec cert, Gas, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - General 1, HMO - General 6, HMO - General 7, HMO - General Electrical 1, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Intumescent strip, Self closing devices, detector



## Licence No.

## 2016/01350/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 8 Lower Rock Gardens Brighton BN2 1PG

Ward

Queen's Park

Name & Address of Licen	ce Holder
Geneva Investment Group Ltd	, 77A Rutland Road Hove BN3 5FE
Name & Address of Perso	n Managing
Mr Matthew Sorokin, 77A Rutla	and Road Hove BN3 5FE
Property Description	
Short description of licensed	I HMO (No of storeys, etc)
Property Type = BEDSIT, No c	of Units = 14, Occupancy = 19, No of Storeys = 4
Number of Rooms	Total Number of Rooms 14
a) Sleeping	b) Living Rooms
Number of Self Contained Fl	ats: 0 Number of Non Self Cont. Flats: 1
Observat Association	Normalism - December -
Shared Amenities	Number Description
a) Kitchen b) Bathrooms/Showers	3
c) W.C.s	3
,	
Licence Details	
Commencement date:	19/10/2016 <b>Duration of licence</b> : 24/03/2021
Maximum number of persons	s or households permitted to occupy HMO under conditions of licence:
Hamahalda 40	B
Households 19	Persons 19
Information referred to a r	residential property tribunal or Lands Tribunal:
None	
Decision of Tribunal	Reference number
Summary of conditions of lic	rence
Doors, Elec Cert, Escape wind	ows, External gates, HMO - Fire Mandatory conds, HMO - Furniture
	Mandatory conds, HMO - General 1, HMO - General 6, HMO - General ectrical 2, HMO - Property Chges Mandatory conds, HMO - Property Maint

Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Heating GF WC, Sockets, Ventilation to second floor rooms



## Licence No.

#### 2016/01375/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

327 Bear Road Brighton BN2 4DD

Ward

Moulsecoomb And Bevendean

Name & Address of Licence	e Holder	
Mr Chris Kent, 45 Carisbrooke F	Road Brighton East Sussex BN2 3EF	
Name & Address of Persor	n Managing	
Pavilion Properties Ltd, 39 Sack	cville Road Hove BN3 3WD	
Property Description		
Short description of licensed	HMO (No of storeys, etc)	
Property Type = SHARED HOU	SE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 5	
a) Sleeping	b) Living Rooms	
Number of Self Contained Fla	ts: 0 Number of Non Self Cont. Flat	ts: 1
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	1	
Licence Details		
Commencement date:	21/06/2016 Duration of licence:	15/03/2021
Maximum number of persons	or households permitted to occupy HMO under conditions	of licence:
Households 5	Persons 5	
Information referred to a re	esidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lice	ence	



## Licence No.

#### 2016/01376/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 4 Roundhill Crescent Brighton BN2 3FR

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder	
	ms Lane Barns Green RH13 0QG	
Name & Address of Perso	n Managing	
Pavillion Properties Ltd, 128-12	29 Lewes Road Brighton BN2 3LG	
Property Description		
Short description of licensed	I HMO (No of storeys, etc)	
Property Type = SHARED HO	USE, No of Units = 1, Occupancy = 6, No of Storeys = 4	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping 6	b) Living Rooms 1	
a) Sieeping	b) Living Rooms	
Number of Self Contained Fl	ats: 0 Number of Non Self Cont. Flats:	1
Number of Self Contained Fi	ats. Unumber of Non Sen Cont. Flats.	·
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Linear Batalla		
Licence Details		
Commencement date:	14/06/2016 Duration of licence:	15/03/2021
Maximum number of persons	s or households permitted to occupy HMO under conditions of	licence:
Households 6	Porsona 6	
Households 6	Persons 6	
Information referred to a r	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lic	rence	
Electrical Works, HMO - Elec N	Mandatory conds, HMO - Fire Alarm Systems 7, HMO - Fire Manda nds, HMO - Gas Mandatory conds, HMO - Licensing Kitchen 1, HM	

Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Floors 1, HMO -Repairs Kitchen 5, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



## Licence No.

#### 2016/01483/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Maisonette 23 Wilbury Grove Hove BN3 3JQ

Ward

Central Hove

Name & Address of Licence Holder		
Adenstar Contruction Ltd, St Marys Barn Ridge Road Falmer East Sussex BN1	9PJ	
N 0411 (B N :		
Name & Address of Person Managing		
Mr Andy Babbayan, The Old Warehouse 2 Ashford Road Brighton East Sussex	BN1 6LJ	
Property Description		
Short description of licensed HMO (No of storeys, etc)		
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 7, No of Store	evs = 3	
, , , , , ,		
Number of Rooms Total Number of Rooms 8		
a) Sleeping b) Living Rooms		
Number of Self Contained Flats: 0 Number of Non	Self Cont. Flats:	0
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s  Number  1  2  2		
Licence Details		
Commencement date: 07/06/2016 Duration of li	cence:	20/03/2021
Maximum number of persons or households permitted to occupy HMO und	der conditions of li	cence:
Households 7 Persons 7		
Information referred to a residential property tribunal or Lands Trib	unal:	
None		
Decision of Tribunal Refere	nce number	
Summary of conditions of licence	landatory conds. UN	10 Gas



## Licence No.

#### 2016/01657/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

80 Widdicombe Way Brighton BN2 4TJ

Ward

Moulsecoomb And Bevendean

Name & Address of Licen			
Mr Tom Ottway, 61 Bernard R	oad Brighton East Sussex	BN2 3ER	
Name & Address of Perso	on Managing		
MTM Property Services Ltd, 10		Fast Sussex BN2 4AF	
William Topolity Convided Ltd, 19	Jor Cowes Read Brighten	Edot Gaodex BIVE IV.E	
Property Description			
Short description of license	d HMO (No of storeys, et	c)	
Property Type = SHARED HO	USE, No of Units = 1, Occ	supancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of I	Rooms 6	
a) Sleeping	b) Livir	ng Rooms	
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number Descri	ption	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s			
Licence Details			
	07/10/10	<b>-</b>	24/22/2224
Commencement date:	05/12/2016	Duration of licence:	31/03/2021
Maximum number of person	s or households permitt	ed to occupy HMO under conditions	of licence:
Households 5	Persons 5		
1 IOUSEIIOIUS 5	7 G130113		
Information referred to a	residential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie	conco		



## Licence No.

#### 2016/01674/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

15 St James's Avenue Brighton BN2 1QD

Ward

Queen's Park

Name & Address of Licen		
Triratna Buddhist Community	(Brighton), 17 Tichborne Street Brighton BN1 1UR	
Name & Address of Perso	• • •	
Keturaja (Mike Silver), NEW V	IEW RESIDENTIAL LTD 6 Cobble Yard Napier Stre	et Cambridge CB1 1HP
Property Description		
Short description of license	d HMO (No of storeys, etc)	
Property Type = SHARED HO	USE, No of Units = 7, Occupancy = 7, No of Storeys	s = 4
Number of Rooms	Total Number of Rooms 10	
a) Sleeping 7	b) Living Rooms 1	
Number of Self Contained F	ats: 0 Number of Non S	elf Cont. Flats: 1
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	2	
c) W.C.s	3	
Licence Details		
Commencement date:	17/06/2016 <b>Duration of lice</b>	ence: 10/01/2021
Commencement date.	Duration of fice	10/01/2021
Maximum number of person	s or households permitted to occupy HMO under	r conditions of licence:
	<b>B</b>	
Households 7	Persons 7	
Information referred to a	residential property tribunal or Lands Tribur	nal·
None	ocidential property tribatial of Lanas Inibat	1411
Decision of Tribunal	Doforono	e number
Decision of Hibalial	Keierenc	e iiuiiiDei
Summary of conditions of lie	cence HMO - Fire Mandatory conds HMO - Furniture Mar	ndatory conds HMO - Gas



## Licence No.

#### 2016/01683/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

44A Preston Road Brighton BN1 4QF

Ward

Preston Park

Name & Address of Licence	Holder	
Mr Peter John Bennett, 55 Belgr	ave Road Seaford BN25 2HE	
Name & Address of Person	Managing	
Marilyn Bennett, 55 Belgrave Ro	ad Seaford BN25 2HE	
Property Description		
Short description of licensed I	HMO (No of storeys, etc)	
Property Type = SHARED HOUS	SE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flat	s: 0 Number of Non Self Cont. Flats:	1
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	1	
Licence Details		
Commencement date:	08/06/2016 Duration of licence:	26/04/2021
data.	Suration of notice.	20/0 1/2021
Maximum number of persons	or households permitted to occupy HMO under conditions of I	icence:
Households 5 F	Persons 5	
Tiouseriolus 5	- Claulia	
Information referred to a re	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lice	nce	
LIMO Floo Mondatant seeds 1	MO Fire Mandatano annda UMO Formitore Mandatano annda U	MO 0



## Licence No.

#### 2016/01688/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

36 York Avenue Hove BN3 1PH

Ward

Goldsmid

Name & Address of Licer	nce Holder		
Mr Norman Jayamaha, 36 Yo	rk Avenue Hove East Sus	sex BN3 1PH	
Name & Address of Person	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, e	tc)	
Property Type = SHARED HC	OUSE, No of Units = 1, Oc	cupancy = 12, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 16	
a) Sleeping	b) Livi	ng Rooms	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flat	s: 1
Ob and Amazzaitica	Namelan Basan	541	
Shared Amenities a) Kitchen	Number Descr	iption	
b) Bathrooms/Showers	5		
c) W.C.s	8		
,			
Licence Details			
Commencement date:	16/03/2017	Duration of licence:	22/03/2021
Commencement date:	16/03/2017	Duration of licence.	22/03/2021
Maximum number of persor	ns or households permit	ted to occupy HMO under conditions	of licence:
Households 12	Persons 12		
110useriolus 12	re130113 12		
Information referred to a	residential property to	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	cence		
Additional Facilities, HMO - El	lec Mandatory conds, HM	O - Fire Mandatory conds, HMO - Furnitu	
Mandatory conds, HMO - Gas	Mandatory conds, HMO	- Property Chges Mandatory conds, HMC	) - Property

Additional Facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Heating 5, HMO - Repairs Ventilation 2, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management /Repairs, Management/ Repairs, Structural Fire Works, Ventilation



## Licence No.

#### 2016/01711/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

16 St Helens Road Brighton BN2 3EE

Ward

Hanover And Elm Grove

Name & Address of Licence Holder
Mr Stefan Wilson, Flat 1 Leopold Lodge 26 Dyke Road Brighton East Sussex BN1 3JB
Name & Address of Person Managing
S J Lettings Ltd, 52 Lewes Road Brighton BN2 3HW
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3
Number of Rooms Total Number of Rooms 5
a) Sleeping 5 b) Living Rooms 1
, S
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1
Shared Amenities Number Description
a) Kitchen 2
b) Bathrooms/Showers 2
c) W.C.s
Licence Details
Commencement date: 14/06/2016 Duration of licence: 23/03/2021
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Households 5 Persons 5
Information referred to a residential property tribunal or Lands Tribunal:
None
Decision of Tribunal Reference number
Summary of conditions of licence HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas



## Licence No.

#### 2016/01719/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

15 Stanley Road Brighton BN1 4NJ

Ward

St. Peter's And North Laine

Name & Address of Licence Holder	
Walker Residential Ltd, The Stables Champion Court Farm Newnham Kent ME9 0JX	
Name & Address of Person Managing	
G4 Lets, 2 Hythe Road Brighton BN1 6JS	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms Total Number of Rooms 5	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Con	t. Flats: 0
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers	
c) W.C.s	
Linear Potelle	
Licence Details	
Commencement date: 26/10/2016 Duration of licence:	31/03/2021
Maximum number of persons or households permitted to occupy HMO under condi	tions of licence:
Households 5 Persons 5	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference numb	per

Summary of conditions of licence Elec cert, Fire Door, Fire doors, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO -Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



## Licence No.

#### 2016/01727/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

6 Montpelier Road Brighton BN1 2LQ

Ward

Regency

		Walu	regency
Name & Address of Lice	nco Holdor		
Vir Iftekhar Hussain, 35 Hare	Lane Crawley West Sussex	KH11 7PU	
Name & Address of Pers	son Managing		
Property Description			
Short description of licens	ed HMO (No of storeys, etc)	)	
Property Type = SHARED H	OUSE, No of Units = 1, Occu	pancy = 6, No of Storeys = 4	
Number of Rooms	Total Number of Ro	ooms 6	
a) Sleeping 6	b) Living	Rooms 1	
Number of Self Contained	Flats: 0	Number of Non Self Cont. I	Flats: 0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Descript  2  3  3	tion	
Licence Details			
Commencement date:	24/06/2016	Duration of licence:	04/04/2021
Johnnencement date.	24/00/2010	Duration of licence.	04/04/2021
Maximum number of perso	ns or households permitted	d to occupy HMO under conditio	ns of licence:
Households 6	Persons 6		
	Torono		
nformation referred to a	a residential property trib	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	c Mandatory conds, HMO - Fi	ire Mandatory conds, HMO - Furnit	

conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



## Licence No.

#### 2016/01742/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

5 Montpelier Road Brighton BN1 2LQ

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м	м	,	а		L

Regency

Name & Address of Lice	nce Holder		
Mr Iftekhar Hussain, 5 Montp	elier Road Brighton BN1 2	PLQ	
Name & Address of Pers	on Managing		
,			
Property Description			
Short description of licens	ed HMO (No of storeys, e	etc)	
Property Type = SHARED H	OUSE, No of Units = 1, Oc	ccupancy = 6, No of Storeys = 4	
Number of Rooms	Total Number of	Rooms 6	
a) Sleeping 6	b) Liv	ing Rooms 1	
Number of Self Contained	Flats: 0	Number of Non Self Cont. F	Flats: 0
Shared Amenities	Number Descr	ription	
a) Kitchen	2		
b) Bathrooms/Showers	3		
c) W.C.s	3		
Licence Deteile			
Licence Details			
Commencement date:	24/06/2016	Duration of licence:	04/04/2021
		J	
Maximum number of perso	ns or households permit	tted to occupy HMO under condition	ns of licence:
Households 6	Persons 6	]	
		1	
Information referred to a	residential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	c Mandatory conds, HMO	- Fire Mandatory conds, HMO - Furnit	



## Licence No.

#### 2016/01744/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

43 Barcombe Road Brighton BN1 9JQ

Ward

Moulsecoomb And Bevendean

Name & Address of Licen	ce Holder		
Mr Jonathan Brand, Flat 2 31B	Western Road Hove Ea	st Sussex BN3 1AF	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	d HMO (No of storeys, e	etc)	
-		ccupancy = 6, No of Storeys = 3	
Troperty Type – ornated from		occupancy – 0, No or otorcys – 0	
Number of Rooms	Total Number of	Rooms 9	
a) Sleeping	b) Liv	ing Rooms	
,	,	<u> </u>	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Flat	ts: 1
Number of Sen Contained Fi	als.	Number of Non Sen Cont. Flat	.5.
<b>0</b> 1 14 141			
Shared Amenities		ription	
a) Kitchen     b) Bathrooms/Showers	2		
c) W.C.s	2		
0) 11.0.0			
Licence Details			
Commencement date:	24/11/2016	Duration of licence:	04/04/2021
			•
maximum number of persons	s or nouseholds permit	tted to occupy HMO under conditions	of licence:
Households 6	Persons 6		
		_	
Information referred to a r	residential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
O			
Summary of conditions of lic	ence		



## Licence No.

#### 2016/01781/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

16 Bedford Square	
Brighton	
BN1 2PN	

Ward

			<b>vvaru</b> Regency		
Name & Address of Licer	nce Holder				
Mr Bashir Ahmed, 80 Dyke Ro		ahton RN1 5LF			
ii basiiii Ailifica, oo byke Ki	Jad Avenue Dil	gilloii bivi oli			
Name & Address of Pers	on Managing				
	,				
Property Description					
Short description of license	d HMO (No of	storeys, etc)			
Property Type = Not Assigned	d. No of Units =	8. Occupancy =	10, No of Storeys = 5		
1 3 31	,	, ,	· •		
Number of Rooms	Total N	lumber of Room	ns 13		
a) Sleeping 8		b) Living Ro	oms 1		
Number of Self Contained F	lats:	0	Number of Non Sel	If Cont. Flats:	0
Shared Amenities	Number	Description			
ı) Kitchen	8				
) Bathrooms/Showers	2				
e) W.C.s	3				
icence Details					
Commencement date:	12/07/	/2016	Duration of licen	ice:	31/03/2021
Maximum number of persor	ne or housahai	lde normittad ta	occupy HMO under	conditions of li	conco:
			occupy rimo under		conce.
louseholds	Persons	10			
nformation referred to a	recidential n	vonovti tribuo	al ar Landa Tribun	ol.	
nformation referred to a	residentiai pi	roperty tribuna	ar or Lanus Tribuna	al.	
None			Deference	numbar	
Decision of Tribunal			Reference	number	
Summary of conditions of li		ondoton:	LIMO Funcitura Maria	datami acada III	10 Cos
MO - Flec Mandatory conds	. HIVIO - FIRE Mi	angatory conds	HIVIO - FURNITURE Mand	Jatory Conds HIV	/IU - Gas

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/01787/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

59 Bolsover Road Hove BN3 5HQ

Ward

Wish

Name & Address of Licenc	e Holder	
Mr Ayman Al-Arari, 10 Carey D	own Peacehaven BN10 7LF	
Name & Address of Persor	n Managing	
,		
Proporty Docorintion		
Property Description  Short description of licensed	HMO (No of storage atc)	
-	SE, No of Units = 5, Occupancy = 5, No of Storeys = 3	
Property Type - SHARED HOC	SE, NO OF OTHER - 5, Occupancy - 5, NO OF Storeys - 5	
Number of Rooms	Total Number of Rooms 5	
a) Sleeping 5	b) Living Rooms	
Number of Self Contained Fla	ts: 0 Number of Non Self Cont. Flats	1
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number 1 2 2	
Licence Details		
Commencement date:	26/06/2017 Duration of licence:	06/04/2021
Maximum number of persons	or households permitted to occupy HMO under conditions of	licence:
Households 5	Persons 5	
Information referred to a re	esidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lice		IMO Coo



#### Licence No.

#### 2016/01814/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

27A Park Crescent Terrace Brighton BN2 3HD

Ward

St. Peter's And North Laine

Name & Address of Licence	e Holder	
Mrs Patricia Camping, 69 Dyke l		
Name & Address of Person	Managing	
,		
Property Description		
Short description of licensed	HMO (No of storeys, etc)	
•	SE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flat	ts: 0 Number of Non Self C	ont. Flats: 0
Number of Sen Contained Flat	s: 0 Number of Non Self C	ont. Flats:
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	1	
c) W.C.s	2	
Licence Details		
Commencement date:	26/05/2016 Duration of licence:	26/05/2020
Maximum number of persons	or households permitted to occupy HMO under con	nditions of licence:
Households 5	Persons 5	
Information referred to a re	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference nui	mber
Summary of conditions of lice	nce	



#### Licence No.

#### 2016/01968/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

46 Newmarket Road Brighton BN2 3QF

Ward

Hanover And Elm Grove

0
04/2021
0 1/2021
e:



#### Licence No.

#### 2016/01987/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

138 Milner Road Brighton BN2 4BQ

Ward

Moulsecoomb And Bevendean

Name & Address of Licen	ce Holder		
SLL Investment Ltd, Kingfishe	r House 11 Hoffmanns Wa	ay Chelmsford Essex CM1 1GU	
Name & Address of Perso	n Managing		
My Lets Ltd, Amelia House Co	rescent Road Worthing Bl	N11 1QR	
Property Description			
Short description of license	d HMO (No of storeys, et	c)	
Property Type = SHARED HO	USE, No of Units = 6, Occ	upancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of F	Rooms 7	
a) Sleeping	D) LIVIN	g Rooms	
N		N l (N 0 . (C ( E)	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Fla	ats: 1
Shared Amenities	Number Descrip	ation	
a) Kitchen	1	50011	
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	08/11/2016	Duration of licence:	13/04/2021
Maximum number of person	s or households permitte	ed to occupy HMO under conditions	s of licence:
Households 6	Persons 6		
Information referred to a	residential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie Bathroom ventilation, Elec Cer		HMO - Fire Mandatory conds, HMO -	Furniture

Bathroom ventilation, Elec Cert, Fire doors, Gas Supply, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Intumescent strips, Kitchen floor, Timescales



#### Licence No.

#### 2016/02098/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

31 Bevendean Crescent Brighton BN2 4RB

Ward

Moulsecoomb And Bevendean

Name & Address of Licence	Holder		
		- Fact Overey DN2 701	
Mr David Winter & Mrs Susan W	inter, 6 Nevill Way Hove	e East Sussex BN3 /QL	
Nama ? Address of Barson	Managing		
Name & Address of Person	wanaging		
1			
Property Description			
Short description of licensed I	HMO (No of storays, at	ic)	
•	•	•	
Property Type = SHARED HOUS	SE, NO OF UNITS = 1, OCC	cupancy = 6, No or Storeys = 3	
Number of Rooms	Total Number of	Rooms 7	
a) Sleeping	b) Livir	ng Rooms	
,	,		
Number of Self Contained Flat	<b>s</b> : 0	Number of Non Self Cont. Flats	s: 1
rambor or oon contained riac	<b>o.</b>	Number of Non-con-condition	J. 1
Shared Amenities	Number Descri	ption	
Shared Amenities a) Kitchen	Number Descri	ption	
		ption	
a) Kitchen	1	ption	
a) Kitchen b) Bathrooms/Showers c) W.C.s	1 2	ption	
a) Kitchen b) Bathrooms/Showers	1 2	ption	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details	1 2 2		21/04/2021
a) Kitchen b) Bathrooms/Showers c) W.C.s	1 2	ption  Duration of licence:	21/04/2021
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:	05/12/2016		
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons	1 2 2 2 2 05/12/2016 or households permitt	Duration of licence:	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons	05/12/2016	Duration of licence:	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons	1 2 2 2 2 2 O5/12/2016 Or households permitted Persons 6	Duration of licence:	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons Households 6	1 2 2 2 2 2 O5/12/2016 Or households permitted Persons 6	Duration of licence:	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons Households 6  Information referred to a re	1 2 2 2 2 2 O5/12/2016 Or households permitted Persons 6	Duration of licence:	



#### Licence No.

#### 2016/02117/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

13 Caledonian Road Brighton BN2 3HX

Ward

St. Peter's And North Laine

Information referred to a None Decision of Tribunal	residential property t	ribunal or Lands Tribunal:	
Households 5	Persons 5		
Maximum number of person	s or households permi	tted to occupy HMO under conditions of I	icence:
Commencement date:	12/07/2016	Duration of licence:	08/05/2021
Licence Details			
c) W.C.s	2		
b) Bathrooms/Showers	2		
a) Kitchen	1	•	
Shared Amenities	Number Desc	ription	
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Flats:	0
a) Sleeping 5	b) Liv	ing Rooms 1	
Number of Rooms	Total Number of	Rooms 6	
Property Type = SHARED HO	USE, No of Units = 1, Oc	ccupancy = 5, No of Storeys = 3	
Short description of licensed	•	•	
Property Description			
,	3 3		
Name & Address of Perso	on Managing		
M J Sexton, C E Cook & Mr &	wirs Pinder, 23 Bazeniii i	Road Rottingdean BN2 7DB	

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/02129/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

171 Upper Lewes Road Brighton BN2 3FB

Ward

St. Peter's And North Laine

Name & Address of Licence Holder			
Larkwalk Properties Ltd, 23 Sun Lane Harpenden Herts AL5 4EX			
Name & Address of Person Managing			
Mr Adrian Clarke, 23 Sun Lane Harpenden Herts AL5 4EX			
Property Description			
Short description of licensed HMO (No of storeys, etc)			
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3			
Number of Rooms Total Number of Rooms 6			
a) Sleeping b) Living Rooms 1			
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1			
Observed Association			
Shared Amenities Number Description  a) Kitchen 1			
b) Bathrooms/Showers 1			
c) W.C.s 2			
Licence Details			
Common of line and date: 20/04/2024			
Commencement date: 22/08/2016 Duration of licence: 20/04/2021			
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
Households 5 Persons 5			
Households 5 Persons 5			
Information referred to a residential property tribunal or Lands Tribunal:			
None			
Decision of Tribunal Reference number			
Summary of conditions of licence			
HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas			



#### Licence No.

#### 2016/02173/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

35 Guildford Road Brighton BN1 3LW

Ward

St. Peter's And North Laine

Name & Address of Licence	e Holder	
Mrs Judith Baker, 64 Queens Ro	oad Brighton East Sussex BN1 3XD	
Name & Address of Person	Managing	
Home Leasing Brighton Ltd, 18 I	Hyde Gardens Eastbourne East Sussex BN21 4PT	
Property Description		
Short description of licensed I	HMO (No of storeys, etc)	
Property Type = SHARED HOUS	SE, No of Units = 5, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 5	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1		
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description  1 2 2	
Licence Details		
Commencement date:	14/09/2016 Duration of licence:	02/07/2021
commencement date.	Daration of modice.	02/01/2021
Maximum number of persons	or households permitted to occupy HMO under conditions of	of licence:
Households 5 I	Persons 5	
Information referred to a re	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lice	nce	aton, condo



#### Licence No.

#### 2016/02176/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

20 Grafton Street Brighton BN2 1AQ

Ward

Queen's Park

Name & Address of Licen	ce Holder		
Mr David Martin, C/o 47 Norfol	lk Square Brighton BN1 2PA		
Name & Address of Perso	n Managing		
Homelets (Brighton) Ltd, 47 No	orfolk Square Brighton East	Sussex BN1 2PA	
Property Description			
Short description of licensed	d HMO (No of storeys, etc)		
Property Type = SHARED HO	USE, No of Units = 1, Occup	pancy = 8, No of Storeys = 4	
		_	
Number of Rooms	Total Number of Ro	oms 9	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Flats	: 0
Shared Amenities	Number Descripti	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
		_	
Commencement date:	26/10/2016	Duration of licence:	30/07/2021
Maximum numbar of narsan	a ar hausahalda narmittad	to occupy HMO under conditions o	f licence:
maximum number of person	s or nousenoius permitteu	to occupy nino under conditions o	i licerice.
Households 8	Persons 8		
Information referred to a I	residential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Kitchen Facilities, Not Assigned, loft insulation



#### Licence No.

#### 2016/02179/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

9 Hartington Road Brighton BN2 3LJ

Ward

Hanover And Elm Grove

Name & Address of Licence Holder			
Mr David Martin, C/o 47 Norfolk Square Brighton BN1 2PA			
Name & Address of Person Managing			
Homelets (Brighton) Ltd, 47 Norfolk Square Brighton East Sussex BN1 2PA			
Property Description			
Short description of licensed HMO (No of storeys, etc)			
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3			
Number of Rooms Total Number of Rooms 6			
a) Sleeping b) Living Rooms			
a) diceping b) Living Rooms			
Number of Self Contained Flats: 0 Number of Non Self Cont. Flat	s: 0		
Number of Sen Contained Flats.	<b>.</b>		
Shared Amenities Number Description			
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date: 26/10/2016 Duration of licence:	04/05/2021		
Maximum number of persons or households permitted to occupy HMO under conditions	of licence:		
maximum number of persons of nouseholds permitted to occupy nine under conditions	niconice.		
Households 6 Persons 6			
Information referred to a recidential property tribunal or Lande Tribunal			
Information referred to a residential property tribunal or Lands Tribunal:  None			
Decision of Tribunal Reference number			
Decision of Tribulial Reference Humber			

Summary of conditions of licence

Fire cupboards, Fire detection, Gas Cert, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - General 1, HMO - General 6, HMO - General Electrical 1, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Not Assigned, ventilation



#### Licence No.

#### 2016/02183/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

44 Bevendean Crescent Brighton BN2 4RA

Ward

Moulsecoomb And Bevendean

Name & Address of Licen	ce Holder		
Ms Melanie Kinross, 22 Cheal	Close Shoreham BN43	5RQ	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, e	etc)	
Property Type = SHARED HO	USE, No of Units = 1, Oc	ccupancy = 6, No of Storeys = 3	
Number of Deems	Total Number of	5 Da a waa 2	
Number of Rooms	Total Number of		
a) Sleeping 6	b) Liv	ring Rooms 1	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Fl	ats: 0
Shared Amenities	Number Descri	ription	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	06/02/2014	Duration of licence:	04/06/2018
Mavimum numbar of navoan			- of lines
Maximum number of person	s or nousenoids permi	tted to occupy HMO under condition	s of licence:
Households 6	Persons 6		
Information referred to a	residential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie	cence		
		conds, HMO - Furniture Mandatory cond	ds, HMO - Gas



## Licence No.

#### 2016/02191/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

20 George Street Brighton BN2 1RH

Ward

Queen's Park

Name & Address of Licence Holder
Ms Janice Campbell-Cunliffe, 93 North Way Seaford BN25 3JW
Name & Address of Person Managing
Brand Vaughn Ltd, 117 - 118 Western Road Hove BN3 1DB
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 4
Number of Rooms Total Number of Rooms 6
a) Sleeping b) Living Rooms 1
Number of Oak Contained Flates
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1
Shared Amenities         Number         Description           a) Kitchen         1           b) Bathrooms/Showers         2           c) W.C.s         1
Licence Details
D 11 11 11 11 11 11 11 11 11 11 11 11 11
Commencement date: 30/06/2016 Duration of licence: 18/04/2021
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Households 5 Persons 5
Information referred to a residential property tribunal or Lands Tribunal:
None
Decision of Tribunal Reference number
Summary of conditions of licence  HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Doors 4, HMO - Fire Mandatory conds, HMO - Fire Test Certificates, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Electrics 11, HMO - Repairs Stairs 5, HMO - Rubbish Recyc Mandatory conds, HMO - Tenant Agrint Mandatory conds, Other

Fire works



#### Licence No.

#### 2016/02203/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

20 Cross Street Hove BN3 1AJ

Ward

Brunswick And Adelaide

Name & Address of Licence	Holder		
Mr David Martin, C/o 47 Norfolk S			
IVII David IVIAI (IIII, C/O 47 NOTIOIK S	oquale blighton bivi ZPA		
Name & Address of Person	Managing		
Homelets (Brighton) Ltd, 47 Norfo	<u> </u>	PA	
	4 9		
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Occup	ancy = 6, No of Storeys = 3	
N	<b>T</b> .(.) N		
Number of Rooms	Total Number of Ro	oms 7	
a) Sleeping	b) Living	Rooms	
Normalis and Colf Countries of Floto		North an af Nam Oalf Oant Flat	
Number of Self Contained Flats	0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities	Number Descripti	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	23/11/2016	Duration of licence:	06/06/2021
Maximum number of persons o	r households permitted	to occupy HMO under conditions	of licence:
Households 6 P	ersons 6		
Information referred to a res	idential property tribu	ınal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
0			

#### Summary of conditions of licence

Gas cert, HMO - Elec Mandatory conds, HMO - Fire Doors 8, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - General 1, HMO - General 6, HMO - General Electrical 1, HMO - Licensing Loft Insulation, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Ventilation 3, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Not Assigned, Worktop



#### Licence No.

#### 2016/02212/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) Mickanne Lodge 61-62 Upper Lewes Road Brighton BN2 3FG

Ward

St. Peter's And North Laine

Name & Address of Licence	Holder	
Mr Martin Gillard, 41 Rottingdean	Place Brighton BN2 7FS	
Name & Address of Person I	Managing	
,		
Daniel Daniel (Con		
Property Description	W2 (No. 5 Apr.)	
Short description of licensed HI		
Property Type = SHARED HOUSE	E, No of Units = 6, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 8	
a) Sleeping	b) Living Rooms	
z/g		
Number of Self Contained Flats	: 0 Number of Non Self Cont. Flats	s: 1
rumber of our contained rate	. Trainibor of Non Con Contain late	, ,
Shared Amenities N	lumber Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Commencement date:	30/01/2017 Duration of licence:	04/04/2021
Maximum number of persons of	r households permitted to occupy HMO under conditions o	of licence:
Households 6 Pe	ersons 6	
Information referred to a res	idential property tribunal or Lands Tribunal:	
Information referred to a res	idential property tribunal or Lands Tribunal:	
	idential property tribunal or Lands Tribunal:  Reference number	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Kitchen 1, HMO - Licensing Kitchen 6, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs



#### Licence No.

#### 2016/02238/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

17 Ditchling Road Brighton BN1 4SB

Ward

St. Peter's And North Laine

Name & Address of Licence Holder			
Miss Santosh Chand, 99 Buckingham Road Brighton East Sussex BN1 3RB			
Name & Address of Person Managing			
Mr Satish Kainth, 99 Buckingham Road Brighton East Sussex BN1 3RB			
Property Description			
Short description of licensed HMO (No of storeys, etc)			
Property Type = SHARED HOUSE, No of Units = 8, Occupancy = 8, No of Storeys = 4			
Number of Rooms Total Number of Rooms 8			
a) Sleeping b) Living Rooms			
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	.: 0		
Number of Self Contained Flats.	. 0		
Shared Amenities Number Description			
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
	20/20/2020		
Commencement date: 15/07/2016 Duration of licence:	23/08/2020		
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
Households 8 Persons 8			
Information referred to a residential property tribunal or Lands Tribunal:			
None			
Decision of Tribunal Reference number			
O control the control to the control			

Summary of conditions of licence



#### Licence No.

#### 2016/02253/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

39 Carlyle Street Brighton BN2 9XU

Ward

Hanover And Elm Grove

Name & Address of Licer	ce Holder		
Mr Mark Wickenden, 10 Wald	egrave Road Brighton BN1 6G	E	
Name & Address of Person	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, etc)		
Property Type = SHARED HC	USE, No of Units = 1, Occupa	ncv = 5 No of Storevs = 3	
, 10porty 13po - 01###EB 110	, 100 of Office 1, 000apa	, ne el eleleje e	
Number of Rooms	Total Number of Roo	ms 6	
a) Sleeping	b) Living R	ooms	
, , , ,	, 3		
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flat	<b>s</b> : 0
Number of Sen Contained F	ais.	Number of Non Sen Cont. Flat	s. U
Observat Association	N		
Shared Amenities	Number Descriptio	n	
<ul><li>a) Kitchen</li><li>b) Bathrooms/Showers</li></ul>	2		
c) W.C.s	2		
c) w.o.s			
Licence Details			
Commencement date:	05/08/2016	Duration of licence:	03/05/2021
Maximum number of person	o or bougobolds nameitted t	o occupy UMO under conditions	of liganos
maximum number of persor	s or nousenous permitted t	o occupy HMO under conditions	of licefice:
Households 5	Persons 5		
Information referred to a	residential property tribur	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Cummon, of conditions of !!			
Summary of conditions of li	Jenice		



#### Licence No.

#### 2016/02266/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

40 Viaduct Road Brighton BN1 4ND

Ward

St. Peter's And North Laine

Name & Address of Licence	ce Holder	
Mr Mark Wickenden, 10 Walde	egrave Road Brighton BN1 6GE	
Name & Address of Person	n Managing	
,		
Property Description		
Short description of licensed	d HMO (No of storeys, etc)	
Property Type = SHARED HOU	USE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping	b) Living Rooms	
Number of Self Contained Fla	ats: 0 Number of Non Self Cont. Flats: 1	
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Licence Details		
Commencement date:	12/01/2017 <b>Duration of licence</b> : 12/07/2021	
waximum number of persons	s or households permitted to occupy HMO under conditions of licence:	
Households 5	Persons 5	
Information referred to a re	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lic		



#### Licence No.

#### 2016/02267/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

12 Stanley Road Brighton BN1 4NJ

Ward

St. Peter's And North Laine

Name & Address of Licen	nce Holder		
Mrs Nina Wilkins, The Mill Ma	rton Near Welshpool Powy	s SY21 8JY	
Name & Address of Perso	on Managing		
MTM Property Services Ltd, 1	08A Lewes Road Brighton	BN2 4AE	
D ( D ) (			
Property Description	11110 (1)	. 1	
Short description of license	•	•	
Property Type = SHARED HO	OUSE, No of Units = 1, Occ	upancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of F	Rooms 11	
a) Sleeping	b) Livir	g Rooms	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	its: 1
Shared Amenities	Number Descri	otion	
a) Kitchen	2		
b) Bathrooms/Showers c) W.C.s	2		
C) VV.C.S			
Licence Details			
Commencement date:	17/10/2016	Duration of licence:	12/06/2021
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
Households 7	Persons 7		
Information referred to a	residential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	00000		

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Doors 1, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Kitchen 6, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Floors 1, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management



#### Licence No.

#### 2016/02275/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

7 Mayo Road Brighton BN2 3RJ

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
Mrs Nina Wilkins, The Mill Mar	ton Near Welshpool Pow	ys SY21 8JY	
Name & Address of Perso	on Managing		
MTM Property Services Ltd, 10	08A Lewes Road Brighton	n BN2 4AE	
<b>.</b>			
Property Description	LUMO (No es se	1.)	
Short description of licensed			
Property Type = SHARED HO	USE, No of Units = 1, Oc	cupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 7	
a) Sleeping	b) Livi	ing Rooms	
Number of Self Contained FI	ats: 0	Number of Non Self Cont. Flat	ts: 1
Shared Amenities	Number Descr	ription	
a) Kitchen	1	iption	
a) Kitchen b) Bathrooms/Showers	1 2	ription	
a) Kitchen	1	ription	
a) Kitchen b) Bathrooms/Showers	1 2	ription	
a) Kitchen b) Bathrooms/Showers c) W.C.s	1 2 3		
a) Kitchen b) Bathrooms/Showers c) W.C.s	1 2	Duration of licence:	12/06/2021
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:	23/11/2016		12.00.2021
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of person	1 2 3 3 23/11/2016 s or households permit	Duration of licence:	12.00.2021
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:	23/11/2016	Duration of licence:	12.00.2021
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of person  Households 6	1 2 3  23/11/2016  s or households permit  Persons 6	Duration of licence: ted to occupy HMO under conditions	12.00.2021
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of person  Households 6	1 2 3  23/11/2016  s or households permit  Persons 6	Duration of licence:	12.00.2021
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of person Households 6  Information referred to a second content of the second con	1 2 3  23/11/2016  s or households permit  Persons 6	Duration of licence: ted to occupy HMO under conditions	12.00.2021

HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Bathroom 4, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Floors 1, HMO - Repairs Walls 5, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Not Assigned



#### Licence No.

#### 2016/02278/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

33 Sussex Terrace Brighton BN2 9QJ

Ward

Queen's Park

Name & Address of Licer	ce Holder		
		Pood Palaemba, Wast Sugger PH17	6 11 1
WII Antinony Silingsby, 2 New E	Tigianu Collages Handcross	Road Balcombe West Sussex RH17	000
Name & Address of Person	n Managing		
		Balcombe West Sussex RH17 6JU	
Linua Siingsby, 2 New Englan	2 Collages Handcross Road	Balconibe West Sussex Riffr 030	
Property Description			
Short description of license	HMO (No of storevs. etc)		
Property Type = SHARED HC		appay = F. No. of Staraya = 2	
Property Type - SHARED HC	JSE, NO OF OTHES - 5, Occup	ancy – 5, No or Storeys – 5	
Number of Rooms	Total Number of Ro	oms 7	
a) Sleeping	b) Living	Rooms	
a, e.eepg	~, <u>-</u> 9		
Number of Calf Cantained F	-t-: 0	Number of New Colf Cont. Flate	
Number of Self Contained F	ats: 0	Number of Non Self Cont. Flats	:1
Observat Association	Nombra Descripti		
Shared Amenities a) Kitchen	Number Descripti	on	
b) Bathrooms/Showers	2		
c) W.C.s	2		
c) w.o.s			
Licence Details			
Commencement date:	14/07/2016	Duration of licence:	19/06/2021
Maximum number of person	s or households permitted	to occupy HMO under conditions o	f licence:
maximum number of persor	s of flousefloids perfilitted	to occupy rimo under conditions o	i licelice.
Households 5	Persons 5		
Information referred to a	esidential property tribu	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li		o Mandatory conde HMO Eurnituro N	/andaton/



#### Licence No.

#### 2016/02280/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

64 Nesbitt Road Brighton BN2 4BL

Ward

Moulsecoomb And Bevendean

Name & Address of Lice	nce Holder	
Clethorne Properties Ltd, 11	The Broadwalk Bexhill On Sea TN39 4QT	
Name & Address of Pers	on Managing	
,		
Property Description		
Short description of license	ed HMO (No of storeys, etc)	
Property Type = SHARED HO	DUSE, No of Units = 1, Occupancy = 6, No of Storeys = 4	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping 6	b) Living Rooms 1	
a) diceping	b) Living Rooms	
Number of Self Contained F	Flats: 0 Number of Non Self Cont. Flats:	1
Number of Self Contained F	Number of Non Sell Cont. Flats:	I
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	2	
c) W.C.s	3	
Linna Brialla		
Licence Details		
Commencement date:	06/09/2016 Duration of licence:	03/07/2021
Maximum number of persor	ns or households permitted to occupy HMO under conditions of li	icence:
Households 6	Persons 6	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of I		
HMO - Elec Mandatory conds	s, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HM	MO - Gas



#### Licence No.

#### 2016/02356/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

121 Preston Road Brighton BN1 6AF

Ward

Preston Park

Name & Address of Lice	nee Holder		
Mr I D Habens, 48 Carden Av			
Will Dillabelis, 40 Caldell Av	ende brighton bivi one		
Name & Address of Pers	on Managing		
,			
Property Description			
Short description of license	ed HMO (No of storeys, etc	<del>;</del> )	
Property Type = SHARED HO	OUSE, No of Units = 1, Occi	upancy = 5, No of Storeys = 4	
Number of Rooms	Total Number of R	ooms 8	
a) Sleeping 5	D) LIVIN	g Rooms 1	
Normalis and Golf Countries of F	Note:	North or of Non Oalf Oart Fla	4
Number of Self Contained F	Flats: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities	Number Descrip	tion	
a) Kitchen	1	uon	
b) Bathrooms/Showers	1		
c) W.C.s	2		
Licence Details			
Commencement date:	06/10/2016	Duration of licence:	18/05/2021
Maximum number of person	ns or households permitte	d to occupy HMO under conditions	of licence:
		a to occupy time and occurrences	01 110011001
Households 5	Persons 5		
Information referred to a	recidential property tri	ounal or Lande Tribunal:	
None	residential property tri	Junar of Lanus Tribulial.	
Decision of Tribunal		Reference number	
		Reference number	
Summary of conditions of I HMO - Flec Mandatory conds		- Fire Locks, HMO - Fire Mandatory of	conds. HMO -
Furniture Mandatory conds, F		s, HMO - Property Chges Mandatory of	

Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/02388/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 47 Upper Lewes Road Brighton BN2 3FH

Ward

St. Peter's And North Laine

Name & Address of Licence Holder	
Mr R G Baker, Marine Lodge Wheatridge Lane Torquay TQ26RB	
Name & Address of Person Managing	
Mr Nicholas Baker, 8 Downland Close Brighton East Sussex BN2 6DN	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 5, Occupancy = 5, No of Storeys = 3	
Number of Rooms Total Number of Rooms 6	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. F	lats: 1
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s  Number Description  4  3	
Licence Details	
Commencement date: 21/10/2016 Duration of licence:	16/05/2021
Commencement date: 21/10/2016 Duration of licence:	16/05/2021
Maximum number of persons or households permitted to occupy HMO under condition	s of licence:
Households 5 Persons 5	
nouseholds 5 Fersons 5	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of licence	do LIMO. Coo



#### Licence No.

#### 2016/02390/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

65 Hartington Road Brighton BN2 3LJ

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder	
Linda & Steve Harmer-Strange	e, T/a Grosvenor Properties Tudor Grange 13 The Upper Di	rive Hove BN3 6GR
Name & Address of Perso	on Managing	
,		
Property Description		
Short description of license	d HMO (No of storeys, etc)	
Property Type = SHARED HO	USE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 11	
a) Sleeping 6	b) Living Rooms 1	
Number of Self Contained Fl	lats: 0 Number of Non Self Cor	nt. Flats: 1
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Commencement date:	23/08/2016 Duration of licence:	25/05/2021
Maximum number of person	s or households permitted to occupy HMO under condi	itions of licence:
Households 6	Persons 6	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference numb	ber
Summary of conditions of lie		conds HMO Gas



#### Licence No.

#### 2016/02396/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

187 Western Road Brighton BN1 2BA

Ward

		vvaru	Regei	icy
Name & Address of Licer	nce Holder			
Mr I Ozdemir, Alpha House R	Regis Road Kentish	h Town London NW5 3EW		
Name & Address of Person	on Managing			
Belvoir Lettings, 115 Western	Road Brighton Ea	ast Sussex BN1 2AB		
Property Description				
Short description of license	•			
Property Type = SHARED HC	OUSE, No of Units	= 8, Occupancy = 8, No of Storey	s = 3	
Number of Rooms	Total Nun	nber of Rooms 8		
a) Sleeping 8		b) Living Rooms 1		
Number of Self Contained F	lats:	0 Number of Non S	Self Cont. Flats:	1
Shared Amenities	Number	Description		
a) Kitchen	2			
b) Bathrooms/Showers c) W.C.s	2			
C) W.O.S	2			
Licence Details				
	22/12/22			20/27/2024
Commencement date:	06/10/20	Duration of lice	ence:	09/05/2021
Maximum number of persor	ıs or households	permitted to occupy HMO unde	er conditions of li	cence:
Households 8	Persons	8		
Tiouseriolus	rersons			
Information referred to a	residential pro	perty tribunal or Lands Tribu	nal:	
None				
Decision of Tribunal		Reference	ce number	
Summary of conditions of li HMO - Elec Mandatory conds		n Systems 1, HMO - Fire Mandato	ry conds, HMO - F	- Furniture

Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Bathroom 4, HMO - Licensing Kitchen 6, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/02403/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

36 Roedale Road Brighton BN1 7GB

Ward

Hollingdean And Stanmer

Nome O Adduses of Licen	on Halden	
Name & Address of Licen		
Mr & Mrs Richard & Mary Atkii	nson, The White House 2 Lavant Road Chichester PO19 5RQ	
Nama & Address of Bores	on Managing	
Name & Address of Perso		
Q Lets Ltd T/A Q Estate Agent	ts, Maytree House Meres Lane Cross In Hand Heathfield East Su	JSSEX TN21 UTZ
Property Description		
Short description of license	d HMO (No of storevs. etc)	
•	USE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Floperty Type – SHARED HO	OSE, NO OF OTHES = 1, Occupancy = 3, NO OF Storeys = 3	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping	b) Living Rooms	
Number of Self Contained Fi	lats: 0 Number of Non Self Cont. Fla	nts: 1
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	1	
c) W.C.s	2	
Licence Details		
Commencement date:	24/11/2016 Duration of licence:	22/05/2021
Maximum number of person	s or households permitted to occupy HMO under conditions	of licence:
Households 5	Persons 5	
0		
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lie	cence	
	HMO - Fire Mandatory conds, HMO - Furniture Mandatory cond	s, HMO - Gas



#### Licence No.

#### 2016/02408/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

14 Upper Wellington Road Brighton BN2 3AN

Ward

Hanover And Elm Grove

Name & Address of Licence	e Holder	
Mrs G D Perry, 1 Le Brun Road		
Name & Address of Person	n Managing	
,		
Durante Description		
Property Description  Short description of licensed	HMO (No of storous ats)	
•	• • •	
Property Type = SHARED HOU	SE, No of Units = 1, Occupancy = 5, No of Sto	reys = 3
Number of Rooms	Total Number of Rooms 6	
a) Sleeping	b) Living Rooms	
Number of Self Contained Fla	ts: 0 Number of No	on Self Cont. Flats:
Shared Amenities	Number Description	
a) Kitchen	1 2	
b) Bathrooms/Showers c) W.C.s	2	
Licence Details		
Commencement date:	03/11/2016 <b>Duration of</b>	licence: 10/05/2021
Commencement date.	Duration of	10/03/2021
Maximum number of persons	or households permitted to occupy HMO u	nder conditions of licence:
Households 5	Persons 5	
Information referred to a re	esidential property tribunal or Lands Tr	ibunal:
None		
Decision of Tribunal	Refer	ence number
Summary of conditions of lic	ence	



#### Licence No.

#### 2016/02409/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

74 Cobden Road Brighton BN2 9TJ

Ward

Hanover And Elm Grove

Name & Address of Licence	e Holder		
Linda & Steve Harmer-Strange,	T/a Grosvenor Properti	es Tudor Grange 13 The Upper Drive Ho	ove BN3 6GR
Name & Address of Person	n Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys, $\epsilon$	etc)	
Property Type = SHARED HOU	JSE, No of Units = 1, Oc	cupancy = 5, No of Storeys = 3	
N ( D	T. (.1N)	D	
Number of Rooms	Total Number of	Rooms 6	
a) Sleeping 5	b) Livi	ing Rooms 1	
Number of Self Contained Fla	its: 0	Number of Non Self Cont. Flat	ts: 1
01	Nl	*.**	
Shared Amenities		iption	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
		I	
Commencement date:	30/08/2016	Duration of licence:	25/05/2021
Maximum number of persons	or households permit	ted to occupy HMO under conditions	of licence:
	_	1	
Households 5	Persons 5		
Information referred to a re	esidential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice		onde HMO Eurnituro Mandatory conde	HMO Gas



#### Licence No.

#### 2016/02445/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 34 Dyke Road Drive Brighton BN1 6AJ

Ward

Preston Park

Name & Address of Licence	Holder		
Mr Mohan Kanagaratnam, 34 Dyk	e Road Drive Brighton BN1	6AJ	
Name & Address of Person I	Managing		
,			
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 4, Occupar	ncy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Roor	ns 6	
a) Sleeping	b) Living Ro	ooms	
		7	
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flats	: 0
Shared Amenities N	lumber Description		
a) Kitchen	lumber Description	I	
b) Bathrooms/Showers			
c) W.C.s			
0) 11.0.0			
Licence Details			
		Γ	
Commencement date:	23/10/2017	Duration of licence:	12/01/2021
Maximum number of persons o	r households permitted to	o occupy HMO under conditions o	f licence:
-		• • • • • • • • • • • • • • • • • • • •	
Households 4 Po	ersons 5		
Information referred to a res	idential property tribus	al or Lande Tribunal:	
None	idential property tribuil	iai or Lanus Impunai.	
Decision of Tribunal		Reference number	
		TOTOTOTION HATHINGT	
Cummany of conditions of licen	.00		



#### Licence No.

#### 2016/02457/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 27 De Montfort Road Brighton BN2 3AW

Ward

Hanover And Elm Grove

Name & Address of Licence	Holder		
Ms Sue Hepburn, 14 Maltravers	Street Arundel BN18 9BU		
Name & Address of Person			
G4 Lets, 2 Hythe Road Brighton	BN1 6JS		
Duamanti Daganintian			
Property Description  Short description of licensed h	JMO (No of storous ats)		
·		panay = 9. No. of Staraya = 4	
Property Type = SHARED HOUS	SE, NO OF UTILS = 1, Occup	bancy = 8, No or Storeys = 4	
Number of Rooms	Total Number of Ro	oms 8	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Flat	<b>s</b> : 0	Number of Non Self Cont. Fla	ts: 0
	Number Descripti	on	
a) Kitchen b) Bathrooms/Showers			
c) W.C.s			
,			
Licence Details			
Commencement date:	28/07/2016	Duration of licence:	03/04/2021
Commencement date.	20/01/2010	Duration of ficence.	03/04/2021
Maximum number of persons	or households permitted	to occupy HMO under conditions	of licence:
Households 8 F	Persons 8		
Information referred to a re	sidential property trib	unal or Lands Tribunal:	
None			
None Decision of Tribunal		Reference number	



#### Licence No.

#### 2016/02458/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

23 Hollingbury Road Brighton BN1 7JB

Ward

Hollingdean And Stanmer

Name & Address of Licence	e Holder		
Mr Jeremy Barrett, Rushett Hou		Faversham Kent ME13 0SG	
Name & Address of Person	Managing		
G4 Lets, 2 Hythe Road Brighton	BN1 6JS		
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOU	SE, No of Units = 7, Occup	pancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of Ro	oms 7	
a) Sleeping	b) Living		
a) Sieeping	b) Living	Noons	
Number of Self Contained Flat	ts: 0	Number of Non Self Cont. Fla	ts: 0
Number of Self Contained Flat	0	Number of Non Self Cont. I la	is. 0
Shared Amenities	Number Descripti	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	15/09/2016	Duration of licence:	06/10/2020
Maximum number of persons	or households permitted	to occupy HMO under conditions	of licence:
Households 7	Persons 7		
Information referred to a re	sidential property tribu	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence



#### Licence No.

#### 2016/02459/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

128 Upper Lewes Road Brighton BN2 3FD

Ward

St. Peter's And North Laine

Name & Address of Licer	ice Holder			
Ms Sue Hepburn, 14 Maltrave		BN18 9BU		
•				
Name & Address of Person	on Managing			
G4 Lets, 2 Hythe Road Bright	on BN1 6JS			
Property Description				
Short description of license	d HMO (No of sto	oreys, etc)		
Property Type = SHARED HC	USE, No of Units	= 1, Occupan	cy = 7, No of Storeys = 4	
Number of Rooms	Total Nun	mber of Room	ns 8	
a) Sleeping 7		b) Living Ro	oms 1	
a, e.eepg		2) =g : 10	·····	
Number of Self Contained F	lats:	0	Number of Non Self Cont. Flats:	0
Shared Amenities	Number	Description		
a) Kitchen	2			
b) Bathrooms/Showers	2			
c) W.C.s	3			
Licence Details				
	Г			
Commencement date:	26/10/20	)16	Duration of licence:	11/05/2021
Maximum number of person	s or households	permitted to	occupy HMO under conditions of li	icence:
Households 7	Persons	7		
Information referred to a	residential prop	perty tribuna	al or Lands Tribunal:	
None		porty tribum	ar or Euriao Irribanian	
Decision of Tribunal			Reference number	
Summary of conditions of li Doors, Elec cert, Freezer, Gas		e Mandatory c	onds, HMO - Furniture Mandatory cor	nds, HMO

Doors, Elec cert, Freezer, Gas certs, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, IS to lounge, Sink, Sockets, WHBs, damaged door



#### Licence No.

#### 2016/02466/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

7 Egremont Place Brighton BN2 0GA

Ward

Queen's Park

Decision of Tribunal		Neierence number	
Desirios of Talk		Reference number	
None			
Information referred to a res	idential property tri	bunal or Lands Tribunal:	
nousellolus 0 P	ei suiis 0		
Households 6 P	ersons 6		
Maximum number of persons o	r households permitte	ed to occupy HMO under conditions	of licence:
Commencement date:	06/10/2016	Duration of licence:	09/05/2021
Licence Details			
Licence Details			
c) W.C.s	2		
b) Bathrooms/Showers	2		
a) Kitchen	1		
Shared Amenities	Number Descrip	otion	
Number of Self Contained Flats	0	Number of Non Self Cont. Fla	nts: 0
- -	•	_	
a) Sleeping 5	b) Livin	g Rooms 1	
Number of Rooms	Total Number of F	Rooms 6	
Property Type = SHARED HOUS	E, No of Units = 6, Occ	upancy = 6, No of Storeys = 4	
Short description of licensed H		•	
Property Description			
,			
Name & Address of Person	Managing		
Mr Michael Flood, 7 Egremont Pla		ex BN2 0GA	
Name & Address of Licence	Holder		



#### Licence No.

#### 2016/02488/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

27 Campbell Road Brighton BN1 4QD

Ward

Preston Park

Name & Address of Licence Holder  Mr Dominic O'Shea, P O Box 2080 Purley Surrey CR8 3ZA  Name & Address of Person Managing  MTM Property Services Ltd, 108A Lewes Road Brighton BN2 4AE  Property Description  Short description of licensed HMO (No of storeys, etc)  Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3  Number of Rooms  Total Number of Rooms  a) Sleeping  b) Living Rooms  Number of Self Contained Flats:  0  Number of Non Self Cont. Flats:  0  Shared Amenities  Number  Description
Name & Address of Person Managing  MTM Property Services Ltd, 108A Lewes Road Brighton BN2 4AE  Property Description  Short description of licensed HMO (No of storeys, etc)  Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3  Number of Rooms  Total Number of Rooms  a) Sleeping  b) Living Rooms  Number of Self Contained Flats:  0 Number of Non Self Cont. Flats:  0
MTM Property Services Ltd, 108A Lewes Road Brighton BN2 4AE  Property Description Short description of licensed HMO (No of storeys, etc) Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3  Number of Rooms Total Number of Rooms 6 a) Sleeping b) Living Rooms  Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
MTM Property Services Ltd, 108A Lewes Road Brighton BN2 4AE  Property Description Short description of licensed HMO (No of storeys, etc) Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3  Number of Rooms Total Number of Rooms 6 a) Sleeping b) Living Rooms  Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
Property Description  Short description of licensed HMO (No of storeys, etc)  Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3  Number of Rooms
Short description of licensed HMO (No of storeys, etc)  Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3  Number of Rooms
Short description of licensed HMO (No of storeys, etc)  Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3  Number of Rooms
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3  Number of Rooms
Number of Rooms Total Number of Rooms 6 a) Sleeping b) Living Rooms  Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
a) Sleeping b) Living Rooms  Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
a) Sleeping b) Living Rooms  Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
Shared Amenities Number Description
Shared Amenities Number Description
a) Kitaban
a) Kitchen b) Bathrooms/Showers
c) W.C.s
Licence Details
Commencement date: 02/02/2017 Duration of licence: 16/05/2021
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Households 5 Persons 5
Households 5 Persons 5
Households 5 Persons 5  Information referred to a residential property tribunal or Lands Tribunal:
Households 5 Persons 5

HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Structural Fire Works



#### Licence No.

#### 2016/02514/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

39 Riley Road Brighton BN2 4AG

Ward

Moulsecoomb And Bevendean

Name & Address of Licence	e Holder				
Mrs Sybilla True, 114 Mackie A	venue Brighton BN1 8RD	)			
Name & Address of Persor	n Managing				
Kendrick Property Services Ltd,	10-12 Lewes Road Brig	hton BN2 3HP			
Property Description					
Short description of licensed	HMO (No of storeys, et	tc)			
Property Type = SHARED HOU	SE, No of Units = 5, Occ	cupancy = 5, No of Storeys = 3			
		_			
Number of Rooms	Total Number of	Rooms 6			
a) Sleeping	b) Livir	ng Rooms			
Number of Self Contained Fla	<b>ts</b> : 0	Number of Non Self Cont. Fla	ts: 1		
Shared Amenities	Number Descri	ption			
a) Kitchen	1				
b) Bathrooms/Showers	1				
c) W.C.s	2				
Licence Details					
Liconoc Dotano					
Commencement date:	22/07/2016	Duration of licence:	11/05/2021		
• • • • • • • • • • • • • • • • • • •					
waximum number of persons	or nousenoids permitt	ed to occupy HMO under conditions	OT IICENCE:		
Households 5	Persons 5				
Information referred to a re	esidential property tr	ibunal or Lands Tribunal:			
None					
Decision of Tribunal		Reference number			
Summary of conditions of lice	ance				



#### Licence No.

#### 2016/02556/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Masra House 24 Dyke Road Brighton BN1 3JA

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
Mr James Delicata, 167 South	Lambeth Road London S	SW8 1XW	
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license		•	
Property Type = BEDSIT, No	of Units = 13, Occupancy	= 20, No of Storeys = 4	
Number of Rooms	Total Number of	Rooms 13	
a) Sleeping 13	h) Livi	ng Rooms	
a) Sidepining	J) 2		
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats:	1
Number of Jen Johnamea I	uts.	Number of Non-Sen Sont. Flats.	'
Shared Amenities	Number Descr	iption	
a) Kitchen	13		
b) Bathrooms/Showers	3		
c) W.C.s	5		
Licence Details			
Licence Details			
Commencement date:	10/01/2017	Duration of licence:	27/02/2021
Mayimum unahay of your	bb -		
Maximum number of person	s or nousenoids permit	ted to occupy HMO under conditions of	licence:
Households 20	Persons 20		
	residential property to	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie HMO - Elec Mandatory conds,		onds, HMO - Furniture Mandatory conds, H	MO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Bathroom 17, HMO - Repairs Heating 5, HMO - Repairs Walls 6, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



## Licence No.

#### 2016/02580/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

63 Brentwood Road Brighton BN1 7ET

Ward

Hollingdean And Stanmer

Name & Address of Licence	Holder			
Mrs Sarah Teasdale, 206 New C	hurch Road Hove BN3	3 4EA		
Name & Address of Person	Managing			
Pavillion Properties Ltd, 128 - 129	9 Lewes Road Brighto	n BN2 3LG		
Property Description				
Short description of licensed H	MO (No of storeys, e	etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Oc	ccupancy = 6, No of Storeys = 3		
1 7 71	,			
Number of Rooms	Total Number of	Rooms 11		
a) Sleeping	b) Liv	ing Rooms		
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Fla	ts: 0	
Shared Amenities	Number Desci	ription		
a) Kitchen	1			
b) Bathrooms/Showers	2			
c) W.C.s	2			
Licence Details				
0	00/00/0040	]	00/00/0004	
Commencement date:	26/09/2016	Duration of licence:	28/06/2021	
Maximum number of persons of	or households permit	tted to occupy HMO under conditions	of licence:	
Households 6 P	ersons 6			
Information referred to a re-	sidential property t	vibunal av Landa Tvibunak		
Information referred to a res	sidential property t	ribunal or Lands Tribunal:		
None				
Decision of Tribunal		Reference number		
Summary of conditions of licer	nce			



## Licence No.

#### 2016/02594/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

94 Shaftesbury Road Brighton BN1 4NG

Ward

St. Peter's And North Laine

Name & Address of Licer		
Mr Michael & Mrs Sylvia Hobo	lay, 28 Montpelier Crescent Brighton BN1 3XB	
Nama ? Address of Bara	on Monoging	
Name & Address of Perso		
nome Leasing Ltd, To hyde d	ardens Eastbourne BN21 4PT	
Property Description		
Short description of license	d HMO (No of storeys, etc)	
·	USE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 9	
a) Sleeping 5	b) Living Rooms 2	
Number of Self Contained F	lats: 0 Number of Non Self Cont. Flats:	1
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	1	
c) W.C.s	2	
Licence Details		
Commonoement data:	06/40/2046 Pureties of licenses	02/07/2024
Commencement date:	06/10/2016 Duration of licence:	03/07/2021
Maximum number of persor	s or households permitted to occupy HMO under conditions of li	icence:
Households 5	Persons 5	
nouseriolus	reisons	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of li HMO - Elec Mandatory conds	cence . HMO - Fire Mandatory conds. HMO - Furniture Mandatory conds. HM	MO - Gas



## Licence No.

#### 2016/02597/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

24 Islingword Street Brighton BN2 9UR

Ward

Hanover And Elm Grove

Name & Address of Licer	ice Holder			
Mrs Hilary Harris, 5 West Hill	Street Brighton Ea	ast Sussex BN	I1 3RR	
Name & Address of Person	on Managing			
Property Description				
Short description of license	d HMO (No of sto	oreys, etc)		
Property Type = SHARED HC	USE, No of Units	= 1, Occupan	icy = 5, No of Storeys = 4	
Number of Decree	Total Non	mbar of Door	F	
Number of Rooms	i otai Nur	mber of Roon		
a) Sleeping 5		b) Living Ro	ooms 1	
			_	,
Number of Self Contained F	lats:	0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number	Description	1	
a) Kitchen	1			
) Bathrooms/Showers	2			
e) W.C.s	3			
icence Details				
			_	
Commencement date:	08/08/20	)16	Duration of licence:	19/06/2021
Maximum number of nerson	ns or households	s nermitted to	occupy HMO under conditions of l	icence:
			occupy rime under conditions or i	ioonioo.
Households 5	Persons	5		
nformation referred to a	residential pro	perty tribun	al or Lands Tribunal:	
None				
Decision of Tribunal	ion of Tribunal Reference number			
	, HMO - Fire Man		HMO - Furniture Mandatory conds, H	

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



## Licence No.

#### 2016/02600/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

32 De Montfort Road Brighton BN2 3AU

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder			
Mr Peter Leach, 5 New Cottag	es Upper Green Road Sl	hipbourne Kent TN11 9PN		
Name & Address of Perso	on Managing			
,				
Property Description				
Short description of license	d HMO (No of storeys, e	etc)		
Property Type = SHARED HO	USE. No of Units = 1. Oc	ccupancy = 6, No of Storeys = 3		
Number of Rooms	Total Number of	Rooms 10		
a) Sleeping	b) Liv	ing Rooms		
Number of Self Contained F	ats: 0	Number of Non Self Cont. Fla	ts: 1	
Shared Amenities	Number Descr	ription		
a) Kitchen	1			
b) Bathrooms/Showers	2			
c) W.C.s	2			
Licence Details				
Commencement date:	07/12/2016	Duration of licence:	04/06/2021	
Commencement date.	07/12/2010	Duration of ficerice.	04/00/2021	
Maximum number of person	s or households permit	ted to occupy HMO under conditions	of licence:	
Households 6	Persons 6			
Information referred to a	residential property t	ribunal or Lands Tribunal:		
	residential property t	Hounar Of Lanus Tribunal.		
None  Decision of Tribunal		Deference number		
Decision of Tribunal		Reference number		
Summary of conditions of lie	cence			



## Licence No.

#### 2016/02611/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

104 The Avenue Brighton BN2 4FA

Ward

Moulsecoomb And Bevendean

Name & Address of Licer	ce Holder		
Clethorne Properties Ltd, 11 T		-on-sea TN39 4QT	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of license	d HMO (No of storey	s, etc)	
Property Type = SHARED HC	USE, No of Units = 1,	Occupancy = 7, No of Storeys = 3	
Number of Rooms	Total Number	r of Rooms 8	
a) Sleeping 7	b)	Living Rooms 1	
	-,		
Number of Self Contained F	lats:	Number of Non Self Cont. Fla	its: 1
Shared Amenities	Number De	escription	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	3		
Licence Details			
Commencement date:	06/09/2016	Duration of licence:	26/07/2021
Maximum number of person	s or households per	rmitted to occupy HMO under conditions	of licence:
Households 7	Persons 7		
Information referred to a	residential propert	ty tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li		ry conds. HMO - Furniture Mandatory cond	s HMO - Gas



## Licence No.

#### 2016/02618/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

155 Upper Lewes Road Brighton BN2 3FB

Ward

St. Peter's And North Laine

Name O Address - Cl-	an Halder			
Name & Address of Licer				
Mr Victor J F Woolgar, 52A Hi	II Brow Hove BN3	6DD		
Name & Address of Person				
Mortgage Express, Mortgage	Express Croft Roa	d Crossflats E	Bingley West Yorks BD16 2UA	
Property Description				
Short description of license	d HMO (No of sto	reys, etc)		
Property Type = SHARED HC	USE, No of Units	= 5, Occupan	cy = 5, No of Storeys = 3	
Number of Deems	Total Num	show of Doom	. 40	
Number of Rooms	i otai num	nber of Room		
a) Sleeping		b) Living Ro	oms	
Number of Self Contained F	lats:	0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number	Description		
a) Kitchen	1			
b) Bathrooms/Showers	1			
c) W.C.s	2			
Licence Details				
Commencement date:	08/07/201	16	Duration of licence:	18/04/2021
				•
Maximum number of persor	is or nousenoids	permitted to	occupy HMO under conditions of	licence:
Households 5	Persons	5		
Information referred to a	residential prop	perty tribuna	al or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of li	cence			
		latory conds. I	HMO - Furniture Mandatory conds, H	MO - Gas



## Licence No.

#### 2016/02627/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

16 Jevington Drive Brighton BN2 4DG

Ward

Moulsecoomb And Bevendean

Name & Address of Licen			
Mr David Fairbrother, 2-3 Far	Cotton Stones Millbank H	alifax HX6 3ET	
Nama ? Address of Bares	n Managing		
Name & Address of Perso		DOOY DNA ACA	
Brighton Homes, 3 St Georges	s Flace Brighton East Sus	SSEX DIVI 4GA	
Property Description			
Short description of license	d HMO (No of storeys, e	tc)	
Property Type = SHARED HO	USE, No of Units = 1, Oc	cupancy = 6, No of Storeys = 3	
. , , , ,	·		
Number of Rooms	Total Number of	Rooms 7	
a) Sleeping	b) Livi	ng Rooms	
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities	Number Descr	iption	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
	27/22/22/2		20/27/2004
Commencement date:	05/08/2016	Duration of licence:	29/05/2021
Maximum number of person	s or households permit	ted to occupy HMO under conditions	of licence:
Households 6	Persons 6		
Tiousellolus 0	reisulis U		
Information referred to a	residential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie	cence		



## Licence No.

#### 2016/02641/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

61 Vere Road Brighton BN1 4NQ

Ward

St. Peter's And North Laine

Name & Address of Licence Holder	
Mr Dominic O'Shea, P O Box 2080 Purley Surrey CR8 3ZA	
Will Bollimite Collea, 1 C Box 2000 1 diley ouriey Cito 32A	
Name & Address of Person Managing	
MTM Property Services Ltd, 108A Lewes Road Brighton BN2 4AE	
<del>_</del>	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms Total Number of Rooms 9	
a) Sleeping b) Living Rooms 1	
Number of Self Contained Flats: 0 Number of Non Self Cont.	Flats: 1
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s  Number  Description  1  1	
Licence Details	
04/00/0047	40/05/0004
Commencement date: 01/02/2017 Duration of licence:	16/05/2021
Maximum number of persons or households permitted to occupy HMO under condition	ons of licence:
Households 5 Persons 5	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	r
Summary of conditions of licence HMO - Flec Mandatory conds HMO - Fire Mandatory conds HMO - Furniture Mandatory co	onds HMO - Gas



## Licence No.

#### 2016/02650/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

34 Franklin Road Brighton BN2 3AE

Ward

Hanover And Elm Grove

Name & Address of Lice	nce Holder			
Mrs Hilary Harris, 5 West Hill	Street Brighton East	Sussex BN1 3RR		
Name & Address of Pers	on Managing			
Mortgage Express, PO Box 4	Bingley BD16 2VG			
Property Description				
Short description of license	ed HMO (No of store	ys, etc)		
Property Type = SHARED He	OUSE, No of Units = 1	, Occupancy = 5, No of Store	eys = 3	
Number of Rooms	Total Numb	er of Rooms 5		
a) Sleeping 5	D	Living Rooms 1		
	<b>.</b> .			
Number of Self Contained	-lats:	0 Number of Non	Self Cont. Flats:	0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number D 1 2 2	escription		
Licence Details				
Commencement date:	08/08/2016	Duration of li	cence:	19/06/2021
Maximum number of perso	ns or households pe	rmitted to occupy HMO und	der conditions of li	cence:
Hawaahalda 5	<b>D</b>			
Households 5	Persons 5			
Information referred to a	residential prope	ty tribunal or Lands Trib	unal:	
None				
Decision of Tribunal		Referen	nce number	
Summary of conditions of HMO - Elec Mandatory cond		ory conds, HMO - Furniture M	landatory conds, HN	MO - Gas



## Licence No.

#### 2016/02701/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

175 Hollingdean Terrace Brighton BN1 7HF

Ward

Hollingdean And Stanmer

Name & Address of Licer	nce Holder		
Mr Ian Alexander Oliver, 87 E	lm Road Earley Reading RG	6 5TB	
Name & Address of Person	on Managing		
Mrs Lorna Oliver, 87 Elm Roa	d Earley Reading RG6 5TB		
Property Description			
Short description of license	d HMO (No of storeys, etc)		
Property Type = SHARED HC	OUSE, No of Units = 1, Occu	pancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Ro	ooms 9	
a) Sleeping 5	b) Living	Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fl	ats: 1
Shared Amenities	Number Descript	ion	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Licence Details			
Commencement date:	08/08/2016	Duration of licence:	03/05/2021
Maximum number of persor	is or households permitted	I to occupy HMO under condition	s of licence:
Households 5	Persons 5		
Information referred to a	residential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	cence		
HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas			



## Licence No.

#### 2016/02715/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

62 Bernard Road Brighton BN2 3EQ

Ward

Hanover And Elm Grove

Name & Address of Licence	Holder		
Allium Investment Ltd, Floor 2 Le	Marchant House Le Truch	oot St Peter Port Guernsey GY1 1GR	
Name & Address of Person I	<b>/</b> lanaging		
G4 Lets, 2 Hythe Road Brighton B	N1 6JS		
Property Description			
Short description of licensed HI	MO (No of storeys, etc)		
Property Type = SHARED HOUSE	Ξ, No of Units = 1, Occupa	ancy = 7, No of Storeys = 3	
	_	_	
Number of Rooms	Total Number of Roo	oms 7	
a) Sleeping	b) Living F	Rooms	
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flats	s: 0
Shared Amenities N	lumber Description	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Licence Details			
Commencement date:	28/07/2016	Duration of licence:	29/03/2021
Maximum number of nersons of	r bauaabalda narmittad	to accumu LIMO under conditions o	of licenses
maximum number of persons of	nousenoids permitted	to occupy HMO under conditions o	or incence:
Households 7 Pe	ersons 7		
Information referred to a resi	dential property tribu	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licen	20		



## Licence No.

#### 2016/02722/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

62 Hollingdean Terrace Brighton BN1 7HA

Ward

Hollingdean And Stanmer

Name & Address of Licer	nce Holder				
Mr & Mrs J Barrett, Rushett H	ouse Rushett Lane Norton	Nr Faversham Kent ME13 0SG			
Name & Address of Pers	on Managing				
G4 Lets, 2 Hythe Road Bright	on BN1 6JS				
Property Description					
Short description of license	d HMO (No of storeys, et	c)			
Property Type = SHARED HC	OUSE, No of Units = 1, Occ	upancy = 9, No of Storeys = 4			
1 7 71	,	, , , , , , , , , , , , , , , , , , ,			
Number of Rooms	Total Number of F	Rooms 2			
a) Sleeping 9	b) Livin	g Rooms 1			
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ats: 0		
Shared Amenities	Number Descrip	otion			
a) Kitchen	2	Stion			
b) Bathrooms/Showers	2				
c) W.C.s	3				
Licence Details					
Camana and a data.	40/06/2047	Demotion of linears	22/05/2024		
Commencement date:	19/06/2017	Duration of licence:	22/05/2021		
Maximum number of persor	ns or households permitte	ed to occupy HMO under conditions	s of licence:		
-	-				
Households 9	Persons 9				
nformation referred to a	recidential preparty tri	bunal ar Landa Tribunal			
	residential property tri	bunal or Lands Tribunal:			
None					
Decision of Tribunal		Reference number			
	, HMO - Fire Mandatory co	nds, HMO - Furniture Mandatory cond			



## Licence No.

#### 2016/02734/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

81 Upper North Street Brighton BN1 3FL

Ward

			vvaru	Regei	icy
Name & Address of Licer	nce Holder				
Ms Elizabeth Webb, C/o 47 N	orfolk Square Br	ighton BN1 2PA			
Name & Address of Person	on Managing				
Homelets (Brighton) Ltd, 47 N	orfolk Square Br	ighton BN1 2PA			
Property Description					
Short description of license	d HMO (No of s	toreys, etc)			
Property Type = SHARED HC	USE, No of Unit	s = 1, Occupano	cy = 6, No of Storeys	= 3	
Number of Rooms	Total Nu	umber of Room	s 7		
	TOtal No				
a) Sleeping 6		b) Living Roo	oms 1		
		_			
Number of Self Contained F	lats:	0	Number of Non Se	elf Cont. Flats:	1
Shared Amenities	Number	Description			
a) Kitchen	2	Description			
b) Bathrooms/Showers	1				
c) W.C.s	2				
0, 11.0.0					
Licence Details					
<b>O</b>	00/40/6	2040	B		00/05/0004
Commencement date:	06/10/2	:016	Duration of lice	nce:	30/05/2021
Maximum number of persor	ıs or household	ls permitted to	occupy HMO under	conditions of li	icence:
Households 6	Persons	6			
nousenoius	Persons	0			
Information referred to a	residential pr	operty tribuna	ıl or Lands Tribun	ıal:	
None					
Decision of Tribunal			Reference	number	
Summary of conditions of li		ndatory conds +	HMO - Furniture Man	datory conds HM	MO - Gas

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs



## Licence No.

#### 2016/02735/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

22 Hanover Terrace Brighton BN2 9SN

Ward

Hanover And Elm Grove

Name & Address of Licen	ice Holder		
Mr Syed Mohaiz Shah, 218 Di	tchling Road Brighton BN1 6J	E	
Name & Address of Perso	on Managing		
S J Lettings Ltd, 52 Lewes Ro	ad Brighton BN2 3HW		
Property Description			
Short description of license	d HMO (No of storeys, etc)		
Property Type = SHARED HO	USE, No of Units = 1, Occupa	ancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Roo	oms 6	
a) Sleeping 5	b) Living F	Rooms 1	
z) -:pg			
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ts: 1
Number of Jen Johnamea I	0	- Number of Non-Sen Sont. Fla	1
Shared Amenities	Number Description	on	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Detaile			
Licence Details			
Commencement date:	10/08/2016	Duration of licence:	10/08/2021
Maximum number of person	s or households permitted t	to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Information referred to a	residential property tribu	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li			
		ked MOE, HMO - Fire Mandatory co HMO - Property Chges Mandatory c	
Fulfillule ivialitiatory collus, n	ivio - Gas ivialidatory corids, F	inio - Froperty Criges Maridatory C	Ulius, FIVIO -

Fire Alarm, HMO - Elec Mandatory conds, HMO - Fire Blocked MOE, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Bathroom 16, HMO - Repairs Bathroom 18, HMO - Repairs Electrics 10, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Other Fire Works



## Licence No.

#### 2016/02806/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

158 Ladysmith Road Brighton BN2 4EG

Ward

Moulsecoomb And Bevendean

Name & Address of Licen	ce Holder		
Ms Lynne Stewart, Flat 2 44 0	Grand Crescent Rottingdo	ean East Sussex BN2 7GL	
Name & Address of Perso	n Managing		
Kay Notley, 44 Grand Crescen	t Rottingdean BN2 7GL		
Property Description			
Short description of licensed	d HMO (No of storeys, e	etc)	
Property Type = SHARED HO	USE, No of Units = 5, Od	ccupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of	f Rooms 6	
a) Sleeping	b) Liv	ring Rooms	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Flat	ts: 1
Shared Amenities	Number Desc	ription	
a) Kitchen	1		
b) Bathrooms/Showers	1 1		
†	1		
b) Bathrooms/Showers c) W.C.s	1 1		
b) Bathrooms/Showers	1 1		
b) Bathrooms/Showers c) W.C.s	1 1	Duration of licence:	30/05/2021
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:	25/08/2016	Duration of licence:	
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:	25/08/2016	7	
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:	25/08/2016	Duration of licence:	
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of person	1 1 2 25/08/2016 s or households permi	Duration of licence:	
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of person  Households 5	1 1 2 2 25/08/2016 s or households permi	Duration of licence:	
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of person  Households 5	1 1 2 2 25/08/2016 s or households permi	Duration of licence: tted to occupy HMO under conditions	
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of person  Households 5  Information referred to a	1 1 2 2 25/08/2016 s or households permi	Duration of licence: tted to occupy HMO under conditions	



## Licence No.

#### 2016/02811/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

34 Campbell Road Brighton BN1 4QD

Ward

Preston Park

			vvai d	CSIOTT AIR
Name & Address of Lice	nce Holder			
Mrs & Mr Linda & Steve Harr		Grosvenor Prop	perties Tudor Grange 13 The Up	oper Drive Hove
DVI3 CCD				
Name & Address of Pers	on Managing			
,				
Property Description				
Short description of license	∍d HMO (No of s	storeys, etc)		
Property Type = SHARED Ho	OUSE, No of Uni	its = 1, Occupan	cy = 6, No of Storeys = 3	
Number of Rooms	Total N	lumber of Room	ns 7	
a) Sleeping 6	1014111	b) Living Ro		
a) Siceping		b) Living No	OIII3	
Number of Self Contained I	Flate:	0	Number of Non Self Cont. F	Flats: 1
Number of Self Contained i	iats.		Number of Non Sen Cont. I	iats.
Shared Amenities	Number	Description		
a) Kitchen	2	•		
b) Bathrooms/Showers	2			
c) W.C.s	2			
Licence Details				
Commencement date:	31/08/	2016	<b>Duration of licence:</b>	07/06/2021
Maximum number of perso	ns or househol	ds permitted to	occupy HMO under condition	ns of licence:
	Г	-	.,	
Households 6	Persons	6		
Information referred to a	residential pr	roperty tribun	al or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of I		andatan, aanda	HMO Eurniture Mandatory con	ada HMO Cas



## Licence No.

#### 2016/02819/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

14 Washington Street Brighton BN2 9SR

Ward

Hanover And Elm Grove

Name & Address of Licence Holder	
Mrs Lynne Stewart, Flat 2 44 Grand Crescent Brighton East Sussex BN2 7GL	
Name & Address of Person Managing	
Trevor Stewart, Flat 2 44 Grand Crescent Rottingdean Brighton BN2 7GL	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 5, Occupancy = 5, No of Storey	s = 3
Number of Decree 7	
Number of Rooms Total Number of Rooms 7	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non S	Self Cont. Flats: 1
Shared Amenities Number Description	
a) Kitchen 1	
b) Bathrooms/Showers 1	
c) W.C.s	
Licence Details	
Commencement date: 25/08/2016 Duration of lice	ence: 30/05/2021
Maximum number of persons or households permitted to occupy HMO unde	er conditions of licence:
Households 5 Persons 5	
Information referred to a residential property tribunal or Lands Tribu	nal:
None	
Decision of Tribunal Reference	ce number
Summary of conditions of licence HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Ma	ndatory conds, HMO - Gas



## Licence No.

#### 2016/02823/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

5 Park Crescent Road Brighton BN2 3HT

Ward

St. Peter's And North Laine

Name & Address of Licence	e Holder	
Mrs Lynne Stewart, Flat 2 44 Gr		
Name & Address of Person	Managing	
Trevor Steward, Flat 2 44 Grand	d Crescent Brighton BN2 7GL	
Property Description		
Short description of licensed I	HMO (No of storeys, etc)	
Property Type = SHARED HOUS	SE, No of Units = 5, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping	b) Living Rooms	
a) clooping	b) Living roome	
Number of Self Contained Flat	s: 0 Number of Non Self Cont. Flats	:: 1
Trainibor or oon contained ride	o. Trainist of Non Son Sona Flats	, ,
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
_		
Commencement date:	25/08/2016 Duration of licence:	30/05/2021
Maximum number of persons	or households permitted to occupy HMO under conditions o	f licence:
Households 5 F	Persons 5	
Information referred to a re-	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lice	nco	



## Licence No.

#### 2016/02897/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

5 Kingsley Road	
Brighton	
BN1 5NH	

Ward

Withdean

Name & Address of Licen	ce Holder		
Mr David Symons, 110A St Ja	mes's Street Brighton Eas	st Sussex BN2 1TH	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	d HMO (No of storeys, et	tc)	
Property Type = SHARED HO	USE, No of Units = 7, Occ	cupancy = 7, No of Storeys = 4	
Number of Rooms	Total Number of	Rooms 9	
a) Sleeping	b) Liviı	ng Rooms	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities	Number Descri	iption	
a) Kitchen	1		
b) Bathrooms/Showers	4		
c) W.C.s	4		
Licence Details			
Commencement date:	14/10/2016	Duration of licence:	25/05/2021
Maximum number of person	e or housaholds normitt	ted to occupy HMO under conditions	of licence:
maximum number of person	s or nousenolus permiti	ted to occupy rimo under conditions	of ficerice.
Households 7	Persons 7		
Information referred to a	residential property tr	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie	cence		



## Licence No.

#### 2016/02915/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

98A St James's Street Brighton BN2 1TP

Ward

Queen's Park

Name & Address of Licence Holder	
Mr Mohammed Herandi, 46 Lansdowne Place Hove East Sussex BN3 1HH	
Name & Address of Person Managing	
Spark & Sons, 45 Western Road Hove BN3 1JD	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 7, No of Storeys = 3	
Number of Decree Total Number of Decree 0	
Number of Rooms Total Number of Rooms 8	
a) Sleeping b) Living Rooms	
	_
Number of Self Contained Flats: 0 Number of Non Self Cont. Flat	s: 0
Shared Amenities Number Description	
a) Kitchen b) Bathrooms/Showers	
c) W.C.s	
Licence Details	
Commencement date: 14/03/2017 Duration of licence:	31/05/2021
Maximum number of persons or households permitted to occupy HMO under conditions	of licence:
U I	
Households 7 Persons 7	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	

Summary of conditions of licence

Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/ Repairs, Sructural Fire Works, Structural Fire Works



## Licence No.

#### 2016/02916/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

35 Livingstone Road Hove BN3 3WP

Ward

Goldsmid

Name & Address of Licence Holder	
Mr David Goffin, 64 Queens Road Brighton East Sussex BN1 3XD	
Name & Address of Person Managing	
Home Leasing Ltd, 64 Queens Road Brighton BN1 3XD	
Property Description	
Short description of licensed HMO (No of storeys, etc)	10.
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of	of Storeys = 3
Number of Rooms Total Number of Rooms 6	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number	of Non Self Cont. Flats: 0
Shared Amenities Number Description	
a) Kitchen 1	
b) Bathrooms/Showers 1 2	
Z Z	
Licence Details	
Commencement date: 23/09/2016 Duration	ion of licence: 25/05/2021
Durant	23/03/2021
Maximum number of persons or households permitted to occupy HM	MO under conditions of licence:
Households 5 Persons 5	
Information referred to a residential property tribunal or Land	ds Tribunal:
None	
Decision of Tribunal F	Reference number
Summary of conditions of licence Fire alarms, HMO - Flec Mandatory conds, HMO - Fire Mandatory conds	s HMO - Furniture Mandatory conds



## Licence No.

#### 2016/02921/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

60 Hollingdean Terrace Brighton BN1 7HA

Ward

Hollingdean And Stanmer

Name & Address of Licence Holder	
Mr David Christopher Ashley Stones, Inverlochan Benderloch Oban Argyll PA37 1SA	
Name & Address of Person Managing	
M Harrington, T/a Harrington Lettings 109 Western Road Hove BN3 1FA	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 7, No of Storeys = 3	
Tropolly Type of while Priodoc, the or office Type of other oye	
Number of Rooms Total Number of Rooms 9	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont.	Flats: 0
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers	
c) W.C.s	
Licence Details	
00/00/0047	05/07/0004
Commencement date: 20/02/2017 Duration of licence:	25/07/2021
Maximum number of persons or households permitted to occupy HMO under condition	ons of licence:
Households 7 Persons 7	
Information referred to a regidential property tribunal or Landa Tribunal	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference numbe	T



## Licence No.

#### 2016/02924/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

8 Clyde Road Brighton BN1 4NP

Ward

St. Peter's And North Laine

Name & Address of Licen	ice Holder		
Mr Roger Kay, 3 Elms Lea Av	enue Brighton BN1 8GU	I	
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys,	etc)	
Property Type = SHARED HO	USE, No of Units = 1, O	occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of	of Rooms 6	
a) Sleeping	b) Li	ving Rooms	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number Desc	cription	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	2		
Licence Details			
Licence Details			
Commencement date:	15/12/2016	Duration of licence:	30/05/2021
Maximum number of person	s or households perm	itted to occupy HMO under conditions of	icence:
Households 5	Persons 5		
Information referred to a	residential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
•	, HMO - Fire Doors 10, H	HMO - Fire General 1, HMO - Fire Mandatory	

HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt

Mandatory conds



## Licence No.

#### 2016/02925/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

10 Islingword Place Brighton BN2 9XH

Ward

Hanover And Elm Grove

Name & Address of Licence	e Holder		
Liam O'Connor & Sue Gibson, G	C/o 47 Norfolk Square B	Brighton BN1 2PA	
Name & Address of Persor	Managing		
Homelets (Brighton) Ltd, 47 Nor	folk Square Brighton BN	N1 2PA	
Property Description			
Short description of licensed	HMO (No of storeys, e	etc)	
Property Type = SHARED HOU	SE, No of Units = 1, Oc	ccupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms	
a) Sleeping	D) LIVI	ing Rooms	
Normalism of Oalf Oamtains of Florida	4	Name have at Nam Oak Oamt Flat	
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Flats	s: 0
Shared Amenities	Number Descr	intion	
a) Kitchen	Number Descr	iption	
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	15/03/2017	Duration of licence:	28/06/2021
Maximum number of persons	or households permit	ted to occupy HMO under conditions o	of licence:
			or incernce.
Households 5	Persons 5		
		vibsl.sv.l.sv.ds Tribsl.	
Information referred to a re	isidential property ti	ribunal or Lands Tribunal:	
None Decision of Tribunal		Reference number	
Decision of Tubunal		Reference number	
Summary of conditions of lice	nce		



## Licence No.

#### 2016/02943/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

35 Church Street Brighton BN1 1RL

Ward

St. Peter's And North Laine

Name & Address of Licence Hol		
S D Holdings Ltd, 4A Southview Road	d Southwick BN42 4TU	
Name & Address of Person Man		
Mr Russell Ashby, 46 Rutland Garden	ns Hove East Sussex BN3 5PB	
Property Description		
Short description of licensed HMO	(No of storous atc)	
•	• • •	
Property Type = SHARED HOUSE, N	o of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 5	b) Living Rooms 1	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats	s: 0
Shared Amenities Num	ber Description	
a) Kitchen 1		
b) Bathrooms/Showers 1		
c) W.C.s		
Licence Details		
Licence Details		
Commencement date:	08/09/2016 Duration of licence:	13/06/2021
maximum number of persons or no	useholds permitted to occupy HMO under conditions o	of licence:
Households 5 Perso	ons 5	
Information referred to a resider	ntial property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence		
HMO - Elec Mandatory conds, HMO -	Fire Mandatory conds, HMO - Furniture Mandatory conds,	HMO - Gas



## Licence No.

#### 2016/02947/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

55 Ewart Street Brighton BN2 9UP

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder	
S D Holdings Ltd, 4A Southvie		
Name & Address of Perso	n Managing	
Mr Russell Ashby, 46 Rutland	Gardens Hove East Sussex BN3 5PB	
Property Description		
Short description of license	d HMO (No of storeys, etc)	
•	USE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
. , , ,		
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 5	b) Living Rooms 1	
Number of Solf Contained E	lats: 0 Number of Non Self Cont. Flats:	0
Number of Self Contained F	ats: 0 Number of Non Self Cont. Flats:	0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description  1 1 2	
Licence Details		
Commencement date:	08/09/2016 Duration of licence:	13/06/2021
Maximum number of person	s or households permitted to occupy HMO under conditions of	licence:
Households 5	Persons 5	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lie HMO - Elec Mandatory conds.	cence HMO - Fire Mandatory conds. HMO - Furniture Mandatory conds. H	IMO - Gas



## Licence No.

#### 2016/02949/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

28 Campbell Road Brighton BN1 4QD

Ward

Preston Park

Name & Address of Licer	nce Holder	
	bson, C/o 47 Norfolk Square Brighton BN1 2PA	
Name & Address of Person	on Managing	
lomelets (Brighton) Ltd, 47 N	orfolk Square Brighton BN1 2PA	
Property Description		
Short description of license		
Property Type = SHARED HC	DUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping	b) Living Rooms	
2) 0.00pg	5)	
Number of Self Contained F	lats: 0 Number of Non Self Cont. Flats	s: 1
tumber of con contamour	interest of their control of their contr	, ,
Shared Amenities	Number Description	
a) Kitchen	1	
) Bathrooms/Showers	1	
c) W.C.s	1	
icence Details		
Commencement date:	09/12/2016 Duration of licence:	29/06/2021
Maximum number of persor	ns or households permitted to occupy HMO under conditions o	of licence:
Households 5	Persons 5	
nformation referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of li		HMO Coo



## Licence No.

#### 2016/02950/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

65 Bernard Road Brighton BN2 3ER

Ward

Hanover And Elm Grove

Name & Address of Licen	ice Holder		
Mr Nigel Hughes, C/o 47 Norfo	olk Square Brighton E	BN1 2PA	
Name & Address of Perso	on Managing		
Homelets (Brighton) Ltd, 47 No	orfolk Square Brighto	on BN1 2PA	
Property Description			
Short description of license	d HMO (No of store)	ys, etc)	
Property Type = SHARED HO	USE, No of Units = 1	, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number	er of Rooms 6	
a) Sleeping 6	b	) Living Rooms 1	
Number of Self Contained Fl	lats:	0 Number of Non Self Cont. Flats:	1
Shared Amenities	Number De	escription	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Linear Britaile			
Licence Details			
Commencement date:	06/10/2016	Duration of licence:	01/07/2021
M			
Maximum number of person	s or nousenolas pe	ermitted to occupy HMO under conditions of	licence:
Households 6	Persons 6		
Information referred to a	residential proper	ty tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie	cence		
HMO - Elec Mandatory conds,	, HMO - Fire Blanket,	HMO - Fire Mandatory conds, HMO - Furniture MO - Property Chges Mandatory conds, HMO -	

HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Floors 3, HMO - Repairs Walls 5, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



## Licence No.

#### 2016/02952/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

3 Salisbury Road Hove BN3 3AB

Ward

Brunswick And Adelaide

Name & Address of Licen	ice Holder		
Mrs Jacqueline Floyd, 3 Salish	oury Road Hove East Sus	sex BN3 3AB	
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, e	tc)	
Property Type = BEDSIT, No	of Units = 8, Occupancy =	: 14, No of Storeys = 4	
Number of Rooms	Total Number of	Rooms 8	
a) Sleeping	b) Livi	ng Rooms	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number Descr	iption	
a) Kitchen	4		
b) Bathrooms/Showers	3		
c) W.C.s	3		
Licence Details			
Licence Details			
Commencement date:	26/08/2016	Duration of licence:	21/04/2020
Maximum number of person	s or households permit	ted to occupy HMO under conditions of	licence:
Households 14	Persons 14		
Information referred to a	residential property to	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	, HMO - Fire Mandatory co	onds, HMO - Furniture Mandatory conds, I	



## Licence No.

#### 2016/02955/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 35 St Martins Place Brighton BN2 3LE

Ward

Hanover And Elm Grove

one		
formation referred to a residential	property tribunal or Lands Tribunal:	
ouseholds 6 Persons	6	
aximum number of persons or househ	nolds permitted to occupy HMO under conditions of	licence:
ommencement date: 19/0	Duration of licence:	31/05/2021
icence Details		
) W.C.s 2		
) Bathrooms/Showers 2		
) Kitchen 2		
hared Amenities Number	Description	
umber of Self Contained Flats:	0 Number of Non Self Cont. Flats:	1
) Sleeping 6	b) Living Rooms 1	
umber of Rooms Tota	I Number of Rooms 7	
roperty Type = SHARED HOUSE, No of C	Units = 1, Occupancy = 6, No of Storeys = 3	
hort description of licensed HMO (No constant Type = CHARER HOUSE No of l	• . ,	
roperty Description		
·		
ame & Address of Person Managir	ng	
TAIDEITO GIOVITIO, 60 Haywards Road Ha	ywarus neath west Sussex Rn 10 4Jb	
ame & Address of Licence Holder  Ir Alberto Giovino, 80 Haywards Road Ha	www.crdo Hooth Woot Suppoy DH16 4 ID	

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs



## Licence No.

#### 2016/02964/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

71 Bernard Road Brighton BN2 3ER

Ward

Hanover And Elm Grove

Name & Address of Licence	e Holder	
	ones, Inverlochan Benderloch Oban Argyll PA37 1SA	
Name & Address of Person	Managing	
Mr M Harrington, T/a Harrington	Lettings 109 Western Road Hove BN3 1FA	
Property Description		
Short description of licensed	HMO (No of storeys, etc)	
Property Type = SHARED HOUS	SE, No of Units = 1, Occupancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 9	
a) Sleeping	b) Living Rooms	
a) olooping	b) Living Roome	
Number of Self Contained Flat	ts: 0 Number of Non Self Cont. Flat	:s: 1
rumber of com contained rut	Number of New Control Control Control	1
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Commencement date:	22/02/2017 Duration of licence:	25/06/2021
Maximum number of persons	or households permitted to occupy HMO under conditions	of licence:
Households 7	Persons 7	
i iouseiioius i		
Information referred to a re	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lice	neo	



## Licence No.

#### 2016/02966/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

15 Clyde Road Brighton BN1 4NN

Ward

St. Peter's And North Laine

Name & Address of Licence	Holdor	
Mr Roger Kay, Ground Floor 87	Church Road Hove BN3 2BB	
Name & Address of Person	Managing	
Name & Address of Person	Managing	
,		
Property Description		
Short description of licensed	HMO (No of storeys, etc)	
	SE, No of Units = 1, Occupancy = 5, No of Stor	evs = 3
Troporty Typo OrmateB Troo	52, 110 01 01 110 1, 000 apailoy 0, 110 01 010 1	5,0
Number of Rooms	Total Number of Rooms 7	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flat	s: 0 Number of Nor	n Self Cont. Flats:
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	1	
c) W.C.s	2	
Licence Details		
Licence Details		
Commencement date:	15/12/2016 <b>Duration of I</b>	licence: 01/06/2021
Na		dan andikian af liana.
maximum number of persons	or households permitted to occupy HMO un	der conditions of licence:
Households 5	Persons 5	
Information referred to a re	sidential property tribunal or Lands Tril	bunal:
None		
Decision of Tribunal	Refere	ence number
Summary of conditions of lice	nce	I. IIMO E 27 2



## Licence No.

#### 2016/02974/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

22 Bristol Road Brighton BN2 1AP

Ward

Queen's Park

Name & Address of Lice	nce Holder	
S D Holdings Ltd, 4A Southvi	ew Road Southwick BN42 4TU	
Name & Address of Pers		
Mr Russell Ashby, 46 Rutland	I Gardens Hove East Sussex BN3 5PB	
Property Description		
Short description of license	d HMO (No of storeys, etc)	
Property Type = HMO Envelo	pe - Mixed, No of Units = 9, Occupancy = 9, No of Storeys = 5	
Number of Rooms a) Sleeping	Total Number of Rooms 13 b) Living Rooms	
Number of Self Contained F	Flats: 0 Number of Non Self Cont. Flats:	1
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description  8 2 2	
Licence Details		
Commencement date:	07/03/2017 Duration of licence:	14/06/2021
Maximum number of perso	ns or households permitted to occupy HMO under conditions of I	icence:
Households 9	Persons 9	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of I HMO - Elec Mandatory conds	icence s, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, H	MO - Gas



## Licence No.

#### 2016/02977/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

90 Brading Road Brighton BN2 3PD

Ward

Hanover And Elm Grove

Name & Address of Licence Holder	
Liam O'Connor & Sue Gibson, C/o 47 Norfolk Square Brighton BN1 2P.	A
Name & Address of Person Managing	
Homelets (Brighton) Ltd, 47 Norfolk Square Brighton BN1 2PA	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 5, Occupancy = 5, No	o of Storeys = 3
Number of Rooms Total Number of Rooms 6	
a) Sleeping b) Living Rooms	
, , , , ,	
Number of Self Contained Flats: 0 Number	er of Non Self Cont. Flats: 1
Shared Amenities Number Description	
a) Kitchen 1	
b) Bathrooms/Showers 1	
c) W.C.s 2	
Licence Details	
Electrice Betains	
Commencement date: 17/01/2017 Dura	ation of licence: 30/06/2021
Maximum number of persons or households permitted to occupy	HMO under conditions of licence:
Households 5 Persons 5	
Information referred to a residential property tribunal or Lar	nds Tribunal:
Information referred to a residential property tribunal or Lar	nds Tribunal:
	nds Tribunal:  Reference number



## Licence No.

#### 2016/02981/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

18 Trinity Street Brighton BN2 3HN

Ward

St. Peter's And North Laine

Name & Address of Licen	nce Holder	
Mr Cavan Kane, C/o 47 Norfo	olk Square Brighton BN1 2PA	
Name & Address of Perso	on Managing	
Homelets (Brighton) Ltd, 47 N	Norfolk Square Brighton BN1 2PA	
Property Description		
Short description of license	ed HMO (No of storeys, etc)	
Property Type = SHARED HO	DUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 5	b) Living Rooms 1	
a) Sieeping	b) Living Rooms	
Number of Calf Cantained F	Number of New Colf Cont. Flate.	1
Number of Self Contained F	Flats: 0 Number of Non Self Cont. Flats:	I
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	1	
c) W.C.s	2	
Licence Details		
Commencement date:	16/11/2016 Duration of licence:	29/06/2021
Maximum number of person	ns or households permitted to occupy HMO under conditions of lice	nce:
Households 5	Persons 5	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
	icence datory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory o , HMO - Property Chges Mandatory conds, HMO - Property Maint Manda	

Fire Alarm, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Bathroom 16, HMO - Repairs Drainage 2, HMO - Repairs Roofs/Chimneys 10, HMO - Repairs Windows 6, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Ventilation



## Licence No.

#### 2016/02985/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

24 St Nicholas Road Brighton BN1 3LP

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder	
Mr & Mrs C Pemberton, 108 D		
	-	
Name & Address of Perso	n Managing	
,		
Daniel Daniel Com		
Property Description	LUMO (No of atorous ato)	
Short description of licensed	• • •	
Property Type = SHARED HOU	USE, No of Units = 1, Occupancy = 7, No of Storeys = 4	
Number of Rooms	Total Number of Rooms 8	
a) Sleeping 7	b) Living Rooms 1	
Number of Self Contained Fla	ats: 0 Number of Non Self Cont. F	Flats: 1
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
0	00/04/0047	05/07/0004
Commencement date:	03/01/2017 Duration of licence:	05/07/2021
Maximum number of persons	s or households permitted to occupy HMO under condition	ns of licence:
Households 7	Persons 7	
Information referred to a r	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lic	ence	



#### Licence No.

#### 2016/02999/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

120 Upper Lewes Road Brighton BN2 3FD

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder	
Mr Nigel Hughes, C/o Homelet	s (Brighton) Ltd 47 Norfolk Square Brighton BN1 2PA	
Name & Address of Perso	n Managing	
Homelets (Brighton) Ltd, 47 No	orfolk Square Brighton BN1 2PA	
Duran auto Dananiu tian		
Property Description Short description of licensed	HMO (No of storous atc)	
	USE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Property Type = SHARED HO	JSE, No of Offics = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping	b) Living Rooms	
Number of Self Contained Fl	ats: 0 Number of Non Self Cont. Flats:	0
Shared Amenities	Number Description	
<ul><li>a) Kitchen</li><li>b) Bathrooms/Showers</li></ul>	2 2	
c) W.C.s	2	
Licence Details		
Commencement date:	24/08/2017 Duration of licence:	01/07/2021
Maximum number of persons	s or households permitted to occupy HMO under conditions of lic	ence:
maximum number of persons	- Industrious permitted to occupy rime under conditions of he	ciicc.
Households 6	Persons 6	
Information referred to a r	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lic	ence HMO - Fire Mandatory conds HMO - Furniture Mandatory conds HM0	O - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Heating 5, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management Repairs, Management/Repairs, Other Fire Works



#### Licence No.

#### 2016/03001/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

35 Grand Parade Brighton BN2 9QA

Ward

Queen's Park

Name & Address of Licence Holder	
Mr Alex Ross, Mulberry House Monkmead Lane West Chiltington Pulborough RH20 2	NH
Name & Address of Person Managing	
,	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = HMO Envelope - Mixed, No of Units = 6, Occupancy = 6, No of Storey	/s = 5
Number of Rooms Total Number of Rooms 3	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self C	Cont. Flats: 1
Shared Amenities Number Description	
a) Kitchen 0	
b) Bathrooms/Showers 1	
c) W.C.s	
Licence Details	
	-
Commencement date: 26/01/2017 Duration of licence	01/02/2021
Maximum number of persons or households permitted to occupy HMO under co	nditions of licence:
	nations of neclice.
Households 6 Persons 6	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference nu	ımber
Summary of conditions of licence	
HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory	ory conds, HMO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Heating 5, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Structural Fire Works



#### Licence No.

#### 2016/03003/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

60 Viaduct Road Brighton BN1 4ND

Ward

St. Peter's And North Laine

Name & Address of Licence Holder	
Philgro Properties Ltd, Suite 123 91 Western Road Brighton BN1 2NW	
Thingro Froperties Eta, Suite 125 91 Western Road Brighton Bight 2100	
Name & Address of Person Managing	
Ms Sarah Nash, Beckfield Arabians Midville Lane Stickney PE22 8DN	
ivis Sarari Nasti, Deckilelu Arabiatis iviluville Latte Stickiley F L22 obiv	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = Not Assigned, No of Units = 5, Occupancy = 5, No of Storeys = 3	
Number of Rooms Total Number of Rooms 5	
a) Sleeping b) Living Rooms	
2, 2g	
Number of Self Contained Eleter 0 Number of New Self Cont	Flata
Number of Self Contained Flats: 0 Number of Non Self Cont.	Flats: 0
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s	
Licence Details	
Commencement date: 07/02/2017 Duration of licence:	08/06/2021
Maximum number of persons or households permitted to occupy HMO under condition	ons of licence:
Households 5 Persons 5	
Information referred to a residential property tribunal or Landa Tribunal	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	<u> </u>
Summary of conditions of licence	

Guttering to Rear Elevation, Electricity supply, Fire Doors, Guterring to Rear Addition, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - General 1, HMO - General 2, HMO - General 6, HMO - General Electrical 1, HMO - General Electrical 2, HMO - Licensing Cleaning, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Kitchen 5, HMO - Repairs Ventilation 3, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Hall stairs and landings, Heating, Kitchen Flooring, Kitchen door, Living Dining room, Sockets, Wash hand basins





#### Licence No.

#### 2016/03005/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

2 Grafton Street Brighton BN2 1AQ

Ward

Queen's Park

Name & Address of Licence	Holder		
		n RN1 2NW	
Philgro Properties Ltd, Suite 123	er western Road Brighto	II DIN I ZINVV	
Name & Address of Person	Managing		
Ms Sarah Nash, Beckfield Arabia		Lincolnehiro DE22 SDN	
IVIS Salali Nasii, Deckilelu Alabia	ns Midneid Lane Stickney	CHICOHSTILE PEZZ ODIN	
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = Not Assigned, N	-	y = 9. No of Storevs = 5	
Troporty Typo Tvot7 Goiginou, Tv	o or ormo o, cocapano,	, o, no or otoroyo	
Number of Rooms	Total Number of Ro	oms 10	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Flats	»: 0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities	Number Descripti	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Linna Batalla			
Licence Details			
Commencement date:	07/02/2017	Duration of licence:	08/06/2021
Maximum number of persons of	r households permitted	to occupy HMO under conditions	of licence:
Households 9 P	ersons 9		
Information referred to a res	idential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

#### Summary of conditions of licence

Bathroom, Bedsit 2, CP lights, Cills, Cleaning, Emergency lighting, Fire Locks, Fire doors, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - General 1, HMO - General 4, HMO - General 6, HMO - General Electrical 1, HMO - General Electrical 2, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Hall, Hall carpets, Heating, IS, Kitchen, Living dining room, SD, Ventlation, elec and gas, extractor, kitchen, kitchen sockets, window





#### Licence No.

#### 2016/03011/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

2 Tichborne Street Brighton BN1 1UR

Ward

St. Peter's And North Laine

Name & Address of Licence	e Holder		
Philgro Properties Ltd, Suite 123	91 Western Road Brig	hton BN1 2NW	
Name & Address of Person			
Ms Sarah Nash, Beckfield Arabia	ins Midville Lane Stic	kney PE22 8DN	
Dronauty Description			
Property Description  Short description of licensed I	HMO (No of storous, c	ate)	
Property Type = Not Assigned, N	-	·	
Property Type = Not Assigned, N	lo of Office = 6, Occupa	aricy - 6, No or Storeys - 3	
Number of Rooms	Total Number of	Rooms 7	
a) Sleeping	b) Livi	ing Rooms	
Number of Self Contained Flat	s: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s	Number Descr	ription	
Licence Details			
_		]	
Commencement date:	02/02/2017	Duration of licence:	08/06/2021
Maximum number of persons	or households permit	tted to occupy HMO under conditions	of licence:
Households 6 F	Persons 6		
Information referred to a re	sidential property t	ribunal or Lands Tribunal:	
None		D. f	
Decision of Tribunal		Reference number	
Summary of conditions of lice	nce		

Bathroom ventilation, Bathroom window, CO detector, Cleaning, Extractor, Fire doors, Fire locks, Freezer, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - General 1, HMO - General 6, HMO - General 7, HMO - General Electrical 1, HMO - General Electrical 2, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Sockets, WHBs, elec and gas, mould





#### Licence No.

#### 2016/03014/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

10 Hollingdean Road Brighton BN2 4AA

Ward

Hollingdean And Stanmer

Name & Address of Licence Holder				
Philgro Properties Ltd, Suite 123 91 Western Road Brighton BN1 2NW				
Name & Address of Person Managing				
Ms Sarah Nash, Beckfield Arabians Midville Lane Stickney PE22 8DN				
Property Description				
Short description of licensed HMO (No of storeys, etc)				
Property Type = Not Assigned, No of Units = 5, Occupancy = 5, No of Storeys = 3				
Number of Rooms 5 a) Sleeping b) Living Rooms				
Number of Self Contained Flats: 0 Number of Non Self Cont	t. Flats:			
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s				
Licence Details				
Commencement date: 02/02/2017 Duration of licence:	08/06/2021			
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
Households 5 Persons 5				
Information referred to a residential property tribunal or Lands Tribunal:				
None				
Decision of Tribunal Reference numb	or			

#### Summary of conditions of licence

Cleaning, Elec and gas, Fire doors, Fire locks, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - General 1, HMO - General 6, HMO - General 7, HMO - General Electrical 1, HMO - General Electrical 2, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Heating, IS, Insulation, Kitchen sockets, Kitchen ventilation, Living dining room, Stairs, WHBs





#### Licence No.

#### 2016/03016/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

42 Southover Street Brighton BN2 9UE

Ward

Hanover And Elm Grove

Name & Address of Licer			
Mr John Harris, Challcote Brig	hton Road Shermanbui	ry Horsham RH13 8HD	
Name & Address of Perso	n Managing		
1			
Dranauty Dagarintian			
Property Description	d UMO (No of otorove	ata)	
Short description of license		•	
Property Type = SHARED HC	USE, No of Units = 1, (	Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number	of Rooms 8	
a) Sleeping 6	b) L	iving Rooms 1	
, , , , , , , , , , , , , , , , , , , ,	,		
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ts: 1
Tumbor or our contamour	<b></b>		
Shared Amenities	Number Des	cription	
a) Kitchen	2	•	
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Licence Details			
Commencement date:	30/09/2016	Duration of licence:	26/06/2021
Maximum number of person	s or households perm	nitted to occupy HMO under conditions	of licence:
Households 6	Persons 6		
Information referred to a	residential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	cence		
		conds HMO - Furniture Mandatory conds	HMO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03019/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

2 Roundhill Crescent Brighton BN2 3FR

Ward

St. Peter's And North Laine

Name & Address of Licer			
Mr John Harris, Challcote Brig	hton Road Shermanbur	ry Horsham RH13 8HD	
Name & Address of Perso	n Managing		
1			
Dranauty Dagarintian			
Property Description	dumo (No of eterrore	-4-)	
Short description of license		•	
Property Type = SHARED HC	USE, No of Units = 1, C	Occupancy = 6, No of Storeys = 4	
Number of Rooms	Total Number of	of Rooms 8	
a) Sleeping 6	b) I	iving Rooms 1	
a) 0.00pmg	<b>2</b> ) =		
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ts: 1
Number of Sen Contained F	ats.	Number of Non Sen Cont. Fla	1
Shared Amenities	Number Des	cription	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	30/09/2016	Duration of licence:	26/06/2021
Maximum number of person	s or households perm	nitted to occupy HMO under conditions	of licence:
Households 6	Persons 6		
Information referred to a	residential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	cence		
		conds HMO - Furniture Mandatory cond	s HMO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Ventilation 3, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03026/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

19 White Street Brighton BN2 0JH

Ward

Queen's Park

Summary of conditions of li	cence . HMO - Fire Mandatory conds. HMO - Furniture Mandatory conds. H	
Decision of Tribunal	Reference number	
None		
Information referred to a	residential property tribunal or Lands Tribunal:	
Households 6	Persons 6	
Maximum number of persor	ns or households permitted to occupy HMO under conditions of	licence:
Commencement date:	30/09/2016 Duration of licence:	26/06/2021
Licence Details		
C) VV.O.3		
b) Bathrooms/Showers c) W.C.s	2 2	
a) Kitchen	2	
Shared Amenities	Number Description	
Number of Self Contained F	lats: 0 Number of Non Self Cont. Flats:	1
a) Sleeping 6	b) Living Rooms 1	
Number of Rooms	Total Number of Rooms 6	
. , , .		
•	DUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Short description of license	d HMO (No of storeys, etc)	
Property Description		
,		
Name & Address of Person	on Managing	
Nama & Address of Bara	on Managing	
Mr John Harris, Chalcote Brig	hton Road RH13 8HD	
Name & Address of Licer		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03051/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 46 Albion Hill Brighton BN2 9NW

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder		
Mr Nigel Hughes, C/o Homele	ts (Brighton) Ltd 47 Norfolk	k Square Brighton BN1 2PA	
Name & Address of Perso	n Managing		
Homelets (Brighton) Ltd, 47 No	orfolk Square Brighton BN	1 2PA	
<b>.</b>			
Property Description		,	
Short description of license	d HMO (No of storeys, et	с)	
Property Type = SHARED HO	USE, No of Units = 1, Occ	supancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of F	Rooms 9	
a) Sleeping 7		ng Rooms 1	
a) Sieeping	b) Livin	ig rooms	
Number of Calf Cantained El	lete:	Number of New Colf Court Flori	4
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Flat	ts: 1
Sharad Amanitias	Number Deseri	ntion	
a) Kitchen	Number Descrip	ption	
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	12/10/2016	Duration of licence:	10/07/2021
Commencement date:	12/10/2016	Duration of licence:	10/07/2021
Maximum number of person	s or households permitte	ed to occupy HMO under conditions	of licence:
Households 7	Persons 7		
nousenolus	reisons		
Information referred to a	residential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	conco		
	HMO - Fire Blanket, HMC	- Fire Mandatory conds, HMO - Furnit	
	•	Licensing Kitchen 6, HMO - Property C	•

Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03053/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 35 Riley Road Brighton BN2 4AG

Ward

Moulsecoomb And Bevendean

None Decision of Tribunal	Reference number	
	al property tribunal or Lands Tribunal:	
Households 5 Persons	-	
	seholds permitted to occupy HMO under conditions of I	icence:
	0/09/2016 Duration of licence:	26/06/2021
Licence Details		
c) W.C.s		
b) Bathrooms/Showers 2		
Shared Amenities Numbe a) Kitchen 1	r Description	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	1
a) Sleeping 5	b) Living Rooms 1	
	otal Number of Rooms 6	
Troperty Type - SHANLD HOUSE, NO	of Office - 1, Occupancy - 3, No of Storeys - 3	
•	of Units = 1, Occupancy = 5, No of Storeys = 3	
Property Description  Short description of licensed HMO (Notes)	o of storays atc)	
Proporty Doscription		
,		
Name & Address of Person Manag	ging	
Mr John Harris, Challcote Brighton Road	Shermanbury Horsham RH13 8HD	
	<del>7</del> 1	
Name & Address of Licence Holde	<u></u>	

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03058/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

58 Totland Road Brighton BN2 3EN

Ward

Hanover And Elm Grove

Name & Address of Licence	e Holder		
Mr Stephen Johnson, Cherry Lo	odge 21 Hutton Hill Hutt	ton Weston-Super-Mare BS24 9TU	
Name & Address of Person	n Managing		
Mrs Sandra Johnson, Cherry Lo	odge 21 Hutton Hill Hutt	ton Weston-Super-Mare BS24 9TU	
Property Description			
Short description of licensed	HMO (No of storeys,	etc)	
Property Type = SHARED HOU	SE, No of Units = 7, Oc	ccupancy = 7, No of Storeys = 4	
Number of Rooms	Total Number of	f Rooms 9	
a) Sleeping	b) Liv	ring Rooms	
Nl		N	
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Flat	s: 1
Shared Amenities	Number Desc	ription	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	13/09/2016	Duration of licence:	02/07/2021
Commencement date.	10/03/2010	Duration of necinee.	02/01/2021
Maximum number of persons	or households permi	tted to occupy HMO under conditions	of licence:
Households 7	Persons 7		
Information referred to a re	esidential property t	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice	ence	and IIMO Francis an Mandatan can de	LIMO O

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2016/03074/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

93 Roundhill Crescent Brighton BN2 3GP

Ward

St. Peter's And North Laine

Name & Address of Licenc	e Holder		
Mr David Todd, Highwood Brig	htling Robertsbridge F	East Sussex TN32 5HP	
Name & Address of Persor	n Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys	, etc)	
-	•	Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number		
a) Sleeping 5	b) L	iving Rooms 1	
Number of Self Contained Fla	its: 0	Number of Non Self Cont. Flat	ts: 1
Number of Self Contained Fla	is:	Number of Non Self Cont. Flat	IS:
Shared Amenities	Number Des	scription	
a) Kitchen	1	•	
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	25/07/2016	Duration of licence:	20/06/2021
Maximum number of persons	or households pern	nitted to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Information referred to a re	esidential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice		voonda HMO Euroituro Mandatany conda	LIMO Coo

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Bathroom 17, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs



#### Licence No.

#### 2016/03078/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

119 Upper Lewes Road Brighton BN2 3FD

Ward

St. Peter's And North Laine

N. 0 A I I CI :			
Name & Address of Licenc			
Mr Nigel Hughes, C/o Homelets	(Brighton) Ltd 47 Norfolk Squa	are Brighton BN1 2PA	
Nome 9 Address of Dones	Managina		
Name & Address of Persor			
Homelets (Brighton) Ltd, 47 Nor	folk Square Brighton BN1 2PA		
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
-		y = 6. No of Storoyo = 2	
Property Type = SHARED HOU	SE, No of Units = 1, Occupant	y = 6, No of Storeys = 3	
Number of Rooms	Total Number of Room	s 7	
a) Sleeping 6	b) Living Roo	oms 1	
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Flats	s: 0
Shared Amenities	Number Description		
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	27/10/2016	Duration of licence:	01/07/2021
		L	
Maximum number of persons	or households permitted to	occupy HMO under conditions of	of licence:
Households 6	Persons 6		
Information referred to a re	sidential property tribuna	l or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice	ence		

Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03082/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 32 Grand Parade Brighton BN2 9QA

Ward

Queen's Park

Name & Address of Licence	Holder		
Mr Alex Ross, Mulberry House M	lonkmead Lane West	Chiltington Pulborough RH20 2NH	
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed F	IMO (No of storevs. e	etc)	
•	-	, Occupancy = 9, No of Storeys = 5	
Troporty Type – Tilvio Envelope	wince, ivo or oring –	, Codupancy – 3, No or Cloreys – 3	
Number of Rooms	Total Number of	Rooms 8	
a) Sleeping	b) Liv	ing Rooms	
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Flat	s: 0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Descr	ription	
Licence Details			
Commencement date:	26/01/2017	Duration of licence:	08/03/2021
Maximum number of persons of	or households permit	tted to occupy HMO under conditions	of licence:
Households 8 F	Persons 9		
Information referred to a res	sidential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lices	nce		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Structural Fire Works



#### Licence No.

#### 2016/03086/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 35 Clyde Road Brighton BN1 4NN

Ward

St. Peter's And North Laine

Name & Address of Licer	ice Holder			
Mr Phillip Milward, Sunny Acre	es Clappers Lane Fulkin	g BN5 9NJ		
Name & Address of Person	on Managing			
,				
Property Description				
Short description of license	d HMO (No of storeys,	etc)		
-		Occupancy = 5, No of Storeys = 3		
7 31	,			
Number of Rooms	Total Number of	of Rooms 5		
a) Sleeping	b) Li	ving Rooms		
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ts: 1	
<b>.</b>				
Shared Amenities		cription		
<ul><li>a) Kitchen</li><li>b) Bathrooms/Showers</li></ul>	1			
c) W.C.s	2			
Licence Details				
Commencement date:	08/11/2016	Duration of licence:	22/05/2021	
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
Households 5	Persons 5			
	residential property	tribunal or Lands Tribunal:		
None		<b>D.</b> 6		
Decision of Tribunal		Reference number		
Summary of conditions of li	oonoo			

Fire blankets, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - General 1, HMO - General 2, HMO - General 6, HMO - General 7, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Self closers, WHB, meter cupboard



#### Licence No.

#### 2016/03087/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 50 Argyle Road Brighton BN1 4QB

Ward

Preston Park

Name & Address of Licence Holder
Mr John Kenneth Love, 170 Chislehurst Road Petts Wood Orpington Kent BR6 0DT
Name & Address of Person Managing
,
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 4
Number of Rooms Total Number of Rooms 8
a) Sleeping b) Living Rooms
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
Shared Amenities Number Description
Shared Amenities Number Description
a) Kitchen 1
a) Kitchen 1 b) Bathrooms/Showers 2
a) Kitchen 1
a) Kitchen 1 b) Bathrooms/Showers 2
a) Kitchen b) Bathrooms/Showers c) W.C.s 2 Licence Details
a) Kitchen 1 b) Bathrooms/Showers 2 c) W.C.s 2
a) Kitchen b) Bathrooms/Showers c) W.C.s 2 Licence Details
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  08/08/2016  Duration of licence:  26/04/2021  Maximum number of persons or households permitted to occupy HMO under conditions of licence:
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  08/08/2016  Duration of licence: 26/04/2021
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  08/08/2016  Duration of licence: 26/04/2021  Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households 6  Persons 6
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  08/08/2016  Duration of licence:  26/04/2021  Maximum number of persons or households permitted to occupy HMO under conditions of licence:
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  08/08/2016  Duration of licence: 26/04/2021  Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households  6  Persons 6  Information referred to a residential property tribunal or Lands Tribunal:

Fire alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03104/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

33 Coombe Road Brighton BN2 4EB

Ward

Moulsecoomb And Bevendean

Name & Address of Licen		
Mr Michael Gross, Sheridans F	Roxeth Hill Harrow On The Hill HA2 0JJ	
Name & Address of Perso	on Managing	
MTM Services Ltd, 108A Lewe	es Road Brighton BN2 4AE	
Property Description		
Short description of licensed	d HMO (No of storeys, etc)	
Property Type = SHARED HO	OUSE, No of Units = 9, Occupancy = 9, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 10	
a) Sleeping	b) Living Rooms	
Number of Self Contained FI	lats: 0 Number of Non Self Cont. Flats:	1
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers c) W.C.s	3 3	
c) vv.c.s		
Licence Details		
Commencement date:	06/09/2016 Duration of licence:	08/06/2021
Maximum number of nersen	as an hausahalda marmittad ta asaumu LIMO umdar asaditians of lisa	
waximum number of person	ns or households permitted to occupy HMO under conditions of lice	nce.
Households 9	Persons 9	
Information referred to a I	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	

Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2016/03105/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 23A Atlingworth Street Brighton BN2 1PL

Ward

Queen's Park

Name & Address of Licen	nce Holder	
	ens Court Lane Hadlow Kent TN11 0DU	
Name & Address of Perso	on Managing	
,		
Property Description		
Short description of license	· · · · · · · · · · · · · · · · · · ·	
Property Type = SHARED HO	USE, No of Units = 1, Occupancy = 8, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 8	
a) Sleeping	b) Living Rooms	
Number of Self Contained F	lats: 0 Number of Non Self Con	t. Flats: 1
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers c) W.C.s	3 4	
o,o.o		
Licence Details		
Commonoomont data:	03/01/2017 Duration of licence:	12/06/2021
Commencement date:	03/01/2017 Duration of licence:	12/06/2021
Maximum number of person	s or households permitted to occupy HMO under condi	tions of licence:
Households 8	Persons 8	
<u> </u>		
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference numb	per
Summary of conditions of lie		

HMO - Elec Mandatory conds, HMO - Fire Doors 8, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03106/HMO/PS

#### **REGISTER ENTRY FOR** (Address of licensed HMO)

22A 22 Atlingworth Street Brighton BN2 1PL

Ward

Queen's Park

Name & Address of Licen	ice Holder			
Mr Stewart Vine, Castle Garde	ens Court Lane Hadlow K	ent TN11 0DU		
Name & Address of Perso	on Managing			
,				
Daniel Description				
Property Description	d LIMO (No. of otomore et			
Short description of licensed	•	•		
Property Type = SHARED HO	USE, No of Units = 1, Occ	cupancy = 7, No of Storeys = 3		
Number of Rooms	Total Number of	Rooms 9		
a) Sleeping	b) Livir	ng Rooms		
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Fla	its: 1	
Shared Amenities	Number Descri	ption		
a) Kitchen	1			
b) Bathrooms/Showers	3			
c) W.C.s	3			
Licence Details				
Commencement date:	25/10/2016	Duration of licence:	12/06/2021	
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
	-			
Households 7	Persons 7			
	residential property tr	ibunal or Lands Tribunal:		
Information referred to a				
Information referred to a Rone	rootacitial property ti	ibanar or Earlas Tribanan		
	rootachdal property ti	Reference number		

**Summary of conditions of licence**Gas, HMO - Fire Doors 8, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, elec cert, timescale



#### Licence No.

#### 2016/03114/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

66 Warleigh Road Brighton BN1 4NS

Ward

St. Peter's And North Laine

Name & Address of Licence Holder	
St Chads Developments Ltd, 'Robins' Keymer Road Burgess Hill West Sussex RH15 0BA	
Name & Address of Person Managing	
Mr Nigel Gherardi, 'Robins' Keymer Road Burgess Hill West Sussex RH15 0BA	
Book and a Book and a Comp	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms Total Number of Rooms 9	
a) Sleeping 5 b) Living Rooms 1	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	: 1
Shared Amenities Number Description	
a) Kitchen 1	
b) Bathrooms/Showers 1 c) W.C.s 2	
Z Z	
Licence Details	
Commencement date: 12/10/2016 Duration of licence:	27/06/2021
Commencement date: 12/10/2016 Duration of licence:	27/00/2021
Maximum number of persons or households permitted to occupy HMO under conditions o	f licence:
Households 5 Persons 5	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of licence	HMO Coo

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03115/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

29 White Street Brighton BN2 0JH

Ward

Queen's Park

Name & Address of Lice	nce Holder		
Mr John Harris, Challcote Br	ighton Road Shermank	oury RH13 8HD	
Name & Address of Pers	on Managing		
,			
Property Description			
Short description of license	ed HMO (No of storey	s, etc)	
Property Type = SHARED He	OUSE, No of Units = 1,	Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number		
a) Sleeping 6	b)	Living Rooms 1	
Number of Self Contained	Flats:	Number of Non Self Cont. F	lats: 1
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number De 2 2 2 2	escription	
Licence Details			
Commencement date:	30/09/2016	Duration of licence:	26/06/2021
Maximum number of perso	ns or households per	rmitted to occupy HMO under condition	ns of licence:
Households 6	Persons 6		
Information referred to a	residential propert	ty tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of HMO - Elec Mandatory conditions		HMO - Fire Mandatory conds, HMO - Fur	niture

HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03131/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

12 Seville Street Brighton BN2 3AR

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder		
Ms Sanjana Kaura, Brookhollo	w 8 Holland Road Ho	ove East Sussex BN3 1JJ	
Name & Address of Perso	n Managing		
S J Lettings Ltd, 52 Lewes Roa	ad Brighton BN2 3HW		
Property Description			
Short description of licensed	HMO (No of storeys	s, etc)	
Property Type = SHARED HOL	JSE, No of Units = 1,	Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number	of Rooms 7	
a) Sleeping 6	b) '	Living Rooms 1	
, . •	,	•	
Number of Self Contained Fla	ats: 0	Number of Non Self Con	t. Flats:
Shared Amenities	Number Des	scription	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	02/09/2016	Duration of licence:	27/06/2021
Maximum number of persons	s or households per	mitted to occupy HMO under condit	tions of licence:
	<b>B</b>		
Households 6	Persons 6		
Information referred to a r	esidential propert	y tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference numb	er
Summary of conditions of lic HMO - Elec Mandatory conds.		y conds, HMO - Furniture Mandatory	conds, HMO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03132/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

18 Inverness Road Brighton BN2 3JB

Ward

St. Peter's And North Laine

Name & Address of Licer	ce Holder		
Ms Sanjana Kaura, Brookhollo	w 8 Holland Road Hove E	East Sussex BN3 1JJ	
Name & Address of Perso	on Managing		
S J Lettings Ltd, 52 Lewes Ro	ad Brighton BN2 3HW		
Property Description			
Short description of license	d HMO (No of storeys, et	c)	
Property Type = SHARED HC	USE, No of Units = 1, Occ	upancy = 6, No of Storeys = 4	
Number of Rooms a) Sleeping  6	<b>Total Number of F</b> b) Livin	Rooms 7 g Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fl	ats: 1
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Descrip	otion	
Licence Details			
Commencement date:	12/09/2016	Duration of licence:	27/06/2021
Maximum number of person	s or households permitte	ed to occupy HMO under condition	s of licence:
Households 6	Persons 6		
Information referred to a	residential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li HMO - Elec Mandatory conds		nds, HMO - Furniture Mandatory cond	ds, HMO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03136/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

11 Fourth Avenue	
Hove	
BN3 2PL	

Ward

Central Hove

Nama O Addusas of Liannas Haldan	
Name & Address of Licence Holder	
The Hammerton Settlement, Prestbury Quarry Road Oxted Surrey RH8 9HF	
Name & Address of Darson Managing	
Name & Address of Person Managing	
,	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = BEDSIT, No of Units = 9, Occupancy = 9, No of Storeys = 4	
Number of Rooms Total Number of Rooms 9	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flat	s: 0
	-
Shared Amenities Number Description	
a) Kitchen 1	
b) Bathrooms/Showers 1	
c) W.C.s	
Licence Details	
Licence Details	
Commencement date: 03/11/2016 Duration of licence:	14/06/2021
Maximum number of persons or households permitted to occupy HMO under conditions	of licence:
Households 9 Persons 9	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of licence	
HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 2, HMO - Fire Mandatory conds, HMO	O - Furniture

HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 2, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Kitchen Floor



#### Licence No.

#### 2016/03137/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 57 Upper Lewes Road Brighton BN2 3FG

Ward

St. Peter's And North Laine

Mr Roger Whittington, 6 Brang Name & Address of Perso	-		
Name & Address of Person	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys,	etc)	
Property Type = SHARED HC	OUSE, No of Units = 1, Oo	ccupancy = 6, No of Storeys = 3	
Number of Decree	Total Number of		
Number of Rooms	Total Number of		
a) Sleeping 6	b) Liv	ring Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats:	0
Shared Amenities	Number Desc	ription	
a) Kitchen	2	ription	
b) Bathrooms/Showers	2		
c) W.C.s	2		
Linna Batalla			
Licence Details			
Commencement date:	13/09/2016	Duration of licence:	25/06/2021
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
		¬	
Households 6	Persons 6		
Information referred to a	residential property t	tribunal or Lands Tribunal:	
	rootaontiai proporty	inbanar or Earlas Iribanan	
None			

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03138/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

46 Stanmer Park Road Brighton BN1 7JJ

Ward

Hollingdean And Stanmer

Name & Address of Licen	ice Holder			
Brighton Student Developmen	ts Ltd, C/O North Quay F	House Sutton Harbour Plymouth PL4 0RA		
Nama & Address of Daves	an Managing			
Name & Address of Perso		Dood Hove Fact Custov DNO 4FA		
Wir wi Harrington, 17a Harringto	on Lettings 109 Western	Road Hove East Sussex BN3 1FA		
Property Description				
Short description of licensed	d HMO (No of storeys, e	etc)		
Property Type = SHARED HO	USE, No of Units = 1, Oc	ccupancy = 8, No of Storeys = 4		
Number of Rooms	Total Number of	f Rooms 9		
a) Sleeping b) Living Rooms				
Number of Calf Cantained El	lete:	Number of New Colf Court Flate		
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Flats	: 0	
Shared Amenities Number Description				
a) Kitchen	2			
b) Bathrooms/Showers	3			
c) W.C.s	3			
Licence Details				
Licence Details				
Commencement date:	23/09/2016	Duration of licence:	25/06/2021	
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
Households 8	Persons 8			
Information referred to a	residential property t	tribunal or Lands Tribunal:		
None				
Decision of Tribunal		Reference number		
Summary of conditions of lie	cence			

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, MANAGEMENT/REPAIRS



#### Licence No.

#### 2016/03139/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

21 Oriental Place Brighton BN1 2LL

Ward

Regency

Name & Address of Licence Holder				
First Charterhouse Investments Limited, 30 New Road Brighton East Sussex BN1 1BN				
Name & Address of Person Managing				
Kudos Agents, J Jones T/A Kudos Ventures Gemini House 136 - 140 Old Shoreham Road, Hover 146 - 140 Old Shoreham Road, Hov	e BN3 7BD			
Property Description				
Short description of licensed HMO (No of storeys, etc)				
Property Type = SHARED HOUSE, No of Units = 16, Occupancy = 9, No of Storeys = 5				
Number of Rooms Total Number of Rooms 9				
a) Sleeping b) Living Rooms				
a) clooping				
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	s: 0			
Number of John John John John John John John John	J. U			
Shared Amenities Number Description				
a) Kitchen				
b) Bathrooms/Showers				
c) W.C.s				
Licence Details				
Commencement date: 24/08/2016 Duration of licence:	12/06/2021			
Manimum annual and format and a superior of the superior of th				
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
Households 9 Persons 9				
Information referred to a residential property tribunal or Lands Tribunal:				
None  Periode of Tribunal				
Decision of Tribunal Reference number				
A control of the Property of P				

Summary of conditions of licence

Additonal facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2016/03143/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

58 Upper Lewes Road Brighton BN2 3FG

Ward

St. Peter's And North Laine

Name & Address of Licence Holder			
Ms Jackie Clews, Stonepitts Farm Sealchart Sevenoaks TN15 OER			
Name & Address of Person Managing			
,			
Property Description			
Short description of licensed HMO (No of storeys, etc)			
Property Type = SHARED HOUSE, No of Units = 5, Occupancy = 5, No of Storeys = 3			
Number of Rooms Total Number of Rooms 6			
a) Sleeping b) Living Rooms			
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1			
Shared Amenities Number Description			
a) Kitchen 1			
b) Bathrooms/Showers 1			
c) W.C.s			
Licence Details			
Commencement date: 25/08/2016 Duration of licence: 07/06/2021			
Maximum number of paragraph or households permitted to accurat HMO under conditions of licenses			
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households 5 Persons 5			
Households 5 Persons 5			
Households 5 Persons 5  Information referred to a residential property tribunal or Lands Tribunal:			

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2016/03150/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

60 Upper Lewes Road Brighton BN2 3FG

Ward

St. Peter's And North Laine

Name & Address of Licence	e Holder		
Mr Errol Ganpatsingh, 23 Harrir	ngton Road Brighton BN	1 6RF	
Name & Address of Persor	n Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys, e	tc)	
Property Type = SHARED HOU	ISE, No of Units = 6, Oc	cupancy = 6, No of Storeys = 3	
Number of Decree	Total Number of	Page 7	
Number of Rooms	Total Number of		
a) Sleeping 6	b) Livi	ing Rooms 1	
Number of Self Contained Fla	its: 0	Number of Non Self Cont. Fla	its: 1
Shared Amenities	Number Descr	iption	
a) Kitchen	2		
b) Bathrooms/Showers c) W.C.s	3		
C) VV.O.S	<u> </u>		
Licence Details			
Commencement date:	20/10/2016	Duration of licence:	29/06/2021
Maximum number of persons	or households permit	ted to occupy HMO under conditions	of licence:
	————	,	
Households 6	Persons 6		
lufa was ations was a was attached	acidomtial muonomtust	vibs.l. s.v.l. s.v.ds. Tvibs.l.	
Information referred to a re	esidential property ti	nbunai or Lands Tribunai:	
None		Defense a service to a	
Decision of Tribunal		Reference number	
Summary of conditions of lice HMO - Elec Mandatory conds, I		onds, HMO - Furniture Mandatory cond	s, HMO - Gas

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03153/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

52 Warleigh Road Brighton BN1 4NS

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
St Chads Developments Ltd, 'I	Robins' Keymer Road Bu	urgess Hill RH15 0BA	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, e	etc)	
Property Type = SHARED HO	USE, No of Units = 1, Oc	ccupancy = 6, No of Storeys = 4	
Number of Deems	Total November of	5 Doomo 40	
Number of Rooms	Total Number of		
a) Sleeping 6	b) Liv	ring Rooms 1	
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Fla	nts: 1
Shared Amenities	Number Desci	ription	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
		_	
Commencement date:	19/10/2016	Duration of licence:	28/06/2021
Maximum number of person	e or households normi	tted to occupy HMO under conditions	of licence:
Maximum number of person	s or nousenoids permi	tted to occupy nimo under conditions	of licerice.
Households 6	Persons 6		
Information referred to a	residential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie			
HMO - Elec Mandatory conds.	HMO - Fire Doors 1, HM	MO - Fire Mandatory conds, HMO - Furni	ture

HMO - Elec Mandatory conds, HMO - Fire Doors 1, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03156/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

47 Upper Bevendean Avenue Brighton BN2 4FG

Ward

Moulsecoomb And Bevendean

Name & Address of Licen			
Ms Sue Baker, Summerhill Ho	use 3 Mulberry Lane Dit	tchling BN6 8UH	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of license	,	•	
Property Type = SHARED HO	USE, No of Units = 1, O	Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number o	of Rooms 6	
a) Sleeping 5	h) Li	ving Rooms 1	
u) diceping	b) Li	ving reoms	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ats: 0
Number of Sen Contained F	dis.	Number of Non-Sen Cont. Fig.	ats. U
Shared Amenities	Number Desc	cription	
a) Kitchen	1	, i puoli	
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	08/09/2016	Duration of licence:	21/06/2021
Maximum number of person	s or households perm	itted to occupy HMO under conditions	s of licence:
Households 5	Persons 5		
Information referred to a	residential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	cence		
		conds, HMO - Furniture Mandatory cond	ds, HMO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



### Licence No.

#### 2016/03164/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

81 Upper Lewes Road Brighton BN2 3FF

Ward

St. Peter's And North Laine

Name & Address of Licence	ce Holder		
Larkwalk Properties Ltd, 23 Sui	n Lane Harpenden Hertf	fordshire AL5 4EX	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys, e	etc)	
Property Type = SHARED HOL	JSE, No of Units = 1, Oc	ccupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 6	
a) Sleeping 5	b) Liv	ring Rooms 1	
			T
Number of Self Contained Fla	ats: 0	Number of Non Self Cont. Fl	ats: 1
Shared Amenities		ription	
a) Kitchen b) Bathrooms/Showers	1		
c) W.C.s	2		
Licence Details			
	22/22/22/2	1	10/07/2004
Commencement date:	06/09/2016	Duration of licence:	18/07/2021
Maximum number of persons	or households permit	tted to occupy HMO under conditions	s of licence:
	<b>D</b>	٦	
Households 5	Persons 5		
Information referred to a re	esidential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Cummon, of conditions of lis			
Summary of conditions of lic		conds, HMO - Furniture Mandatory cond	ds, HMO - Gas



#### Licence No.

#### 2016/03179/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

81 Preston Drove Brighton BN1 6LD

Ward

Withdean

Name O Address Cl.	Halden		
Name & Address of Licence			
Mrs Ramya K Perera, 30 Dale Dr	ive Patcham Brighton E	BN1 8LD	
N 0 4 1 1 6 5			
Name & Address of Person	Managing		
,			
Down to Down to the			
Property Description			
Short description of licensed H	•	•	
Property Type = SHARED HOUS	E, No of Units = 1, Occ	cupancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 7	
a) Sleeping		ng Rooms	
a) Sieeping	b) Livii	ig Rooms	
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Flat	s: 1
	Number Descri	ption	
a) Kitchen b) Bathrooms/Showers	1		
c) W.C.s	3		
C) VV.O.3			
Licence Details			
Commencement date:	22/03/2017	Duration of licence:	28/06/2021
Maximum number of persons of	or households permitt	ed to occupy HMO under conditions	of licence:
		, a	
Households 7 P	ersons 7		
Information referred to a res	idential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licen	ice		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Kitchen 1, HMO - Licensing Kitchen 6, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management, Ventilation



#### Licence No.

#### 2016/03190/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

38 Bonchurch Road Brighton BN2 3PH

Ward

Hanover And Elm Grove

Name & Address of Lice		
Ms Sanjana Kaura, Brookholl	ow 8 Holland Road Hove East Sussex BN3 1JJ	
Nama <sup>8</sup> Address of Dara	an Managing	
Name & Address of Pers		
S J Lettings Ltd, 52 Lewes Ro	ad Brighton BN2 3HVV	
Property Description		
Short description of license	d HMO (No of storeys, etc)	
•	OUSE, No of Units = 1, Occupancy = 6, No of Storeys = 4	
	, o. c, c	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 6	b) Living Rooms 1	
Number of Self Contained F	lats: 0 Number of Non Self Cont. Flats:	1
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
0	20/00/0040	07/00/0004
Commencement date:	28/09/2016 Duration of licence:	27/06/2021
Maximum number of person	ns or households permitted to occupy HMO under conditions of li	cence:
Hawaahalda C	Parsaus C	
Households 6	Persons 6	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of li HMO - Elec Mandatory conds	cence , HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HM	лО - Gas



#### Licence No.

#### 2016/03211/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

139 Ringmer Road Brighton BN1 9JA

Ward

Moulsecoomb And Bevendean

Name & Address of Licen	ce Holder		
Mr Roger Whittington, 6 Brang		2	
Will Roger Whittington, o brang	wyn Avenue Brighton Bivi oA	J	
Name & Address of Perso	on Managing		
	······································		
,			
Property Description			
Short description of license	d HMO (No of storeys, etc)		
Property Type = SHARED HO	USE, No of Units = 1, Occupar	ncy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Roor	ns 11	
a) Sleeping	b) Living Ro	ooms	
	T	٦	T
Number of Self Contained F	ats: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number Description	1	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	17/01/2017	Duration of licence:	26/06/2021
Maximum number of person	s or households permitted to	occupy HMO under conditions	of licence:
	<b>D</b>		
Households 6	Persons 6		
Information referred to a	residential property tr <u>ibun</u>	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	cence		



#### Licence No.

#### 2016/03216/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 91 Ditchling Road Brighton BN1 4SD

Ward

St. Peter's And North Laine

Name & Address of Licer			
Ms Shazia Raja, 94 Mulgrave	Rd Sutton SM2 6LR		
Name & Address of Person			
Mr Ahmed Khalil, 124 Lewes	Road Brighton BN2 3LG		
Property Description			
Short description of license	d HMO (No of storeys, et	c)	
Property Type = Not Assigned	I, No of Units = 12, Occupa	ancy = 12, No of Storeys = 4	
		_	
Number of Rooms	Total Number of F	Rooms 4	
a) Sleeping	b) Livir	g Rooms	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number Descri	otion	
a) Kitchen	4		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	13/10/2016	Duration of licence:	13/06/2021
commoncomont auto.	10/10/2010	baration of modified.	10/00/2021
Maximum number of persor	s or households permitte	ed to occupy HMO under conditions	of licence:
Households 12	Persons 12		
nousellolus 12	Persons 12		
Information referred to a	residential property tri	bunal or Lands Tribunal:	
None	regracinal property (i)	sanar or Editao-Ilibanai.	
Decision of Tribunal		Reference number	
Decision of Impuliar		Neterence number	
Summary of conditions of li	cence		

HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 4, HMO - Fire Blanket, HMO - Fire Doors 8, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Kitchen 6, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03219/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

48 Devonshire Place Brighton BN2 1QB

Ward

Queen's Park

Name & Address of Licence	e Holder		
Mr T J Coakley, 9 Osmond Gard	ens Hove BN3 1TE		
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed I	-IMO (No of storeys, e	etc)	
Property Type = BEDSIT, No of	Units = 6, Occupancy =	= 6, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 6	
a) Sleeping	b) Liv	ing Rooms	
Number of Self Contained Flat	s: 0	Number of Non Self Cont. Flat	ts: 1
Shared Amenities	Number Descr	ription	
a) Kitchen	3		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Licence Details			
Commencement date:	28/03/2017	Duration of licence:	28/06/2021
Maximum number of persons	or households nermit	tted to occupy HMO under conditions	of licence:
maximum number of persons	or mousemolus periim	tied to occupy rimo under conditions	or nicerice.
Households 6	Persons 6		
Information referred to a re	sidential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice	nce		



#### Licence No.

#### 2016/03229/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

12 Charles Street Brighton BN2 1TG

Ward

Queen's Park

Name & Address of Licen	ce Holder		
Mr Paul Samouel, Oaklea Hou	ise Meath Green Lane Horle	ey Surrey RH6 8JA	
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, etc)		
Property Type = SHARED HO	USE, No of Units = 9, Occu	pancy = 9, No of Storeys = 5	
Number of Rooms	Total Number of Ro	ooms 9	
a) Sleeping	b) Living	ROOMS	
November of Oalf Oantain ad E	1-4	November of New Oals Court Flo	4
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ats: 1
Shared Amenities	Number Descript	ion	
a) Kitchen	1		
b) Bathrooms/Showers	3		
c) W.C.s	3		
Licence Details			
Commencement date:	25/10/2016	Duration of licence:	27/06/2021
Maximum number of person	s or households permitted	d to occupy HMO under conditions	s of licence:
Households 9	Persons 9		
Information referred to a	residential property trib	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	cence	In LINO. For the Manufacture and	L. LIMO. O.



#### Licence No.

#### 2016/03237/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Thornes Rest Home 9 Westbourne Villas Hove BN3 4GQ

Ward

Westbourne

Name & Address of Licence	Holder			
Mr Michael Maguire, 43 Sackville	Road Hove BN3 3WD			
Name & Address of Person	Managing			
,				
Property Description				
Short description of licensed h	IMO (No of storeys, etc)			
Property Type = SHARED HOUS	SE, No of Units = , Occupanc	y = 12, No of Storeys = 3		
Number of Rooms	Total Number of Room	ns 23		
a) Sleeping	b) Living Ro			
a) olcoping	b) Living No	Ons		
Number of Self Contained Flat	s: 0	Number of Non Self Cont. Flats	: 0	
	Number Description			
a) Kitchen				
b) Bathrooms/Showers c) W.C.s				
c) w.o.s				
Licence Details				
Commencement date:	08/03/2017	Duration of licence:	14/06/2021	
commoncomont acto.	00/00/2011	Daration of noones.	1 1/00/2021	
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
Households 12 F	Persons 12			
Information referred to a re	sidential property tribuna	al or Lands Tribunal:		
None				
Decision of Tribunal		Reference number		
O				

Summary of conditions of licence



#### Licence No.

#### 2016/03238/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

47 Brading Road Brighton BN2 3PE

Ward

Hanover And Elm Grove

Name & Address of Licence Holder
Attractive Management Ltd, 23 Sun Lane Harpenden Herts AL5 4EX
Name & Address of Person Managing
Mr Adrian Clarke, 23 Sun Lane Harpenden AL5 4EX
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3
Number of Rooms Total Number of Rooms 6
a) Sleeping b) Living Rooms 1
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1
Shared Amenities Number Description
a) Kitchen 1
b) Bathrooms/Showers 1
c) W.C.s
Licence Details
Commencement date: 06/09/2016 Duration of licence: 18/07/2021
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Hawashalda 5 Barrana 5
Households 5 Persons 5
Information referred to a residential property tribunal or Lands Tribunal:
None
Decision of Tribunal Reference number
Summary of conditions of licence HMO - Elec Mandatory conds. HMO - Fire Mandatory conds. HMO - Furniture Mandatory conds. HMO - Gas



#### Licence No.

#### 2016/03253/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

19 Caledonian Road Brighton BN2 3HX

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
Mrs Tamara Standing, 6 Barro	wfield Close Hove BN3 6	STP	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys, e	atc)	
-	-	ccupancy = 7, No of Storeys = 4	
Toperty Type – STIANLD TIO	33L, NO 01 011113 - 1, 00	icupancy = 1, No or Storeys = 4	
Number of Rooms	Total Number of	Rooms 7	
a) Sleeping 7	b) Livi	ing Rooms 1	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Flats	s: 0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Descr 2 2 2 2	ription	
Licence Details			
Commencement date:	20/11/2014	Duration of licence:	13/09/2019
Maximum number of person	s or households permit	ted to occupy HMO under conditions o	of licence:
Households 7	Persons 7		
Information referred to a <b>i</b>	esidential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic		ondo LIMO. Eurnituro Mondotony condo	HMO Coo



### Licence No.

### 2016/03258/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

10 Trinity Street Brighton BN2 3HN

Ward

St. Peter's And North Laine

Name & Address of Licence	e Holder
St Chads Developments Ltd, 'Re	obins' Keymer Road Burgess Hill RH15 0BA
Name & Address of Persor	<u> </u>
Mr Nigel Gherardi, 'Robins' Key	mer Road Burgess Hill RH15 0BA
December 1	
Property Description	LIMO (No. of atayona ata)
Short description of licensed	
Property Type = SHARED HOU	JSE, No of Units = 1, Occupancy = 5, No of Storeys = 3
Number of Rooms	Total Number of Rooms 6
a) Sleeping 5	b) Living Rooms 1
Number of Self Contained Fla	ts: 0 Number of Non Self Cont. Flats: 1
Shared Amenities	Number Description
a) Kitchen	1
b) Bathrooms/Showers	1
c) W.C.s	2
Licence Details	
Commencement date:	19/10/2016 <b>Duration of licence</b> : 28/06/2021
Maximum number of persons	or households permitted to occupy HMO under conditions of licence:
Households 5	Persons 5
Information referred to a re	esidential property tribunal or Lands Tribunal:
None	
Decision of Tribunal	Reference number
Mandatory conds, HMO - Gas N	ence HMO - Fire Blocked MOE, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Licensing Kitchen 6, HMO - Property Chges erty Maint Mandatory conds, HMO - Repairs Floors 1, HMO - RubbishRecyc

Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03268/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 7 Grand Parade Brighton BN2 9QB

Ward

Queen's Park

Name & Address of Licence	Holder		
Ms Zerrin Hodgkins, 34 Marlboro	ugh Place Brighton BN1 1	UA	
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 6, Occup	ancy = 6, No of Storeys = 5	
Number of Decre-	Total Noveles - CD	aa 0	
Number of Rooms	Total Number of Ro		
a) Sleeping	b) Living	Rooms	
Number of Self Contained Flats	<b>s</b> : 0	Number of Non Self Cont. Flats	s: 0
	Number Descripti	on	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	1		
Licence Details			
		Г	
Commencement date:	26/09/2016	Duration of licence:	28/06/2021
Maximum number of persons of	or households permitted	to occupy HMO under conditions of	of licence:
Households 6 P	ersons 6		
Information referred to a res	sidential property trib	unal or Lands Tribunal:	
None	ruomiai proporty trib		
Decision of Tribunal		Reference number	
Summary of conditions of licer	100		



### Licence No.

#### 2016/03270/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

47 Rugby Place Brighton BN2 5JB

Ward

East Brighton

	3
Name & Address of Licence Holder	
Mr Peter Alexander, 18 Chesham Street Brighton East Sus	ssex BN2 1NA
Name & Address of Person Managing	
1	
Property Description	
Short description of licensed HMO (No of storeys, etc)	ı
Property Type = SHARED HOUSE, No of Units = 1, Occup	pancy = 5, No of Storeys = 3
Number of Rooms Total Number of Ro	poms 6
a) Sleeping b) Living	Rooms 1
Number of Self Contained Flats: 0	Number of Non Self Cont. Flats: 1
Shared Amenities Number Descript	ion
a) Kitchen 1	
b) Bathrooms/Showers 1	
c) W.C.s 1	
Licence Details	
Licence Details	
Commencement date: 08/08/2016	Duration of licence: 02/06/2021
Maximum number of persons or households permitted	I to occupy HMO under conditions of licence:
Households 5 Persons 5	
Information referred to a residential property trib	unal or Lands Tribunal:
None	
Decision of Tribunal	Reference number
Summary of conditions of licence	
Additional Facilities, Electrical Works, Fire Alarms, HMO -	Elec Mandatory conds, HMO - Fire Mandatory

Additional Facilities, Electrical Works, Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Loft Insulation, Management/Repairs, Ventilation



#### Licence No.

#### 2016/03307/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

25 De Montfort Road Brighton BN2 3AW

Ward

Hanover And Elm Grove

Name & Address of Licence	e Holder		
Ms Tracey Colverd, 77 Beacons		SHF	
Name & Address of Person	n Managing		
,			
Branarty Description			
Property Description Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOL			
Floperty Type - SHARED HOC	ise, no or office – o, occu	paricy - 0, NO or Storeys - 3	
Number of Rooms	Total Number of Ro	ooms 7	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Flat	s: 1
Shared Amenities	Number Descript	ion	
a) Kitchen b) Bathrooms/Showers c) W.C.s	1 2 2		
b) Bathrooms/Showers	2		
b) Bathrooms/Showers c) W.C.s  Licence Details	2 2		
b) Bathrooms/Showers c) W.C.s	2	Duration of licence:	25/06/2021
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:	2 2 2	Duration of licence: I to occupy HMO under conditions	
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:	2 2 2		
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons	2 2 2 12/01/2017 or households permitted Persons 6	d to occupy HMO under conditions	
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons  Households 6	2 2 2 12/01/2017 or households permitted Persons 6	d to occupy HMO under conditions	
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons Households 6  Information referred to a reference to a referen	2 2 2 12/01/2017 or households permitted Persons 6	d to occupy HMO under conditions	

Elec cert, Fire doors, Gas Safety, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03308/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

23 Burlington Street Brighton BN2 1AU

Ward

Queen's Park

Name & Address of Licen	ce Holder		
Mr David Druiff, 20 Powis Squ	are Brighton BN1 3H0	3	
Name & Address of Perso	on Managing		
Property Plus Lettings Ltd, 10	The Drive Hove East	Sussex BN3 3JA	
Property Description			
Short description of licensed	d HMO (No of storey	s, etc)	
Property Type = BEDSIT, No o	of Units = 8, Occupand	cy = 8, No of Storeys = 5	
Number of Rooms	Total Number	r of Rooms 6	
a) Sleeping	D)	Living Rooms	
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Flats:	0
Shared Amenities		scription	
a) Kitchen     b) Bathrooms/Showers	1		
c) W.C.s	2		
Licence Details			
0	05/00/0040		00/00/0004
Commencement date:	05/09/2016	Duration of licence:	02/06/2021
Maximum number of person	s or households per	mitted to occupy HMO under conditions of	licence:
Hausahalda 0	Darsons 0		
Households 8	Persons 8		
Information referred to a	residential propert	y tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice Additional facilities, Fire alarms		tory conds, HMO - Fire Mandatory conds, HM0	O -

Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO -Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03310/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

49 Montpelier Road Brighton BN1 3BA

Ward

Regency

Name & Address of Licenc	e Holder	
Mr S Cullen, 6 Orpen Road Hov	e BN3 6NJ	
Name & Address of Person	Managing	
Homelets (Brighton) Ltd, 47 Nor	folk Square Brighton BN1 2PA	
Property Description		
Short description of licensed	HMO (No of storeys, etc)	
Property Type = SHARED HOU	SE, No of Units = 5, Occupancy = 5, No of Storeys = 5	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping	b) Living Rooms	
a) olooping	b) Living Rooms	
Number of Self Contained Flat	s: 0 Number of Non Self Cont. Flat	s: 1
Number of Self Contained Fla	S. Number of Non-Sen Cont. Flat	5. I
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	1	
c) W.C.s	1	
Licence Details		
Licence Details		
Commencement date:	30/08/2017 Duration of licence:	26/06/2021
Maximum number of persons	or households permitted to occupy HMO under conditions	of licence:
		or neemee.
Households 5	Persons 5	
Information referred to a re	sidential property tribunal or Lands Tribunal:	
None	Sidentiar property tribuliar of Lanus Tribuliar.	
Decision of Tribunal	Reference number	
Summary of conditions of lice	nce	



#### Licence No.

#### 2016/03311/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

13 Lower Bevendean Avenue Brighton BN2 4FE

Ward

Moulsecoomb And Bevendean

Name & Address of Licence Hold	lor.	
Mr Roshan Sivapalan, 317 West Barne		
ivii Koshan Sivapalan, 317 West Bame	S Lane New Maluen Surrey KTS 63E	
Name & Address of Person Mana	aging	
Khalil Properties, 124 Lewes Rd Bright		
Trialii i Toperties, 124 Lewes Na Bright	511 B142 3EG	
Property Description		
Short description of licensed HMO (I	No of storeys, etc)	
Property Type = SHARED HOUSE. No	of Units = 1, Occupancy = 5, No of Storeys = 3	
	, cocapancy o, no crotoroyo	
Number of Rooms T	otal Number of Rooms 7	
a) Sleeping 5	b) Living Rooms 1	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	1
Shared Amenities Numb	er Description	
a) Kitchen 1		
b) Bathrooms/Showers 1		
c) W.C.s		
Licence Details		
Commencement date:	04/11/2016 Duration of licence:	04/07/2021
Maximum number of persons or bou	seholds permitted to occupy HMO under conditions of I	ioonoo
Maximum number of persons of nou	sendius permitted to occupy nino under conditions of i	icerice.
Households 5 Person	<b>s</b> 5	
Information referred to a residen	tial property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence	datory conds HMO - Fire Alarm Systems 7 HMO - Fire Doo	re 8 HMO

Fire - Under Stairs 2, HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 7, HMO - Fire Doors 8, HMO - Fire Mandatory conds, HMO - Fire Test Certificates, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Ventilation 2, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs



#### Licence No.

#### 2016/03312/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

109 Queens Park Road Brighton BN2 0GH

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder	
	lorfolk Square Brighton BN1 2PA	
	· · ·	
Name & Address of Perso	n Managing	
Homelets (Brighton) Ltd, 47 No	orfolk Square Brighton BN1 2PA	
Property Description		
Short description of licensed	I HMO (No of storeys, etc)	
Property Type = SHARED HO	USE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping 6	b) Living Rooms 1	
a) Sieeping	b) Living Rooms	
Number of Self Contained Fl	ats: 0 Number of Non Self Cont. Flats:	: 1
Number of Sen Contained Fi	Number of Non Sen Cont. Flats.	. [
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	2	
c) W.C.s	2	
License Details		
Licence Details		
Commencement date:	20/10/2016 Duration of licence:	29/06/2021
Maximum number of person	s or households permitted to occupy HMO under conditions of	flicence:
Households 6	Persons 6	
	· · · · · · · · · · · · · · · · · · ·	
Information referred to a r	esidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lic		
	HMO - Fire Doors 8, HMO - Fire Mandatory conds, HMO - Furnitur Mandatory conds, HMO - Licensing Kitchen 6, HMO - Property Cho	

Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO -Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03315/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

25 Grove Street Brighton BN2 9NY

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder		
Mr Harry & Mrs Brigid Buckna		ove BN3 4JN	
, ,			
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, e	etc)	
Property Type = SHARED HO	USE, No of Units = 1, Oc	ccupancy = 8, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 9	
a) Sleeping		ing Rooms	
a) Siceping	<i>b)</i> EIV		
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	nts: 1
Number of Self Contained i	ats.	Number of Non-Sen Cont. 1 is	1
Shared Amenities	Number Descr	ription	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Licence Details			
Commencement date:	13/10/2016	Duration of licence:	04/07/2021
Maximum number of person	s or households permit	ted to occupy HMO under conditions	of licence
			of nechec.
Households 8	Persons 8		
Information referred to a	rosidontial proporty t	ribunal or Lands Tribunal:	
None	residential property t	Historial of Earlas Historial.	
Decision of Tribunal		Reference number	
Summary of conditions of li	cence		

HMO - Elec Mandatory conds, HMO - Fire Doors 4, HMO - Fire Doors 8, HMO - Fire Locks, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Ventilation 3, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03317/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

12 Regency Square Brighton BN1 2FG

Ward

Regency

Name & Address of Licer	ice Holder		
Mr David Druiff, 20 Powis Squ	ıare Brighton BN1 3HG		
Name & Address of Person	on Managing		
Property Plus Lettings Ltd, An	nelia House Crescent Road	d Worthing BN11 1QR	
Property Description			
Short description of license	d HMO (No of storeys, et	tc)	
Property Type = BEDSIT, No	of Units = 18. Occupancy :	= 18. No of Storevs = 6	
Troporty Typo BEBOTT, No	or ormo io, occupancy	10, 110 01 01010)0	
Number of Rooms	Total Number of I	Rooms 23	
a) Sleeping	b) Livir	ng Rooms	
Number of Self Contained F	lats: 4	Number of Non Self Cont. F	Flats: 0
rumber of och contained i	1413.	Number of Non Sen Sont. I	1013.
Shared Amenities	Number Descri	intion	
a) Kitchen	18	ption	
b) Bathrooms/Showers	3		
c) W.C.s	5		
Licence Details			
	05/00/0040	<b>-</b>	20/20/2024
Commencement date:	05/09/2016	Duration of licence:	02/06/2021
Maximum number of persor	ıs or households permitt	ted to occupy HMO under condition	ns of licence:
	•		
Households 18	Persons 18		
	residential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	datory conds, HMO - Fire N	Mandatory conds, HMO - Furniture M	

Fire alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works, aDDITIONAL FACILITIES



#### Licence No.

#### 2016/03321/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

21 Riley Road Brighton BN2 4AG

Ward

Moulsecoomb And Bevendean

Name & Address of Licence	ce Holder	
Mrs Maria Luisa Bergesio-Moor	re, Flat 19 Lansdowne Court 25 Lansdowne Road Hove BN3 10	GB
Name & Address of Person	n Managing	
Mr Barrie Keith Moore, Flat 19 I	Lansdowne Court 25 Lansdowne Road Hove East Sussex BN3	1GB
Property Description		
Short description of licensed	• • •	
Property Type = SHARED HOL	JSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping	b) Living Rooms	
, , ,	,	
Number of Self Contained Fla	ats: 0 Number of Non Self Cont. Fla	its: 0
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	1	
c) W.C.s	1	
Licence Details		
Commencement date:	27/10/2016 Duration of licence:	29/06/2021
Maximum number of persons	s or households permitted to occupy HMO under conditions	of licence:
Households 5	Persons 5	
nousenoius	Persons 5	
Information referred to a re	esidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lice	ence	a LIMO Con



#### Licence No.

#### 2016/03322/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

65 Upper Lewes Road Brighton BN2 3FG

Ward

St. Peter's And North Laine

Name & Address of Licence Holder
Mr S Gould, C/o 47 Norfolk Square Brighton BN1 2PA
Name & Address of Person Managing
Homelets (Brighton) Ltd, 47 Norfolk Square Brighton BN1 2PA
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3
Number of Rooms Total Number of Rooms 6
a) Sleeping b) Living Rooms
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
Shared Amenities Number Description  a) Kitchen
a) Kitchen b) Bathrooms/Showers
a) Kitchen
a) Kitchen b) Bathrooms/Showers
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details
a) Kitchen b) Bathrooms/Showers c) W.C.s
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 16/01/2017 Duration of licence: 29/06/2021
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 16/01/2017 Duration of licence: 29/06/2021  Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households 5 Persons 5
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 16/01/2017 Duration of licence: 29/06/2021  Maximum number of persons or households permitted to occupy HMO under conditions of licence:
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 16/01/2017 Duration of licence: 29/06/2021  Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households 5 Persons 5  Information referred to a residential property tribunal or Lands Tribunal:

Bathroom floor, Fridge freezer, Gas cert, HMO - Elec Mandatory conds, HMO - Fire Doors 8, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - General 1, HMO - General 6, HMO - General Electrical 1, HMO - General Electrical 2, HMO - Licensing Kitchen 6, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Kitchen Floor covering, WHB, bathroom light



#### Licence No.

#### 2016/03324/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

79 Upper Lewes Road Brighton BN2 3FF

Ward

St. Peter's And North Laine

Name & Address of Licence	e Holder			
Mr Nigel Hughes, C/o Homelets	s (Brighton) Ltd 47	Norfolk Squ	are Brighton BN1 2PA	
Name & Address of Perso	n Managing			
Homelets (Brighton) Ltd, 47 No	rfolk Square Brigh	ton BN1 2PA	1	
Property Description				
Short description of licensed	HMO (No of stor	eys, etc)		
Property Type = SHARED HOL	JSE, No of Units =	1, Occupand	cy = 5, No of Storeys = 4	
			_	
Number of Rooms	Total Numi	ber of Room	s 6	
a) Sleeping 5		b) Living Roo	oms 1	
Number of Self Contained Fla	ats:	0	Number of Non Self Cont. Flats	s: 1
Shared Amenities	Number	Description		
a) Kitchen	1			
b) Bathrooms/Showers	1			
c) W.C.s	2			
Lieuwa Bataila				
Licence Details				
Commencement date:	16/08/201	6	Duration of licence:	01/07/2021
Maximum number of persons	or households r	nermitted to	occupy HMO under conditions of	of licence:
	or nousenous p	Jerimited to	occupy rimo under conditions t	nicence.
Households 5	Persons	5		
Information referred to a re	esidential prope	erty tribuna	al or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
	tory conds, HMO -		ory conds, HMO - Furniture Manda IO - Property Chges Mandatory co	

Fire Alarm, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Kitchen 4, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Kitchen 6, HMO - Repairs Steps etc 11, HMO - Repairs Ventilation 2, HMO - Repairs Ventilation 3, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Mangement / Repairs



#### Licence No.

#### 2016/03328/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

42 Temple Street Brighton BN1 3BH

Ward

Regency

Name & Address of Licenc	Holder		
Miss A Starnes, 37 Welbeck Ave	nue Hove BN3 4JQ		
Name & Address of Person	Managing		
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
-	SE, No of Units = 1, Occupancy = 6, N	No of Storevs = 3	
Toperty Type – STIANLD 1100	5L, NO OF OTHES = 1, Occupancy = 0, 1	10 of Stoleys – 3	
Number of Rooms	Total Number of Rooms 8		
a) Sleeping	b) Living Rooms		
Number of Self Contained Flat	s: 0 Numb	er of Non Self Cont. Flats:	1
Shared Amenities	Number Description		
a) Kitchen	1		
o) Bathrooms/Showers	2		
c) W.C.s	6		
Licence Details			
Commencement date:	28/03/2017 <b>Dur</b>	ration of licence:	04/06/2021
Maximum number of persons	or households permitted to occupy	HMO under conditions of	licence:
-			
Households 6	Persons 6		
nformation referred to a re	sidential property tribunal or La	ands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice		Turnitura Mandatan, aanda l	IMO Coo



#### Licence No.

#### 2016/03333/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

1 Welbeck Avenue Hove BN3 4JP

Ward

Wish

Name & Address of Licence	Holder	
Mr Philip Worley, 3 South Beach	Beach Road Shoreham BN43 5LY	
Name & Address of Person	Managing	
,		
Property Description		
Short description of licensed H	IMO (No of storeys, etc)	
Property Type = SHARED HOUS	E, No of Units = 10, Occupancy = 10, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 11	
a) Sleeping 10	b) Living Rooms 1	
Number of Self Contained Flats	S: 0 Number of Non Self Cont. Flats:	1
Number of Self Contained Flats	Number of Non-Sen Cont. Flats.	I
Shared Amenities I	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	3	
c) W.C.s	5	
Licence Details		
Commencement date:	07/10/2016 Duration of licence:	06/07/2021
Maximum number of persons o	or households permitted to occupy HMO under conditions of li	cence:
Households 10 P	ersons 10	
Tiousenoids 10 1	6130113	
Information referred to a res	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licer HMO - Elec Mandatory conds. HI	nce MO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HM	1O - Gas



#### Licence No.

#### 2016/03334/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) Rutland House 29 Rutland Gardens Hove BN3 5PD

Ward

Westbourne

Name O Adding 511	Halden		
Name & Address of Licence		2016	
Mr Philip Worley, 3 South Beach	Beach Road Shoreha	ım BN43 5LY	
Name O Address of Dansey	Managina		
Name & Address of Person	Managing		
,			
Dranauty Description			
Property Description	IMO (No of otomore)	-4-)	
Short description of licensed F			
Property Type = SHARED HOUS	SE, No of Units = 9, Oc	ccupancy = 9, No of Storeys = 3	
Number of Rooms	Total Number of	f Rooms 11	
a) Sleeping 9	b) Liv	ring Rooms 1	
a) oldeping	b) Liv	The state of the s	
Normalis and Colf Constains of Flori		North an of New Oalf Court Flat	4
Number of Self Contained Flat	s: 0	Number of Non Self Cont. Flat	s: 1
Ole A	Normalia and Danasa	win 41 a.c.	
Shared Amenities a) Kitchen	Number Desci	ription	
b) Bathrooms/Showers	4		
c) W.C.s	6		
Licence Details			
•	07/40/0040	D	00/07/0004
Commencement date:	07/10/2016	Duration of licence:	06/07/2021
Maximum number of persons of	or households permi	tted to occupy HMO under conditions	of licence:
		٦	
Households 9 F	Persons 9		
Information referred to a res	sidential property t	tribunal or Lands Tribunal:	
None	national property t	The state of the s	
Decision of Tribunal		Reference number	
Summary of conditions of lice	1Ce	and IIMO Franktura Mandatani anda	LIMO O



#### Licence No.

#### 2016/03340/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

68 Westbourne Gardens Hove BN3 5PQ

Ward

Westbourne

Name & Address of Licen	ce Holder		
Mr Philip Worley, 3 South Bea	ch Beach Road Shoreh	iam BN43 5LY	
Name & Address of Perso	n Managing		
,			
Dranauty Description			
Property Description  Short description of licenses	HMO (No of storoys	atc)	
•		•	
Property Type = SHARED HO	USE, NO OI UTIILS = 7, C	Occupancy = 7, No of Storeys = 3	
Number of Rooms	Total Number	of Rooms 9	
a) Sleeping 7	b) L	iving Rooms 1	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Flat	ts: 1
Shared Amenities		cription	
a) Kitchen     b) Bathrooms/Showers	3		
c) W.C.s	3		
,			
Licence Details			
Commencement date:	07/10/2016	Duration of licence:	06/07/2021
	37713/2313		00/01/2021
Maximum number of person	s or households perm	nitted to occupy HMO under conditions	of licence:
Households 7	Persons 7		
Information referred to a	residential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie HMO - Elec Mandatory conds,		conds, HMO - Furniture Mandatory conds	s, HMO - Gas



#### Licence No.

#### 2016/03358/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

179 Lewes Road Brighton BN2 3LD

Ward

Hanover And Elm Grove

Nama ? Adduses of Linear	ao Holdon		
Name & Address of Licence		054	
Mrs Carol O'Connor, 87 Stanfo	rd Avenue Brighton BN1	6FA	
Name & Address of Daves	n Managina		
Name & Address of Perso	n Managing		
,			
Branarty Description			
Property Description	LUMO (No of storous of	(a)	
Short description of licensed		·	
Property Type = SHARED HOL	JSE, No of Units = 1, Oco	cupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 8	
a) Sleeping	h) Livi	ng Rooms	
a) diceping	<i>5)</i> EIVII		
N		N	. 4
Number of Self Contained Fla	ats: 0	Number of Non Self Cont. Flat	ts: 1
Observed Americal	Noveles Descri		
Shared Amenities a) Kitchen	Number Descri	ption	
b) Bathrooms/Showers	2		
c) W.C.s	2		
,			
Licence Details			
Commencement date:	30/01/2017	Duration of licence:	01/06/2021
Maximum number of persons	s or households permiti	ted to occupy HMO under conditions	of licence:
Households 5	Persons 5		
			_
Information referred to a r	esidential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	



#### Licence No.

#### 2016/03359/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Aymer Court Rest Home 11 Aymer Road Hove BN3 4GB

Ward

Westbourne

Name & Address of Licen	ice Holder		
Mr Philip Worley, 3 South Bea	ch Beach Road Shorehan	n BN43 5LY	
Name & Address of Perso	on Managing		
Property Description			
Short description of license	d HMO (No of storeys, et	c)	
•		ccupancy = 14, No of Storeys = 3	
the A Mer -	, , ,	,	
Number of Rooms	Total Number of F	Rooms 16	
a) Sleeping 14	b) Livin	g Rooms 2	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number Descrip	ption	
a) Kitchen o) Bathrooms/Showers	8		
c) W.C.s	13		
,			
Licence Details			
Commencement date:	07/10/2016	Duration of licence:	06/07/2021
sommencement date.	07710/2010	Duration of ficerice.	00/07/2021
Maximum number of person	s or households permitte	ed to occupy HMO under conditions of I	icence:
Households 14	Persons 14		
nformation referred to a	residential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	, HMO - Fire Mandatory co	nds, HMO - Furniture Mandatory conds, HI	



### Licence No.

#### 2016/03362/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

193 Hollingdean Terrace Brighton BN1 7HF

Ward

Hollingdean And Stanmer

Name & Address of Licence	ce Holder			
Ms Sue Baker, Summerhill Hou	ıse Mulberry La	ane Ditchling BN	N6 8UH	
Name & Address of Person	n Managing			
MTM Property Services Ltd, 10	8A Lewes Road	d Brighton BN2	4AE	
Property Description				
Short description of licensed	HMO (No of s	toreys, etc)		
Property Type = SHARED HOL	JSE, No of Unit	ts = 1, Occupan	ncy = 6, No of Storeys = 3	
Number of Rooms	Total Nu	umber of Roon	ns 7	
	rotal No			
a) Sleeping 6		b) Living Ro	ooms I	
N			N	
Number of Self Contained Fla	its:	0	Number of Non Self Cont. Flats:	0
Charad Amenities	Number	Description		
Shared Amenities a) Kitchen	Number 2	Description	l	
b) Bathrooms/Showers	2			
c) W.C.s	2			
Licence Details				
Commencement date:	08/09/2	2016	Duration of licence:	21/06/2021
Commoncomont date.	00/00/2	.010	Baration of hooned.	21/00/2021
Maximum number of persons	or household	ls permitted to	occupy HMO under conditions of l	icence:
Households 6	Persons	6		
Information referred to a re	esidential pro	operty tribun	al or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
	HMO - Fire Bla		re Mandatory conds, HMO - Furniture	Property

Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03363/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

140 Hartington Road Brighton BN2 3PB

Ward

Hanover And Elm Grove

Name & Address of Licence Holder	
Ms Patricia Cobb, 3 Hylden Close Brighton East Sussex BN2 6DP	
Name & Address of Person Managing	
S J Lettings Ltd, 52 Lewes Road Brighton BN2 3HW	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms Total Number of Rooms 7	
a) Sleeping b) Living Rooms 1	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats:	1
Shared Amenities Number Description	
a) Kitchen 2	
b) Bathrooms/Showers 2 2 2	
Z	
Licence Details	
Commencement date: 11/08/2016 Duration of licence: 27/06	5/2021
Commencement date. 11/00/2010 Duration of ficence. 27/00	72021
${\bf Maximum\ number\ of\ persons\ or\ households\ permitted\ to\ occupy\ HMO\ under\ conditions\ of\ licence:}$	
Households 6 Persons 6	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of licence HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas	s



### Licence No.

#### 2016/03364/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

8 Raphael Road Hove BN3 5QQ

Ward

Westbourne

Name & Address of Licen	ce Holder	
Mr Philip Worley, 3 South Bea	ch Beach Road Shoreham West Sussex BN43 5LY	
Name & Address of Perso	n Managing	
,		
Property Description		
Short description of license	d HMO (No of storeys, etc)	
Property Type = SHARED HO	USE, No of Units = 8, Occupancy = 8, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 9	
<u> </u>		
a) Sleeping 8	b) Living Rooms 1	
Number of Self Contained Fl	ats: 0 Number of Non Self Cont. Flat	ts: 1
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	3	
c) W.C.s	3	
Licence Details		
Commencement date:	07/10/2016 Duration of licence:	06/07/2021
Maximum number of person	s or households permitted to occupy HMO under conditions	of licence:
Households 8	Persons 8	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lie		NUMO Cos
i livio - Elec ivialidatory conds,	HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds	, i livio - Gas



#### Licence No.

#### 2016/03386/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

26 Normanton Street Brighton BN2 3AT

Ward

Hanover And Elm Grove

Name & Address of Licence			
Mr S Gould, C/o 47 Norfolk Squa	are Brighton BN1 2PA		
Name & Address of Person			
Homelets (Brighton) Ltd, 47 Norf	olk Square Brighton Bl	N1 2PA	
B ( B ) (			
Property Description			
Short description of licensed H	IMO (No of storeys, e	itc)	
Property Type = SHARED HOUS	SE, No of Units = 1, Oc	cupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 6	
a) Sleeping	b) Livi	ing Rooms	
Number of Self Contained Flat	s: 0	Number of Non Self Cont. Fla	ts: 1
	Number Descr	iption	
a) Kitchen b) Bathrooms/Showers	1		
c) W.C.s	2		
0) 11.0.0			
Licence Details			
Commencement date:	08/03/2017	Duration of licence:	30/06/2021
Maximum number of persons of	or households permit	ted to occupy HMO under conditions	of licence:
			0
Households 5 F	Persons 5		
Information with	-1:1:::::::::::::::::::::::::::::::::::	21	
Information referred to a res	sidential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	



#### Licence No.

#### 2016/03387/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

4 Medmerry Hill Brighton BN2 4TQ

Ward

Moulsecoomb And Bevendean

Name & Address of Licence Holder				
Mr Toby Hamilton, 34 Langdale Gardens Hove East Sussex BN3 4F	HG			
Name & Address of Person Managing				
MTM Property Services Ltd, 108A Lewes Road Brighton BN2 4AE				
Property Description				
Short description of licensed HMO (No of storeys, etc)				
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5	, No of Storeys = 3			
Number of Rooms Total Number of Rooms	9			
a) Sleeping b) Living Rooms	1			
Number of Self Contained Flats: 0 Num	mber of Non Self Cont. Flats: 1			
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s  Number  1  2  2				
Licence Details				
Commencement date: 31/10/2016 D	Puration of licence: 28/06/2021			
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
	,			
Households 5 Persons 5				
Information referred to a residential property tribunal or I	l ands Tribunal:			
None	Lando Iribanan			
Decision of Tribunal	Reference number			
Summary of conditions of licence				
	Furniture Mandatory conds. HMO. Cas			



#### Licence No.

#### 2016/03388/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

13 Hartington Road Brighton BN2 3LJ

Ward

Hanover And Elm Grove

Name & Address of Lice	nce Holder		
Mr & Mrs Barbara & Nigel Dy	er, Clapper Mill Cottage La	amorna Penzance Cornwall TR19 6NY	
Name & Address of Pers	on Managing		
Property Moves Ltd, 109 Chu	rch Road Hove BN3 2AF		
<b>.</b>			
Property Description	d LIMO (No of starrage o	4-1	
Short description of license	-		
Property Type = SHARED HO	OUSE, No of Units = 1, Oc	cupancy = 5, No of Storeys = 4	
Number of Rooms	Total Number of	Rooms 11	
a) Sleeping	b) Livi	ng Rooms	
Number of Self Contained F	Flats: 0	Number of Non Self Cont. Flat	ts: 1
Shared Amenities	Number Descr	iption	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
Commencement date:	12/01/2017	Duration of licence:	02/07/2021
Maximum number of perso	ns or households permit	ted to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Information referred to a	residential property to	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of I	icence		



### Licence No.

#### 2016/03391/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

106A Church Road Hove BN3 2EB

Ward

Central Hove

Name & Address of Licen	ice Holder		
Mr Anthony Prior, 16 Duke Str	eet Brighton East Sussex E	BN1 1AH	
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, etc	<b>:</b> )	
Property Type = SHARED HO	USE, No of Units = 6, Occi	upancy = 6, No of Storeys = 4	
		_	
Number of Rooms	Total Number of R		
a) Sleeping	b) Livin	g Rooms	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number Descrip	otion	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Licence Details			
Commencement date:	02/11/2016	Duration of licence:	28/06/2021
Maximum number of person	ıs or households nermitte	ed to occupy HMO under conditions	of licence:
		a to occupy time under continuone	0
Households 6	Persons 6		
Information referred to a	residential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	cence	LINO 5 . To Market and	11110



#### Licence No.

#### 2016/03395/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

54 Gladstone Place Brighton BN2 3QD

Ward

Hanover And Elm Grove

Novo O Address of L	an Haldan		
Name & Address of Licen			
Mrs Carol O'Connor, 87 Stanfo	rd Avenue Brighton BN1 6FA		
Name O Address of Davis	u Managina		
Name & Address of Perso	n Managing		
,			
Property Description			
	LHMO (No of storous sto)		
Short description of licensed			
Property Type = SHARED HO	JSE, No of Units = 1, Occupancy = 5, No of St	toreys = 3	
Number of Rooms	Total Number of Rooms 9		
a) Sleeping	b) Living Rooms	1	
a, e.eepg	2) <u></u>	I	
Number of Self Contained Fl	ats: 0 Number of N	Ion Self Cont. Flats:	1
Number of Sen Contained Fi	Number of N	ion sen cont. Flats.	l
Shared Amenities	Number Description		
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	30/01/2017 <b>Duration o</b>	of licence:	01/06/2021
Commencement date.	30/01/2017 Bulation 6	n licelice.	01/00/2021
Maximum number of persons	s or households permitted to occupy HMO	under conditions of I	icence:
Households 5	Persons 5		
nousellolus 5	reisons 5		
Information referred to a r	esidential property tribunal or Lands T	ribunal:	
None			
Decision of Tribunal	Refe	erence number	
Summary of conditions of lic	ence	- M	MO 0



#### Licence No.

#### 2016/03413/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

10 Grand Parade Brighton BN2 9QB

Ward

Queen's Park

Name & Address of Licence Holder	
Mrs Penny Hoffman, Woodside Horstead Lane Isfield TN22 5TU	
Wils Felling Florinian, Woodside Florstead Lane Islield 11422 510	
Name & Address of Person Managing	
Tanat-Jones & Co, 49 Norfolk Square Brighton BN1 2PA	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 7, No of Storeys =	4
Number of Rooms Total Number of Rooms 10	
a) Sleeping b) Living Rooms 2	
Number of Self Contained Flats: 0 Number of Non Self	Cont. Flats: 1
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s  Number  2  2  2  2	
Licence Details	
	40/00/0004
Commencement date: 24/08/2016 Duration of licence	e: 16/06/2021
Maximum number of persons or households permitted to occupy HMO under c	onditions of licence:
Households 7 Persons 7	
Information referred to a residential property tribunal or Lands Tribunal	:
None	
Decision of Tribunal Reference n	umber
Summary of conditions of licence HMO - Flec Mandatory conds. HMO - Fire Alarm Systems 7. HMO - Fire Mandatory of	rands HMO - Eurniture



#### Licence No.

#### 2016/03415/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

33 Little Preston Street Brighton BN1 2HQ

Ward

Regency

Name & Address of Licence Holder	
Chung Enterprises Ltd, 12-13 Ship Street Brighton BN1 1AD	
Name 9 Address of Davison Managina	
Name & Address of Person Managing	
Home Leasing Brighton Ltd, 64 Queens Road Brighton BN1 3XD	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
· · · · · · · · · · · · · · · · · · ·	
Number of Rooms Total Number of Rooms 6	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	o: 0
Shared Amenities  Number  Description  a) Kitchen  b) Bathrooms/Showers  c) W.C.s	
Licence Details	
Commencement date: 16/03/2017 Duration of licence:	04/07/2021
Maximum number of persons or households permitted to occupy HMO under conditions o	f licence:
Households 5 Persons 5	
Households 5 Persons 5	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	

Dampness, Fire doors, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - General 1, HMO - General 6, HMO - General 7, HMO - General Electrical 1, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Kitchen Sockets, Kitchen floor, Pigeons, Shower ventilation, Ventilation, flooring to shower room, kitchen tiles



#### Licence No.

#### 2016/03423/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

102 Hanover Terrace Brighton BN2 9SP

Ward

Hanover And Elm Grove

Name O Address of Livers	. 11-1-1		
Name & Address of Licenc			
Roberto & Emelio Savvides, C/o	47 Norfolk Square Brigh	iton BN1 2PA	
Name O Address of Daves	Managing		
Name & Address of Persor		4.004	
Homelets (Brighton) Ltd, 47 Nor	folk Square Brighton BN	1 2PA	
Property Description			
Short description of licensed	HMO (No of storous at	2)	
-	•		
Property Type = SHARED HOU	SE, No of Units = 1, Occ	upancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of F	Rooms 6	
a) Sleeping	b) Livin	g Rooms	
-,	-,		
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Flat	ts: 0
Number of Self Contained Fia	. U	Number of Non-Sen Cont. Flat	.s. U
Shared Amenities	Number Descrip	ation	
a) Kitchen	1	7.1011	
b) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
Commencement date:	27/10/2016	Duration of licence:	29/06/2021
Commencement date:	27/10/2016	Duration of licence:	29/00/2021
Maximum number of persons	or households permitte	ed to occupy HMO under conditions	of licence:
Haveahalda 5	Down one 5		
Households 5	Persons 5		
Information referred to a re	sidential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Cummon, of acaditions of the			
Summary of conditions of lice	ince	and the time of time of the time of the time of time of the time of ti	LIMO



#### Licence No.

#### 2016/03426/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

17 Brewer Street Brighton BN2 3HH

Ward

St. Peter's And North Laine

Name & Address of Licence Holder	
Ms Louise McEvoy, Basement Flat 31 Montpelier Crescent Brighton East Sussex BN1 3JL	
Name 9 Address of Davier Manarina	
Name & Address of Person Managing	
,	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 5, Occupancy = 5, No of Storeys = 3	
Number of Rooms Total Number of Rooms 5	
a) Sleeping b) Living Rooms	
a, elooping	
Number of Self Contained Flats: 0 Number of Non Self Cont. Fl	ats: 1
Shared Amenities Number Description	
a) Kitchen 1	
b) Bathrooms/Showers 2 2 2	
Licence Details	
Commencement date: 17/01/2017 Duration of licence:	30/06/2021
Commencement date.	30/00/2021
Maximum number of persons or households permitted to occupy HMO under condition	s of licence:
Households 5 Persons 5	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of licence	L 11140 O



### Licence No.

#### 2016/03427/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

1 Islingword Street Brighton BN2 9UR

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder		
Ms Dawn Williams, 30 Valiant		t Battersea SW11 3LU	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	d HMO (No of storeys, e	tc)	
Property Type = SHARED HO	USE, No of Units = 1, Oc	cupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 7	
a) Sleeping	D) LIVI	ng Rooms	
Nombon of Oalf Oantain at El	-4	Number of New Oals Cons. Fla	4
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Fla	its: 1
Shared Amenities	Number Descr	iption	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	2		
Licence Details			
Commencement date:	10/11/2016	Duration of licence:	28/06/2021
Maximum number of person	s or households permit	ted to occupy HMO under conditions	of licence:
-		1	
Households 5	Persons 5		
Information referred to a <b>ı</b>	residential proper <u>ty t</u> ı	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic	cence		

Elec installation, Gas cert, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03434/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

63 Hollingbury Road Brighton BN1 7JB

Ward

Hollingdean And Stanmer

Name & Address of Licenc	e Holder		
Mr Ian Lewis, The Thatched Co	ttage Jevington Road \	Wannock East Sussex BN26 5NX	
Name & Address of Persor	n Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys	etc)	
-	-	occupancy = 5, No of Storeys = 3	
Floperty Type - SHANED HOC	GE, NO OF OTHES - 5, O	occupancy – 5, No or Storeys – 5	
Number of Rooms	Total Number o	of Rooms 6	
a) Sleeping	b) Liv	ving Rooms	
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Flats	s: 1
Shared Amenities		cription	
a) Kitchen b) Bathrooms/Showers	3		
c) W.C.s	4		
_			
Licence Details			
Commencement date:	08/09/2016	Duration of licence:	19/06/2021
			611
Maximum number of persons	or nousenoids perm	itted to occupy HMO under conditions of	of licence:
Households 5	Persons 5		
	- : - : - : - : - : - : - : - : - : - :	Authorisation Landa Taibrinati	
	esidential property	tribunal or Lands Tribunal:	
None Decision of Tribunal		Reference number	
		Neierence number	
Summary of conditions of lice		conde HMO Eurniture Mandatory conde	HMO Cas



#### Licence No.

#### 2016/03490/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

52 Roedale Road Brighton BN1 7GB

Ward

Hollingdean And Stanmer

			<del></del>
Name & Address of Lice			
Mr Nicholas & Mrs Alzbeta J	ohnson, Flat 2 Vipers Wha	rf Railway Lane Lewes BN7 2AQ	
Name & Address of Pers	<u> </u>		
Q Estate Agents Ltd, Maytre	e House Meres Lane Heatl	nfield TN21 0TZ	
Property Description			
Short description of licens	ed HMO (No of storeys, e	tc)	
Property Type = SHARED H	OUSE, No of Units = 1, Oc	cupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 7	
a) Sleeping 6	D) LIVI	ng Rooms 1	
Number of Self Contained	Flats: 0	Number of Non Self Cont. Fl	ats: 0
Shared Amenities	Number Descr	iption	
a) Kitchen     b) Bathrooms/Showers	2		
c) W.C.s	2		
,			
Licence Details			
0	07/44/0040	<b>5</b>	00/00/0004
Commencement date:	07/11/2016	Duration of licence:	28/06/2021
Maximum number of perso	ons or households permit	ted to occupy HMO under condition	s of licence:
	<b>D</b>	1	
Households 6	Persons 6		
Information referred to a	a residential property t	ribunal or Lands Tribunal:	
None		·	
Decision of Tribunal		Reference number	
	s, HMO - Fire Mandatory c	onds, HMO - Furniture Mandatory cond	

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03492/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

14 Carlyle Street Brighton BN2 9XW

Ward

Hanover And Elm Grove

Name & Address of Lice	nce Holder		
Mrs Elke Huggett, 30 Tumulu	s Road Saltdean BN2 8FS		
Name & Address of Pers	on Managing		
,			
Property Description			
Short description of license	ed HMO (No of storeys, etc)		
Property Type = SHARED HO	OUSE No of Units = 1 Occur	ancy = 5 No of Storeys = 3	
Troporty Type Of Witted Tro	700L, 110 01 011110 1, 000up	and, to or elerate	
Number of Rooms	Total Number of Ro	oms 6	
a) Sleeping	b) Living	Rooms	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flat	:s: 1
Trainibor of con contained i	0		1
Shared Amenities	Number Descripti	on	
a) Kitchen	1	<b>011</b>	
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
	00/00/0047	<b>-</b>	00/00/0004
Commencement date:	28/02/2017	Duration of licence:	26/06/2021
Maximum number of person	ns or households permitted	to occupy HMO under conditions	of licence:
-	-		
Households 5	Persons 5		
la fa was a ti a sa wa fa wa a la ta a a		mal and anda Talbanah	
Information referred to a	residential property tribi	inal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of I	icence		



#### Licence No.

#### 2016/03495/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

48 Lower Market Street Hove BN3 1AT

Ward

Brunswick And Adelaide

Name & Address of Licer	nce Holder		
Mr P Lau, C/o 47 Norfolk Squ	are Brighton BN1 2PA		
Name & Address of Pers	on Managing		
Homelets (Brighton) Ltd, 47 N	orfolk Square Brighton BN1 2	PA	
Property Description			
Short description of license	d HMO (No of storeys, etc)		
Property Type = SHARED HC	USE, No of Units = 1, Occup	ancy = 8, No of Storeys = 4	
Number of Rooms	Total Number of Roo	oms 9	
a) Sleeping 8	b) Living F	Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats	s: 1
Shared Amenities	Number Description	on	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	3		
Licence Details			
Licence Details			
Commencement date:	04/10/2016	Duration of licence:	03/07/2021
Maximum number of persor	is or households permitted	to occupy HMO under conditions of	of licence:
Households 8	Persons 8		
Information referred to a	residential property tribu	ınal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	l Works, HMO - Elec Mandato	ory conds, HMO - Fire Mandatory cond	

Additional Facilities, Electrical Works, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Kitchen 6, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Doors 2, HMO - Repairs Ventilation 3, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Structural Fire Works, Structural Fire works



#### Licence No.

#### 2016/03496/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

82 Upper Lewes Road Brighton BN2 3FF

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
Mr S Gould, Laurembergweg	7 22391 Hamburg Germar	ny	
Name & Address of Perso	on Managing		
Homelets (Brighton) Ltd, 47 No	orfolk Square Brighton BN	1 2PA	
Property Description			
Short description of license	d HMO (No of storeys, et	c)	
Property Type = SHARED HO	USE, No of Units = 5, Occ	cupancy = 5, No of Storeys = 3	
	_ , ,	_	
Number of Rooms	Total Number of F	Rooms 6	
a) Sleeping	b) Livir	ng Rooms	
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Flat	ts: 1
Shared Amenities	Number Descri	ption	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
Commencement date:	20/09/2017	Duration of licence:	20/06/2021
Commencement date:	30/08/2017	Duration of licence:	30/06/2021
Maximum number of person	s or households permitt	ed to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Information referred to a	residential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	cence		



### Licence No.

#### 2016/03512/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 21 Bristol Road Brighton BN2 1AP

Ward

Queen's Park

lame & Address of Licer	nce Holder		
	reham Road Hove BN3 6NR		
ame & Address of Pers	on Managing		
roperty Description			
hort description of license	ed HMO (No of storeys, etc)		
roperty Type = HMO Envelo	pe - Bedsits, No of Units = 10	, Occupancy = 10, No of Storeys = 4	
umber of Rooms	Total Number of Ro		
) Sleeping 10	b) Living	Rooms 10	
lumber of Self Contained F	lats: 0	Number of Non Self Cont. Flats:	0
hared Amenities	Number Descripti	on	
) Kitchen	10		
Bathrooms/Showers	3		
W.C.s	3		
icence Details			
ommencement date:	16/11/2016	Duration of licence:	14/06/2021
aximum number of persor	ns or households permitted	to occupy HMO under conditions of	licence:
	<b>-</b>		
ouseholds 10	Persons 10		
formation referred to a	residential property tribu	unal or Lands Tribunal:	
one	,		
ecision of Tribunal		Reference number	
	·		
ummary of conditions of li ire Alarm, HMO - Elec Mand		ket, HMO - Fire Doors 2, HMO - Fire M	andatory
onds, HMO - Furniture Mand		g Kitchen 2, HMO - Property Chges Ma	

conds, HMO - Property Maint Mandatory conds, HMO - Repairs Heating 5, HMO - Repairs Windows 6, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03517/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

12 Park Crescent Road Brighton BN2 3HT

Ward

St. Peter's And North Laine

Nama & Address of License Helder		
Name & Address of Licence Holder		
Mr Matthew Peace, 89 Lowther Road Brighton BN1 6LG		
No		
Name & Address of Person Managing		
,		
D		
Property Description		
Short description of licensed HMO (No of storeys, et		
Property Type = SHARED HOUSE, No of Units = 1, Occ	cupancy = 5, No of Storeys = 3	
Number of Rooms Total Number of	Rooms 5	
a) Sleeping b) Livir	ng Rooms	
Number of Self Contained Flats: 0	Number of Non Self Cont. Flats	: 0
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s	ption	
Licence Details		
Commencement date: 12/01/2017	Duration of licence:	28/06/2021
Maximum number of persons or households permitt	ed to occupy HMO under conditions o	f licence:
Households 5 Persons 5		
Information referred to a residential property tr	ibunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of license		

Summary of conditions of licence Elec cert, Gas, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO -Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03520/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

137 Upper Lewes Road Brighton BN2 3FD

Ward

St. Peter's And North Laine

Name & Address of Licenc	e Holder	
Mr Kenneth Bartlett, 63A Old Fo	rt Road Shoreham-By-Sea BN43 5RL	
Name & Address of Persor	Managing	
Mr Ian Wilkinson, T/a Wilkinson	s Estate Agents 24 Elm Grove Brighton BN2 3DD	
Property Description		
Short description of licensed	HMO (No of storeys, etc)	
Property Type = SHARED HOU	SE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping	b) Living Rooms	
Number of Self Contained Fla	ts: 0 Number of Non Self Cont. Fl	lats: 1
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s	Number Description  2 2	
Licence Details		
Commencement date:	04/12/2017 Duration of licence:	05/07/2021
Maximum number of persons	or households permitted to occupy HMO under condition	s of licence:
Households 5	Persons 5	
Information referred to a re	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lice		da LIMO. Caa



#### Licence No.

#### 2016/03533/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

60 Richmond Road Brighton BN2 3RN

Ward

St. Peter's And North Laine

Name & Address of Licence	Holder		
Mrs & Mr Linda & Steve Harmer-	Strange, T/a Grosvenor Properties Tuc	dor Grange 13 Upper Drive	Hove BN3
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Occupancy = 7, No	o of Storeys = 3	
Number of Rooms	Total Number of Rooms 7		
a) Sleeping	b) Living Rooms		
a) clooping	z) zivilig rteeme		
Normalism of Calf Campains of Flate	Numba	r of Non Self Cont. Flats:	4
Number of Self Contained Flats	S: 0 Number	r of Non Self Cont. Flats:	1
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description  1 3 3		
Licence Details			
Commencement date:	22/12/2016 <b>Dura</b> t	tion of licence:	03/07/2021
Maximum number of persons of	or households permitted to occupy h	HMO under conditions of I	icence:
-			
Households 7 P	ersons 7		
Information referred to a res	sidential property tribunal or Lan	ds Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licer		rnituro Mandatory condo. L	MO Coo



#### Licence No.

#### 2016/03534/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

103 Upper Lewes Road Brighton BN2 3FE

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
Mrs & Mr Linda & Steve Harme		rosvenor Properties Tudor Grange 13 Th	ne Upper Drive Hove
DVI3 ECD			
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	J HMO (No of sto	oreys, etc)	
Property Type = SHARED HO	USE, No of Units	= 5, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Nur	mber of Rooms 6	
	Total Null		
a) Sleeping		b) Living Rooms	
	,		
Number of Self Contained FI	ats:	0 Number of Non Self Co	ont. Flats: 1
Shared Amenities	Number	Description	
a) Kitchen	1	Description	
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	27/10/20	Duration of licence:	04/07/2021
Maximum number of person	s or households	permitted to occupy HMO under cond	ditions of licence:
Households 5	Persons	5	
Information referred to a I	residential <u>pro</u>	perty tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference nun	nber
Summary of conditions of lic	cence		



### Licence No.

#### 2016/03535/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 34 Roedale Road Brighton BN1 7GB

Ward

Hollingdean And Stanmer

Name & Address of Licence	e Holder		
Mrs Lola Bunbury-Davies, Twyr	House 5 Blatchington	Road Seaford BN5 9SL	
Name & Address of Persor	n Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys, e	etc)	
Property Type = SHARED HOU	SE, No of Units = 1, Oc	ccupancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of	f Rooms 11	
a) Sleeping 7	b) Liv	ring Rooms 1	
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Fla	ats: 1
Shared Amenities		ription	
a) Kitchen b) Bathrooms/Showers	2		
c) W.C.s	2		
0) 11.0.0			
Licence Details			
		7	
Commencement date:	31/10/2016	Duration of licence:	28/06/2021
Maximum number of persons	or households permit	tted to occupy HMO under conditions	s of licence:
		7	
Households 7	Persons 7		
Information referred to a re	oidential property	ribunal or Landa Tribunak	
	sidential property t	ribunal or Lands Tribunal:	
None		Deference must a	
Decision of Tribunal		Reference number	
Summary of conditions of lice HMO - Elec Mandatory conds, h		conds, HMO - Furniture Mandatory cond	ls, HMO - Gas

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03536/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

68 Hanover Terrace Brighton BN2 9SP

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder		
Mrs & Mr Linda & Steve Harme	er-Strange, T/a Grosvenc	or Properties Tudor Grange 13 The Uppo	er Drive Hove
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	I HMO (No of storeys, e	tc)	
Property Type = SHARED HOL	JSE. No of Units = 1. Oc	cupancy = 5, No of Storeys = 3	
	.,		
Number of Rooms	<b>Total Number of</b>	Rooms 6	
a) Sleeping	b) Livi	ng Rooms	
Number of Self Contained Fla	ats: 0	Number of Non Self Cont. Fla	its: 1
Shared Amenities	Number Descr	iption	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
0	07/00/0047	Donation of linear	05/07/0004
Commencement date:	07/03/2017	Duration of licence:	05/07/2021
Maximum number of persons	s or households permit	ted to occupy HMO under conditions	of licence:
		1	
Households 5	Persons 5		
Information reformed to		sibs l au l au da Tuibs l	
Information referred to a r	esidential property ti	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic	ence		



#### Licence No.

#### 2016/03541/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

93 Upper Lewes Road Brighton BN2 3FF

Ward

St. Peter's And North Laine

Name & Address of Licence Holder	
Mrs & Mr Linda & Steve Harmer-Strange, T/a Grosvenor Properties Tudor Grange 13 The Upper D	Orive Hove
טויס גריבט	
Name & Address of Person Managing	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 4	
Number of Rooms Total Number of Rooms 5	
a) Sleeping b) Living Rooms	
, , , , , , , , , , , , , , , , , , , ,	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats:	1
	· · · · · · · · · · · · · · · · · · ·
Shared Amenities Number Description	
a) Kitchen 1	
b) Bathrooms/Showers 1	
2	
Licence Details	
Commencement date: 22/12/2016 Duration of licence:	04/07/2021
Maximum number of persons or households permitted to occupy HMO under conditions of	licence:
Households 5 Persons 5	
nformation referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of licence	



### Licence No.

#### 2016/03544/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

4 Hollingbury Terrace Brighton BN1 7JE

Ward

Hollingdean And Stanmer

Property Description Short description of licensed HMO (No of storeys, etc) Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3  Number of Rooms	Information referred to a i	residential property tr		
Property Description Short description of licensed HMO (No of storeys, etc) Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3  Number of Rooms	Information referred to a <b>i</b>	residential property tr	ribunal or Lands Tribunal:	
Property Description Short description of licensed HMO (No of storeys, etc) Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3  Number of Rooms		racidantial musus outs to	sibunal ar Landa Tribunal	
Property Description Short description of licensed HMO (No of storeys, etc) Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3  Number of Rooms		Persons 6		
Property Description Short description of licensed HMO (No of storeys, etc) Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3  Number of Rooms Total Number of Rooms 11 a) Sleeping 6 b) Living Rooms 1  Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1  Shared Amenities Number 2 b) Bathrooms/Showers 2 c) W.C.s 2  Licence Details  Commencement date: 31/10/2016 Duration of licence: 28/06/2021	Maximum number of person		ted to occupy HMO under conditions o	of licence:
Property Description Short description of licensed HMO (No of storeys, etc) Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3  Number of Rooms				
Property Description  Short description of licensed HMO (No of storeys, etc)  Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3  Number of Rooms	Commencement date:	31/10/2016	Duration of licence:	28/06/2021
Property Description Short description of licensed HMO (No of storeys, etc) Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3  Number of Rooms	Licence Details			
Property Description Short description of licensed HMO (No of storeys, etc) Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3  Number of Rooms	c) W.C.s	2		
Property Description  Short description of licensed HMO (No of storeys, etc)  Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3  Number of Rooms  Total Number of Rooms  1  a) Sleeping  6  b) Living Rooms  1  Number of Self Contained Flats:  0  Number of Non Self Cont. Flats:  1  Shared Amenities  Number  Description	, t			
Property Description  Short description of licensed HMO (No of storeys, etc)  Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3  Number of Rooms	Ī		iption	
Property Description  Short description of licensed HMO (No of storeys, etc)  Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3  Number of Rooms	Number of Self Contained Fi	ats:	Number of Non Self Cont. Flats	S:
Property Description Short description of licensed HMO (No of storeys, etc)  Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3  Number of Rooms Total Number of Rooms 11	Number of Calf Contains 4.5	ete:	Number of New Calf Cart Flat	
Property Description  Short description of licensed HMO (No of storeys, etc)  Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3	a) Sleeping 6	b) Livi	ng Rooms 1	
Property Description Short description of licensed HMO (No of storeys, etc)	Number of Rooms	Total Number of	Rooms 11	
Property Description Short description of licensed HMO (No of storeys, etc)	Property Type = SHARED HO	USE, No of Units = 1, Occ	cupancy = 6, No of Storeys = 3	
Property Description	•	•	•	
,		LIMO (No of otomore	4-1	
,	D ( D			
Hame & Address of Ferson Managing	,			
Name & Address of Person Managing	Name & Address of Perso	n Managing		
	· · · · · ·			
Ms Lola Bunbury-Davies, Twyn House 5 Blatchington Road Seaford BN25 2AB	Ms Lola Bunbury-Davies, Twy	n House 5 Blatchington R	load Seaford BN25 2AB	
Name & Address of Licence Holder		ce Holder		



#### Licence No.

#### 2016/03547/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

101 Hanover Terrace Brighton BN2 9SP

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder		
Linda & Steve Harmer-Strange	e, T/a Grosvenor Properties	Tudor Grange 13 The Upper Drive H	ove BN3 6GR
N 0411 CD			
Name & Address of Person	n Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, etc)		
Property Type = SHARED HO	USE, No of Units = 1, Occu	pancy = 5, No of Storeys = 3	
Number of Decree	Total Number of De		
Number of Rooms	Total Number of Ro		
a) Sleeping	b) Living	Rooms	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ts: 0
Number of Sen Contained in	ats.	Number of Non Sen Cont. 1 id	ιs. υ
Shared Amenities	Number Descript	ion	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	14/11/2016	Duration of licence:	04/07/2021
Maximum number of person	s or households permitted	d to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Information referred to a	residential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie	cence		



#### Licence No.

#### 2016/03549/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

253 Queens Park Road Brighton BN2 9XJ

Ward

Hanover And Elm Grove

Name & Address of Licence	Holder		
Mr S D M Kahan (Power Of Atto	ney For Mr Elliott J Ka	han), The Glade Green Lane Stanmore M	liddlesex HA7
Name & Address of Person	Managing		
QLets Ltd, T/a Q Estate Agents I	Maytree House Meres	Lane Heathfield TN21 0TE	
Property Description			
Short description of licensed l	IMO (No of storeys, e	etc)	
Property Type = SHARED HOUS	SE, No of Units = 1, Oc	cupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 6	
a) Sleeping	b) Livi	ing Rooms	
Number of Self Contained Flat	s: 0	Number of Non Self Cont. Flats	:1
Charad Amonitics	Number Dece	indian	
Shared Amenities a) Kitchen	Number Descr	iption	
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	19/01/2017	Duration of licence:	08/06/2021
Commencement date.	19/01/2017	Duration of ficence.	06/06/2021
Maximum number of persons	or households permit	ted to occupy HMO under conditions o	f licence:
Households 5 F	Persons 5		
	0.00110	J	
Information referred to a re-	sidential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice	nce		



#### Licence No.

#### 2016/03553/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

7 Gladstone Place Brighton BN2 3QE

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder	
Mrs & Mr Linda & Steve Harme	er-Strange, T/a Grosvenor Properties Tudor Grange 13 The Up	per Drive Hove
Name & Address of Perso	n Managing	
,		
Property Description		
Short description of licensed	d HMO (No of storeys, etc)	
Property Type = SHARED HO	USE, No of Units = 1, Occupancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 8	
a) Sleeping 7	b) Living Rooms 1	
Number of Self Contained Fl	ats: 0 Number of Non Self Cont. F	lats: 1
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	3	
c) W.C.s	3	
Licence Details		
Commencement date:	14/09/2016 Duration of licence:	02/07/2021
Maximum number of persons	s or households permitted to occupy HMO under condition	ns of licence:
Households 7	Persons 7	
Information referred to a r	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lic		nds HMO Gas



#### Licence No.

#### 2016/03556/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

4 Madeira Place Brighton BN2 1TN

Ward

Queen's Park

N. 0.4.1.			
Name & Address of Licen			
Mr Nick Pastounas, 98 New C	hurch Road Hove BN3 4JA	1	
Name & Address of Person	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, etc	<del>:</del> )	
Property Type = SHARED HO	USE, No of Units = 3, Occu	upancy = 7, No of Storeys = 4	
Number of Rooms	Total Number of R	ooms 13	
a) Sleeping	b) Living	g Rooms	
			Γ
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number Descrip	tion	
a) Kitchen	3		
b) Bathrooms/Showers c) W.C.s	4		
c) w.o.s	<b>T</b>		
Licence Details			
Commencement date:	24/08/2016	Duration of licence:	22/06/2021
Maximum number of nerson	es or households nermitte	ed to occupy HMO under conditions	of licence:
		a to occupy time under conditions	of ficefice.
Households 0	Persons 7		
Information referred to a	residential property tril	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
0			

Summary of conditions of licence



#### Licence No.

#### 2016/03577/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

219 Hartington Road Brighton BN2 3PA

Ward

Hanover And Elm Grove

Name & Address of Licence	Holder	
	e Gate Gardens London NW1 6AR	
Name & Address of Person	Managing	
Ms Jo-Ann Stafford, 127 Lewes I	Road Brighton Sussex BN2 3LG	
Property Description		
Short description of licensed H	IMO (No of storeys, etc)	
Property Type = SHARED HOUS	SE, No of Units = 6, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping	b) Living Rooms	
-,, -, -, -, -, -, -, -, -, -, -,	<b>3</b> • • • • • • • • • • • • • • • • • • •	
Number of Self Contained Flat	s: 0 Number of Non Self Cont. Flats	s: 1
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Commencement date:	20/01/2017 Duration of licence:	29/06/2021
Maximum number of persons	or households permitted to occupy HMO under conditions o	of licence:
Households 6 F	Persons 6	
nousellolus 0 F	ersons 0	
Information referred to a res	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lice	200	



### Licence No.

#### 2016/03579/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

48 St Georges Road Brighton BN2 1EF

Ward

**East Brighton** 

		9.1.011
Name & Address of Licence	Holder	
Mr Keith Davis, 91 Norwich Road	d Wroxham NR12 8RX	
Name & Address of Person	Managing	
Yes Lets Ltd, 67 Church Road H	ove BN3 2BD	
Property Description		
Short description of licensed I	IMO (No of storeys, etc)	
Property Type = SHARED HOUS	SE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Newskay of Danie	Total North on of Doorse	
Number of Rooms	Total Number of Rooms 9	
a) Sleeping 6	b) Living Rooms 1	
Number of Self Contained Flat	S: Number of Non Self Cont. Flats:	1
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s	Number Description  2 1 2	
Licence Details		
Commencement date:	24/11/2016 Duration of licence:	14/06/2021
Maximum number of persons	or households permitted to occupy HMO under conditions of I	licence:
Households 6	Persons 6	
Information referred to a re	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lice HMO - Elec Mandatory conds, H	nce MO - Fire Mandatory conds, HMO - Furniture Mandatory conds, H	MO - Gas



#### Licence No.

#### 2016/03614/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

70 Springfield Road Brighton BN1 6DE

Ward

Preston Park

Name & Address of Licence Holder	
Mr Nick Todaro, 63 New Church Road Hove BN3 4BA	
Name & Address of Person Managing	
Mr Anthony Uden, T/a Uden Estate Agents 88 Dyke Road Brighton East Sussex Bl	N1 3JD
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 7, No of Storeys	= 3
Number of Rooms Total Number of Rooms 8	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Se	elf Cont. Flats: 0
Shared Amenities  Number  Description  1 b) Bathrooms/Showers 2 c) W.C.s  Description	
Licence Details	
Commencement date: 26/09/2016 Duration of lice	nce: 26/06/2021
Maximum number of persons or households permitted to occupy HMO under	conditions of licence:
Households 7 Persons 7	
Information referred to a residential property tribunal or Lands Tribun	al:
None	
Decision of Tribunal Reference	number
Summary of conditions of licence	datany aanda LIMO Coo



#### Licence No.

#### 2016/03617/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

23 Shanklin Road Brighton BN2 3LP

Ward

Hanover And Elm Grove

Name & Address of Licence Holder	
Mrs Fiona Glare, 23 Cissbury Crescent Saltdean BN2 8PN	
Name & Address of Person Managing	
Kendrick Property Services Ltd, Carlton House 28-29 Carlton Terrace Brighton BN41 1U	R
December December Com	
Property Description  Short description of line and LIMO (No of storage atc)	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms Total Number of Rooms 6	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cor	nt. Flats: 0
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers c) W.C.s	
C) VV.C.S	
Licence Details	
Licence Details	
	02/07/2021
Licence Details	
Licence Details  Commencement date: 19/01/2017 Duration of licence:  Maximum number of persons or households permitted to occupy HMO under cond	
Licence Details  Commencement date: 19/01/2017 Duration of licence:	
Licence Details  Commencement date: 19/01/2017 Duration of licence:  Maximum number of persons or households permitted to occupy HMO under cond	
Licence Details  Commencement date: 19/01/2017 Duration of licence:  Maximum number of persons or households permitted to occupy HMO under conditional data and the conditi	
Licence Details  Commencement date: 19/01/2017 Duration of licence:  Maximum number of persons or households permitted to occupy HMO under conditional to the second secon	itions of licence:



#### Licence No.

#### 2016/03627/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

16 Coleman Street Brighton BN2 9SQ

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder		
Ms F Glare, 23 Cissbury Creso			
ivis i Giarc, 25 Gissbury Grest	Cent Cattacan Dive of IV		
Name & Address of Perso	on Managing		
		Carlton Terrace Brighton BN41 1UR	
Property Description			
Short description of licensed	d HMO (No of storeys, e	etc)	
Property Type = SHARED HO	USE, No of Units = 1, Oc	ccupancy = 5, No of Storeys = 3	
. , , , ,			
Number of Rooms	Total Number of	Rooms 6	
a) Sleeping	b) Liv	ing Rooms	
Number of Self Contained FI	ats: 0	Number of Non Self Cont. Flat	s: 1
Shared Amenities	Number Desci	ription	
Shared Amenities a) Kitchen	Number Descri	ription	
Ī		ription	
a) Kitchen	1	ription	
a) Kitchen b) Bathrooms/Showers c) W.C.s	1 1	ription	
a) Kitchen b) Bathrooms/Showers	1 1	ription	
a) Kitchen b) Bathrooms/Showers c) W.C.s	1 1	Duration of licence:	02/07/2021
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:	19/01/2017	Duration of licence:	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:	19/01/2017	1	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:	19/01/2017	Duration of licence:	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of person	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Duration of licence:	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of person  Households 5	1 1 1 1 1 19/01/2017  s or households permit  Persons 5	Duration of licence:	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of person  Households 5	1 1 1 1 1 19/01/2017  s or households permit  Persons 5	Duration of licence: tted to occupy HMO under conditions o	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of person  Households  5  Information referred to a referred t	1 1 1 1 1 19/01/2017  s or households permit  Persons 5	Duration of licence: tted to occupy HMO under conditions o	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - General 1, HMO - General 6, HMO - General Electrical 1, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, IS, Self Closers, Sockets, Ventilation



### Licence No.

#### 2016/03628/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

19 Bloomsbury Place Brighton BN2 1DB

Ward

East Brighton

Name & Address of Licen	ce Holder			
Mr Geoff Burgess, Otters Holt	The Cotswolds Sou	uthwick BN4	2 4GH	
Name & Address of Perso	on Managing			
S J Lettings Ltd, 52 Lewes Ro	ad Brighton BN2 3F	HW		
Property Description				
Short description of licensed	d HMO (No of stor	reys, etc)		
Property Type = SHARED HO	USE, No of Units =	1, Occupan	cy = 6, No of Storeys = 4	
Number of Rooms	Total Numb	ber of Room	ns 7	
a) Sleeping 6		b) Living Ro	oms 1	
Number of Self Contained Fl	ats:	0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number	Description		
a) Kitchen	2			
b) Bathrooms/Showers	2			
c) W.C.s	2			
Licence Details				
Commencement date:	09/09/2016	6	Duration of licence:	02/07/2021
Maximum number of nersen	a ar bauaabalda n	n a rmitta d ta	accurat LIMO under conditions of	iconco
Maximum number of person	s or nousenoius p	permitted to	occupy HMO under conditions of I	icerice.
Households 6	Persons	6		
Information referred to a	residential prope	erty tribun	al or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of lie				
	•		larm Systems 7, HMO - Fire Mandaton nds, HMO - Licensing Kitchen 6, HMO	•
	,		,	

Electrical Works, HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 7, HMO - Fire Mandatory conds HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Kitchen 6, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Bathroom 17, HMO - Repairs Ventilation 2, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Structural Fire works



#### Licence No.

#### 2016/03631/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

8 Lorna Road Hove BN3 3EN

Ward

Goldsmid

		Train G	aoa
Name & Address of Lice	nce Holder		
Mr Matthew Sorokin, Geneva	House 77A Rutland Road H	ove BN3 5FE	
Name & Address of Pers	on Managing		
Geneva Investment Group Lt	d, 77A Rutland Road Hove E	ast Sussex BN3 5FE	
Property Description			
Short description of license	ed HMO (No of storeys, etc)	)	
Property Type = BEDSIT, No	of Units = 5, Occupancy = 7,	, No of Storeys = 3	
Number of Rooms	Total Number of Ro	ooms 5	
a) Sleeping 7	b) Living	Rooms	
November of Oalf Oantain add	-1-4	Number of New Oals Coast Flats	
Number of Self Contained I	Flats: 0	Number of Non Self Cont. Flats	s: <u> </u>
Shared Amenities	Number Descript	tion	
a) Kitchen	7		
b) Bathrooms/Showers	4		
c) W.C.s	4		
Licence Details			
Commencement date:	15/09/2016	Duration of licence:	08/08/2021
Commencement date.	13/09/2010	Duration of ficerice.	00/00/2021
Maximum number of perso	ns or households permitted	d to occupy HMO under conditions o	of licence:
Haveabalda 7	D 7		
Households 7	Persons 7		
Information referred to a	residential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	· · · · · · · · · · · · · · · · · · ·		
Summary of conditions of I		7 HMO - Fire Mandatory conds. HMO	) - Furniture



### Licence No.

#### 2016/03635/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 30 Hollingdean Terrace Brighton BN1 7HA

Ward

Hollingdean And Stanmer

Name & Address of Licer			
Mr David Neill, Michelham Ga	te Michelham Priory Roa	ad Upper Dicker BN27 3QR	
Name & Address of Perso	on Managing		
G4 Lets, 2 Hythe Road Bright	on BN1 6JS		
Duamanti Daganintian			
Property Description  Short description of license	d HMO (No of storeys	etc)	
-		Occupancy = 6, No of Storeys = 4	
-Toperty Type - SHARED HC	OSE, NO OI OIIIS – 1, C	occupancy – 6, No or Storeys – 4	
Number of Rooms	Total Number o	of Rooms 6	
a) Sleeping 6	b) Li	ving Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats:	0
Shared Amenities	Number Desc	cription	
a) Kitchen	2		
b) Bathrooms/Showers b) W.C.s	2		
J) VV.C.S			
Licence Details			
Commencement date:	17/01/2017	Duration of licence:	02/07/2021
	L		
Maximum number of person	s or households perm	itted to occupy HMO under conditions of I	icence:
Households 6	Persons 6		
	residential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	, HMO - Fire Mandatory	conds, HMO - Furniture Mandatory conds, HI	

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03661/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

5A Hove Park Villas Hove BN3 6HP

Ward

Goldsmid

Name & Address of Licence			
Mr John Speight, C/o 47 Norfolk	Square Brighton BN1	2PA	
Name & Address of Person	Managing		
Homelets, 47 Norfolk Square Brig	<u> </u>	1 2PA	
Property Description			
Short description of licensed H	MO (No of storeys, e	etc)	
Property Type = BEDSIT, No of U	Jnits = 6, Occupancy =	= 6, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 6	
a) Sleeping	b) Liv	ing Rooms	
-,pg	3, =		
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Flats	: 0
Shared Amenities	Number Descr	ription	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	11/11/2016	Duration of licence:	03/07/2021
Commencement date.	11/11/2010	Buration of licence.	03/01/2021
Maximum number of persons of	r households permit	tted to occupy HMO under conditions of	licence:
Households 6 P	ersons 6		
		-	
Information referred to a res	idential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licer	ice		



#### Licence No.

#### 2016/03665/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

11 Clyde Road Brighton BN1 4NN

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder	
Mr & Mrs Linda & Steve Harm	er-Strange, Grosvenor Properties Tudor Grange 13 The Upper D	rive Hove BN3
Name & Address of Perso	on Managing	
,		
Property Description		
Short description of license	d HMO (No of storeys, etc)	
Property Type = SHARED HO	USE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 5	b) Living Rooms 1	
Number of Self Contained F	lats: 0 Number of Non Self Cont. Fla	ts: 1
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description  1 1 2	
Licence Details		
Commencement date:	14/09/2016 Duration of licence:	02/07/2021
Maximum number of person	s or households permitted to occupy HMO under conditions	of licence:
Households 5	Persons 5	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of li	cence	



### Licence No.

#### 2016/03667/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

64 Hollingdean Terrace Brighton BN1 7HA

Ward

Hollingdean And Stanmer

Name & Address of Licenc	e Holder		
Mr Michael Boulter, 173 Clarend	ce Gate Gardens Londo	on NW1 6AR	
Name & Address of Persor	Managing		
Ms Jo-Ann Stafford, 127 Lewes	Road Brighton East Su	issex BN2 3LG	
Property Description			
Short description of licensed	HMO (No of storeys, e	etc)	
Property Type = SHARED HOU	SF. No of Units = 7. Oc	ccupancy = 7. No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 8	
a) Sleeping	b) Liv	ing Rooms	
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Flat	s: 1
Shared Amenities	Number Descr	ription	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Communication data.	24/40/2046	Demotion of linears	40/00/0004
Commencement date:	24/10/2016	Duration of licence:	18/06/2021
Maximum number of persons	or households permit	tted to occupy HMO under conditions	of licence:
		7	
Households 7	Persons 7		
Information referred to a re	sidential property t	ribunal or Lands Tribunal:	
None	Sideriliai property t	Hibuliai Of Latius Hibuliai.	
None Decision of Tribunal		Poforonce number	
Decision of Fridunal		Reference number	
Summary of conditions of lice	ence		



#### Licence No.

#### 2016/03670/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

91 Hythe Road Brighton BN1 6JR

Ward

Preston Park

Name & Address of Licence Holder
Mr Yoshiko Williams, 27 Southdown Avenue Brighton BN1 6EH
Name & Address of Person Managing
G4 Lets, 2 Hythe Road Brighton BN1 6JS
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3
Number of Rooms Total Number of Rooms 6
a) Sleeping b) Living Rooms
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
Charad Amenities Number Description
Shared Amenities Number Description
a) Kitchen
a) Kitchen b) Bathrooms/Showers
a) Kitchen
a) Kitchen b) Bathrooms/Showers
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details
a) Kitchen b) Bathrooms/Showers c) W.C.s
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 16/12/2016 Duration of licence: 28/06/2021  Maximum number of persons or households permitted to occupy HMO under conditions of licence:
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 16/12/2016 Duration of licence: 28/06/2021
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 16/12/2016 Duration of licence: 28/06/2021  Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households 6 Persons 6
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 16/12/2016 Duration of licence: 28/06/2021  Maximum number of persons or households permitted to occupy HMO under conditions of licence:
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date: 16/12/2016 Duration of licence: 28/06/2021  Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households 6 Persons 6  Information referred to a residential property tribunal or Lands Tribunal:



#### Licence No.

#### 2016/03671/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

35 Sutherland Road Brighton BN2 0EQ

Ward

Queen's Park

Name & Address of Licence	e Holder	
	Laura Francis, Pen Y Draith Broughton Cowbridge CF71 7QR	
Name & Address of Person	Managing	
G4 Lets, 2 Hythe Road Brighton	BN1 6JS	
Property Description		
Short description of licensed H	HMO (No of storeys, etc)	
Property Type = SHARED HOUS	SE, No of Units = 1, Occupancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 12	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flat	s: 0 Number of Non Self Cont. Flats	: 0
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s	Number Description	
Licence Details		
Commencement date:	15/03/2017 Duration of licence:	28/06/2021
Maximum number of newscape		f lineman.
maximum number of persons (	or households permitted to occupy HMO under conditions o	r licence:
Households 7 F	Persons 7	
Information referred to a res	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lice	nce	



#### Licence No.

#### 2016/03672/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

41 Jersey Street Brighton BN2 9NU

Ward

Hanover And Elm Grove

Name & Address of Lice			
Linda & Steve Harmer-strang	je, Tudor Grange 13 The U	Jpper Drive Hove BN3 6GR	
Name & Address of Pers	on Managing		
,			
Branarty Description			
Property Description Short description of licens	ad HMO (No of storous, a	ate)	
-	•	•	
Property Type = SHARED H	JUSE, No of Units = 1, Oc	ccupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 5	
a) Sleeping	b) Livi	ing Rooms	
-,	-,	<u> </u>	
Number of Self Contained	Flats: 0	Number of Non Self Cont. F	lats: 0
rambor of con contained	0	Number of Non contains	0
Shared Amenities	Number Descr	ription	
a) Kitchen	1		
b) Bathrooms/Showers	3		
c) W.C.s	2		
L'anna Batalla			
Licence Details			
Commencement date:	22/12/2016	Duration of licence:	02/07/2021
		I	
Maximum number of perso	ns or households permit	tted to occupy HMO under condition	s of licence:
Households 5	Persons 5		
Information referred to a	residential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of	licence		
		onds, HMO - Furniture Mandatory con	ds, HMO - Gas



#### Licence No.

#### 2016/03674/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

63 Bernard Road Brighton BN2 3ER

Ward

Hanover And Elm Grove

Novo O Addusos of Live	noo Holdov		
Name & Address of Lice		arith Danishton On Little OF71 700	
Mark Garvey, Charlotte Garre	ett & Laura Francis, Pen Y Di	raith Broughton Cowbridge CF71 7QR	
Nama <sup>9</sup> Address of Bara	on Managing		
Name & Address of Pers			
G4 Lets, 2 Hythe Road Brigh	ION BN1 6JS		
Property Description			
Short description of license	ad HMO (No of storous, atc	<b>.</b>	
-			
Property Type = SHARED H	JUSE, No of Units = 1, Occu	pancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of R	ooms 7	
a) Sleeping	b) Living	Rooms	
ـــــــــــــــــــــــــــــــــــــ	۵, =۰۰۰۰۱۶		
Number of Self Contained I	Flats: 0	Number of Non Self Cont. Flat	<b>s</b> : 9
Number of Self Contained i	iats.	Number of Non Sen Cont. Flat	s. 9
Shared Amenities	Number Descrip	tion	
a) Kitchen	Number Descrip		
b) Bathrooms/Showers			
c) W.C.s			
,			
Licence Details			
Commencement date:	21/11/2016	Duration of licence:	28/06/2021
Maximum number of nerso	ns or households nermitte	d to occupy HMO under conditions	of licence
		a to occupy time under conditions	or necifice.
Households 7	Persons 7		
Information referred to a	residential property trib	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence



#### Licence No.

#### 2016/03675/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

67 Bernard Road Brighton BN2 3ER

Ward

Hanover And Elm Grove

Name & Address of Licence	Holder		
Mark Garvey, Charlotte Garrett L	aura Francis, Pen Y Draith	Broughton Cowbridge CF71 7QR	
Name & Address of Person I	<b>Managing</b>		
G4 Lets, 2 Hythe Road Brighton E	BN1 6JS		
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUSI	E, No of Units = 1, Occupar	ncy = 7, No of Storeys = 3	
		_	
Number of Rooms	Total Number of Roor	ns 7	
a) Sleeping	b) Living Ro	ooms	
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flats	: 0
Shared Amenities N	lumber Description	ı	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Licence Details			
Commencement date:	21/11/2016	Duration of licence:	28/06/2021
Maximum number of persons of	r households permitted to	o occupy HMO under conditions o	f licence:
maximum number of persons of	i nousenoius perinitteu tt	occupy mino under conditions o	i iiceilce.
Households 7 Pe	ersons 7		
			_
Information referred to a res	idential property tribun	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licen			

Summary of conditions of licence



#### Licence No.

#### 2016/03676/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

10 Broad Street Brighton BN2 1TJ

Ward

Queen's Park

		774.4	Quoon	5 : G. K.
Name & Address of Liceno				
Mr Matthew Sorokin, Geneva F	louse 77A Rutland Roa	d Hove BN3 5FE		
Name & Address of Perso	n Managing			
Wendy Thomas, Geneva Hous	e 77A Rutland Road Ho	ve East Sussex BN	N3 5FE	
Property Description				
Short description of licensed	HMO (No of storeys,	etc)		
Property Type = BEDSIT, No o	f Units = 7, Occupancy	= 10, No of Storeys	s = 5	
Number of Rooms	Total Number o	f Rooms 7		
a) Sleeping <b>7</b>	b) Li	ing Rooms	7	
Number of Self Contained Fla	ats: 0	Number o	of Non Self Cont. Flats:	1
				-
Shared Amenities	Number Desc	ription		
a) Kitchen	9			
b) Bathrooms/Showers	3			
c) W.C.s	3			
Licence Details				
•	00/00/0040	]		00/07/0004
Commencement date:	06/09/2016	Duratio	on of licence:	03/07/2021
Maximum number of persons	or households perm	tted to occupy HM	MO under conditions of	licence:
		7		
Households 10	Persons 10			
	! . ! ! . !		. Tallering	
Information referred to a r	esidential property	ribunal or Land	s Tribunal:	
None				
Decision of Tribunal		R	Reference number	
Summary of conditions of lic				
HMO - Elec Mandatory conds,	HMO - Fire Doors 8, HI	IO - Fire Mandator	y conds, HMO - Furniture	е

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03678/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

11 Burlington Street Brighton BN2 1AU

Ward

Queen's Park

N 0 A 1 1 C 1 1			
Name & Address of Licence			
Geneva Investment Group Ltd,	Geneva House 77A Por	rtland Road Hove BN3 5FE	
N OALL CD			
Name & Address of Person			
Ms Wendy Thomas, 77A Rutlar	nd Road Hove East Sus	sex BN3 5FE	
Duamanti: Danavintian			
Property Description	HMO (No of storous s	40)	
Short description of licensed	-	•	
Property Type = BEDSIT, No of	Units = 7, Occupancy =	= 12, No of Storeys = 5	
Number of Rooms	Total Number of	Rooms 7	
a) Sleeping 7	h) Liv	ing Rooms 7	
	<i>□</i> , <u>−</u>		
Number of Self Contained Fla	nts: 0	Number of Non Self Cont. Flat	s: 1
Number of Self Contained Fig	its. 0	Number of Non Sen Cont. Flat	5.
Shared Amenities	Number Descr	ription	
a) Kitchen	10	ipuon	
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	03/10/2016	Duration of licence:	18/07/2021
Commencement date:	03/10/2016	Duration of licence:	10/07/2021
Maximum number of persons	or households permit	ted to occupy HMO under conditions	of licence:
Households 12	Poro ano 12	]	
Households 12	Persons 12		
Information referred to a re	esidential prop <u>erty t</u>	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic	onco		
Juninary of Conditions of IIC		anda IIMO Francistana Mandatana anda	LIMO



#### Licence No.

#### 2016/03682/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

20 Trinity Street Brighton BN2 3HN

Ward

St. Peter's And North Laine

Name & Address of Licer	ce Holder	
Nicholas Alzbeta Johnson, Vi	per's Wharf Railway Lane Lewes BN7 2AQ	
Name & Address of Perso	on Managing	
Q Estate Agents Ltd, Maytree	House Meres Lane Heathfield TN21 0TZ	
Property Description		
Short description of license	d HMO (No of storeys, etc)	
Property Type = SHARED HC	USE, No of Units = 1, Occupancy = 6, No of Storeys = 4	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping 6	b) Living Rooms 1	
Number of Self Contained F	lats: 0 Number of Non Self Cont. Fi	ats: 0
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	2	
c) W.C.s	3	
Licence Details		
Commencement date:	07/11/2016 <b>Duration of licence</b> :	28/06/2021
Maximum number of person	s or households permitted to occupy HMO under condition	s of licence:
Households 6	Persons 6	
Information referred to a	residential property tribunal or Lands Tribunal:	
None	robidonital property tribulial of Editas Tribulial.	
Decision of Tribunal	Reference number	
Summary of conditions of li	<b>cence</b> , HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Furn	



#### Licence No.

#### 2016/03685/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

22 Islingword Street Brighton BN2 9UR

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder		
Linda & Steve Harmer-Strange	e, 13 The Upper Drive Hove	BN3 3JE	
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, etc)		
Property Type = SHARED HO	USE, No of Units = 1, Occup	pancy = 5, No of Storeys = 4	
Number of Dooms	Total Number of De	nome 6	
Number of Rooms	Total Number of Ro		
a) Sleeping	b) Living	Rooms	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ats: 1
Shared Amenities	Number Descript	ion	
a) Kitchen	1		
b) Bathrooms/Showers	2 2		
c) W.C.s			
Licence Details			
Commencement date:	15/12/2016	Duration of licence:	02/07/2021
Maximum number of person	s or households permitted	I to occupy HMO under conditions	s of licence:
Households 5	Persons 5		
Information referred to a	residential <u>property trib</u>	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li		de LIMO. Francistano Mandatana ancia	Is LIMO. Oss



#### Licence No.

#### 2016/03686/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

73 Bernard Road Brighton BN2 3ER

Ward

Hanover And Elm Grove

Summary of conditions of licence



#### Licence No.

#### 2016/03689/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

18 Hampden Road Brighton BN2 9TN

Ward

Hanover And Elm Grove

Name & Address of Licence		
Milovan & Alzbeta Johnson, Fla	t 2 Vipers Wharf Railway Lane Lewes BN7 2AQ	
Name & Address of Person		
Q Estate Agents Ltd, Maytree H	louse Meres Lane Heathfield TN21 0TZ	
Property Description		
Short description of licensed	HMO (No of storeys, etc)	
Property Type = SHARED HOU	ISE, No of Units = 1, Occupancy = 7, No of Storeys = 4	
Number of Rooms	Total Number of Rooms 8	
a) Sleeping 7	b) Living Rooms 1	
Number of Self Contained Fla	ts: 0 Number of Non Self Cont. Flats:	0
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers c) W.C.s	2	
c) vv.o.3		
Licence Details		
<b>2</b>	10/44/0040 P - 41 - 41 - 41 - 41 - 41 - 41 - 41 -	00/00/0004
Commencement date:	10/11/2016 Duration of licence:	28/06/2021
Maximum number of persons	or households permitted to occupy HMO under conditions of	licence:
Households 7	Persons 7	
Information referred to a re	esidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lice HMO - Elec Mandatory conds, I	e <b>nce</b> HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, H	MO - Gas



#### Licence No.

#### 2016/03692/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 75 Vere Road Brighton BN1 4NQ

Ward

St. Peter's And North Laine

Ar Victor Ellis & Mrs Margaret Grimsdell, 93 Springfield Road Brighton BN1 6DH  Name & Address of Person Managing  34 Lets, 2 Hythe Road Brighton BN1 6JS  Property Description Short description of licensed HMO (No of storeys, etc)  Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 7, No of Storeys = 4  Number of Rooms  Total Number of Rooms  1) Sleeping  Total Number of Rooms  1) Living Rooms  Number of Self Contained Flats:  0  Number of Non Self Cont. Flats:  0  Number of Non Self Cont. Flats:  0  Shared Amenities  Number  2  3) Bathrooms/Showers  3  5) W.C.s  5  Duration of licence:  28/06/2021  Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households  7  Persons  7  Information referred to a residential property tribunal or Lands Tribunal:  None  Decision of Tribunal  Reference number	Name & Address of Licer	rce Holder		
Name & Address of Person Managing 34 Lets, 2 Hythe Road Brighton BN1 6JS  Property Description Short description of licensed HMO (No of storeys, etc) Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 7, No of Storeys = 4  Number of Rooms Total Number of Rooms 9 b) Living Rooms  Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0 Shared Amenities 10 Kitchen 2 10 Bathrooms/Showers 20 W.C.s 5  Licence Details  Commencement date: 19/06/2017 Duration of licence: 28/06/2021  Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households 7 Persons 7  Information referred to a residential property tribunal or Lands Tribunal: None Decision of Tribunal Reference number			eld Road Brighton BN1 6DH	
Property Description Short description of licensed HMO (No of storeys, etc) Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 7, No of Storeys = 4  Number of Rooms Total Number of Rooms 9 (a) Sleeping 7 b) Living Rooms  Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0  Shared Amenities Number 2 (b) Bathrooms/Showers 3 (c) W.C.s 5  Licence Details  Commencement date: 19/06/2017 Duration of licence: 28/06/2021  Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households 7 Persons 7  Information referred to a residential property tribunal or Lands Tribunal: None Decision of Tribunal Reference number			<b>3</b>	
Property Description Short description of licensed HMO (No of storeys, etc) Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 7, No of Storeys = 4  Number of Rooms	Name & Address of Perso	n Managing		
Short description of licensed HMO (No of storeys, etc) Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 7, No of Storeys = 4  Number of Rooms  Total Number of Rooms  Shumber of Self Contained Flats:  0 Number of Non Self Cont. Flats:  0 Number of Non Self Cont. Flats:  0 Description  Shared Amenities Number Description  Shared Amenities Number Description  Shared Amenities Number Description  Description  Description  Avainable of Persons or households permitted to occupy HMO under conditions of licence:  Households  Persons  Persons  Reference number  Reference number	G4 Lets, 2 Hythe Road Bright	on BN1 6JS		
Short description of licensed HMO (No of storeys, etc) Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 7, No of Storeys = 4  Number of Rooms  Total Number of Rooms  Shumber of Self Contained Flats:  0 Number of Non Self Cont. Flats:  0 Number of Non Self Cont. Flats:  0 Description  Shared Amenities Number Description  Shared Amenities Number Description  Shared Amenities Number Description  Description  Description  Avainable of Persons or households permitted to occupy HMO under conditions of licence:  Households  Persons  Persons  Reference number  Reference number				
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 7, No of Storeys = 4  Number of Rooms	Property Description			
Number of Rooms 7 b) Living Rooms  Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0  Shared Amenities Number Description  (A) Kitchen 2 (A) Bathrooms/Showers 3 (A) W.C.s 5  Commencement date: 19/06/2017 Duration of licence: 28/06/2021  Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households 7 Persons 7  Information referred to a residential property tribunal or Lands Tribunal:  None Decision of Tribunal Reference number	Short description of license	d HMO (No of storeys	s, etc)	
Number of Self Contained Flats:    Number of Self Contained Flats:   0	Property Type = SHARED HC	USE, No of Units = 1, 0	Occupancy = 7, No of Storeys = 4	
Number of Self Contained Flats:    O	Number of Rooms	Total Number	of Rooms 9	
Number of Self Contained Flats:    Number   Description	a) Sleeping 7	b) L	Living Rooms	
Shared Amenities  Number Description  Nikitchen  Description  Number Description  Number Description  Description  Number Description  Description  Description  Description  Description  Number Description  Descri	,	,	<u> </u>	
A) Kitchen  2) Bathrooms/Showers  3) W.C.s  Commencement date:  19/06/2017  Duration of licence:  28/06/2021  Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households  7  Persons  7  Information referred to a residential property tribunal or Lands Tribunal:  None  Decision of Tribunal  Reference number	Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ts: 0
A) Kitchen  2) Bathrooms/Showers  3) W.C.s  Commencement date:  19/06/2017  Duration of licence:  28/06/2021  Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households  7  Persons  7  Information referred to a residential property tribunal or Lands Tribunal:  None  Decision of Tribunal  Reference number				
Display Bathrooms/Showers  W.C.s  Duration of licence: 28/06/2021  Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households  Persons  Persons  Reference number  Reference number	Shared Amenities	Number Des	scription	
Commencement date: 19/06/2017 Duration of licence: 28/06/2021  Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households 7 Persons 7  Information referred to a residential property tribunal or Lands Tribunal:  None Decision of Tribunal Reference number	a) Kitchen	2		
Commencement date: 19/06/2017 Duration of licence: 28/06/2021  Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households 7 Persons 7  Information referred to a residential property tribunal or Lands Tribunal:  None Decision of Tribunal Reference number				
Commencement date: 19/06/2017 Duration of licence: 28/06/2021  Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households 7 Persons 7  Information referred to a residential property tribunal or Lands Tribunal:  None Decision of Tribunal Reference number	c) W.C.s	5		
Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households 7 Persons 7  Information referred to a residential property tribunal or Lands Tribunal:  None Decision of Tribunal Reference number	Licence Details			
Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households 7 Persons 7  Information referred to a residential property tribunal or Lands Tribunal:  None Decision of Tribunal Reference number	Commencement date:	19/06/2017	Duration of licence:	28/06/2021
Households 7 Persons 7  Information referred to a residential property tribunal or Lands Tribunal:  None Decision of Tribunal Reference number	commoncomont dato.	10/00/2017		20/00/2021
nformation referred to a residential property tribunal or Lands Tribunal:  None  Decision of Tribunal  Reference number	Maximum number of persor	s or households pern	nitted to occupy HMO under conditions	of licence:
None Decision of Tribunal Reference number	Households 7	Persons 7		
None Decision of Tribunal Reference number	Information referred to a	residential property	tribunal or Lands Tribunal:	
Decision of Tribunal Reference number	None	restactitial property	Tribunar of Editus Tribunal.	
			Reference number	
Summary of conditions of licence				

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Not Assigned



#### Licence No.

#### 2016/03694/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 44 Windsor Street Brighton BN1 1RJ

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
Mrs Patricia Camping, 69 Dyke	e Road Avenue Hove BN3 6	6DA	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, etc	)	
Property Type = SHARED HO	USE, No of Units = 1, Occu	pancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Ro	ooms 6	
a) Sleeping	b) Living	ROOMS	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Fl	ats: 1
01	N		
Shared Amenities a) Kitchen	Number Descript	tion	
b) Bathrooms/Showers	1		
c) W.C.s	2		
,			
Licence Details			
Commencement date:	23/12/2016	Duration of licence:	06/07/2021
Maximum number of person	s or households permitte	d to occupy HMO under conditions	s of licence:
	_		
Households 5	Persons 5		
Information referred to a	residential property trib	ounal or Lands Tribunal	
None	oblabilital property tris	ranar or Eurias Tribanai.	
Decision of Tribunal		Reference number	
		- Resolution number	
Summary of conditions of lie HMO - Flec Mandatory conds		- Fire Locks, HMO - Fire Mandatory	conds HMO -
		HMO - Property Chges Mandatory	

Property Maint Mandatory conds, HMO - Repairs Kitchen 2, HMO - Repairs Windows 3, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03696/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Ground To Second Floor Flat 22 Sillwood Road Brighton BN1 2LF

Ward

Name & Address of Licen	ce Holder		
Mrs Margaret Grimsdell & Mr \	/ictor Ellis, 93 Springfield	d Road Brighton BN1 6DH	
Name & Address of Perso	5 5		
G4 Lets, 2 Hythe Road Brighton	on BN1 6JS		
Duna anti- Dana sintia			
Property Description	d LIMO (No of otorous	-4-1	
Short description of licensed			
Property Type = SHARED HO	USE, No of Units = 1, Oo	ccupancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 11	
a) Sleeping ###	b) Liv	ring Rooms 1	
-,	-,		
Number of Self Contained FI	ats: 0	Number of Non Self Cont. Fla	ats: 1
Trainisor of Son Sontained 11	<b>u.u.</b>	Number of New Control Control	1
Shared Amenities	Number Desc	ription	
a) Kitchen	2	•	
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Licence Details			
Commencement date:	19/06/2017	Duration of licence:	28/06/2021
Maximum mumbar of manage	b b - l d		of licenses
maximum number of person	s or nousenoids permi	tted to occupy HMO under conditions	of licence:
Households 7	Persons 7		
	residential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie HMO - Elec Mandatory conds,	cence HMO - Fire Mandatory	conds, HMO - Furniture Mandatory cond	s, HMO - Gas



#### Licence No.

#### 2016/03697/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

45 Ditchling Road Brighton BN1 4SB

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
Mrs Patricia Camping, 69 Dyke	e Road Avenue Hove BN	3 6DA	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	d HMO (No of storeys, e	etc)	
Property Type = SHARED HO	USF. No of Units = 1. Oc	ccupancy = 5, No of Storeys = 4	
	.,		
Number of Rooms	Total Number of	Rooms 6	
a) Sleeping	b) Liv	ing Rooms	
Number of Self Contained FI	ats: 0	Number of Non Self Cont. Flat	ts: 1
Number of Jen Johnamea I I	uts. 0	Number of Non-Sen Sont. Flat	1
Shared Amenities	Number Descr	ription	
a) Kitchen	1 Descri	iption	
b) Bathrooms/Showers	1		
c) W.C.s	2		
,			
Licence Details			
		1	
Commencement date:	23/12/2016	Duration of licence:	06/07/2021
Maximum number of person	s or households permit	tted to occupy HMO under conditions	of licence:
maximum number of person	a or mousemonus permin	to occupy rimo under conditions	or notifies.
Households 5	Persons 5		
Information referred to a r	residential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic	cence		
outliniary of containons of in	Jenice		

HMO - Elec Mandatory conds, HMO - Fire Doors 2, HMO - Fire Doors 4, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Stairs 1, HMO - Repairs Stairs 3, HMO - Repairs Windows 6, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs



#### Licence No.

#### 2016/03699/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

35 Ditchling Rise Brighton BN1 4QL

Ward

Preston Park

Name & Address of Licen	ce Holder		
Mr Guiseppe Todaro, 63 New	Church Road Hove BN	N3 4BA	
Name & Address of Perso	n Managing		
Uden Lets, 88 Dyke Road Brig	hton East Sussex BN	1 3JD	
Property Description			
Short description of licensed	d HMO (No of storeys	s, etc)	
Property Type = SHARED HO	USE, No of Units = 1,	Occupancy = 6, No of Storeys = 4	
Number of Rooms	Total Number		
a) Sleeping 6	b) I	_iving Rooms 1	
Number of Self Contained FI	ats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number Des	scription	
a) Kitchen	2		
b) Bathrooms/Showers	3		
c) W.C.s	<u> </u>		
Licence Details			
Commencement date:	10/11/2016	Duration of licence:	26/06/2021
Maximum number of person	s or households peri	mitted to occupy HMO under conditions of I	icence:
Households 6	Persons 6		
		, tuibal au l auda Tuibal.	
	esidentiai property	y tribunal or Lands Tribunal:	
None		Deference musika-	
Decision of Tribunal		Reference number	
Summary of conditions of lic HMO - Elec Mandatory conds,		MOE, HMO - Fire Mandatory conds, HMO - Fur	niture

HMO - Elec Mandatory conds, HMO - Fire Blocked MOE, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Bathroom 17, HMO - Repairs Floors 8, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03700/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

49 Park Crescent Terrace Brighton BN2 3HE

Ward

St. Peter's And North Laine

Name & Address of Licence H	lolder		
Mr Victor Ellis & Mrs Maggie Grimso	dell, 93 Springfield Road B	righton BN1 6DH	
Name & Address of Person Ma	anaging		
G4 Lets, 2 Hythe Road Brighton BN	I1 6JS		
Property Description			
Short description of licensed HM	O (No of storeys, etc)		
Property Type = SHARED HOUSE,	No of Units = 1, Occupand	cy = 5, No of Storeys = 3	
	<b>-</b>		
Number of Rooms	Total Number of Room	s 6	
a) Sleeping	b) Living Roo	oms	
Number of Self Contained Flats:	0	Number of Non Self Cont. Flats:	0
Shared Amenities Nu	mber Description		
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
License Betails			
Commencement date:	09/12/2016	Duration of licence:	06/07/2021
Maximum number of persons or l	households permitted to	occupy HMO under conditions of	licence:
		occupy rimo under conditions of	nochoc.
Households 5 Per	rsons 5		
Information referred to a resid	lential property tribuna	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of license	_		



#### Licence No.

#### 2016/03702/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

80 Bernard Road Brighton BN2 3EQ

Ward

Hanover And Elm Grove

Name & Address of Lice	nce Holder	
√lrs Pauline Agg, 45 The Ave	enue Shoreham-by-Sea BN43 5GJ	
Name & Address of Pers	on Managing	
G4 Lets, 2 Hythe Road Brigh	ton BN1 6JS	
Dranauty Dagarintian		
Property Description	ed HMO (No of storeys, etc)	
-		
Property Type = SHARED H	OUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 11	
a) Sleeping ###	b) Living Rooms 2	
Number of Self Contained	Flats: 0 Number of Non Self Cont. Flats:	1
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	1	
Licence Details		
Commencement date:	11/04/2017 <b>Duration of licence</b> : 27/0	06/2021
Maximum number of perso	ns or households permitted to occupy HMO under conditions of licence	:
	_	
Households 6	Persons 6	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of HMO - Elec Mandatory cond	licence s, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - G	as



#### Licence No.

#### 2016/03703/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

61 Cobden Road Brighton BN2 9TJ

Ward

Hanover And Elm Grove

Name & Address of Licence	e Holder		
Alzbeta & Milovan Johnson, Vip	er's Wharf Railway Lane	Lewes East Sussex BN7 2AQ	
Name & Address of Person	n Managing		
Q Estate Agents Ltd, Maytree H	louse Meres Lane Heathf	ield TN21 0TZ	
Property Description			
Short description of licensed	HMO (No of storeys, et	c)	
Property Type = SHARED HOU	SE, No of Units = 1, Occ	upancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of F	Rooms 7	
a) Sleeping 7	b) Livin	g Rooms 1	
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Fla	its: 0
Observat Association	N		
Shared Amenities	Number Descrip	otion	
a) Kitchen	2		
b) Bathrooms/Showers c) W.C.s	2		
c) vv.c.s			
Licence Details			
Commencement date:	10/11/2016	Duration of licence:	28/06/2021
Maximum number of persons	or households permitte	ed to occupy HMO under conditions	of licence:
	_		
Households 7	Persons 7		
Information referred to a re	esidential prope <u>rty tr</u> i	bunal or Lands Tribunal <u>:</u>	_
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice		nda HMO Eurnitura Mandatany cond	a HMO Cas



#### Licence No.

#### 2016/03704/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 37 Ditchling Rise Brighton BN1 4QL

Ward

Preston Park

Name & Address of Licer	ice Holder		
Mr Guiseppe Todaro, 63 New	Church Road Hove BN3 4BA		
Name & Address of Perso	on Managing		
Uden Estate Agents, 88 Dyke	Road Brighton BN1 3JD		
Property Description			
Short description of license	d HMO (No of storeys, etc)		
Property Type = SHARED HC	OUSE, No of Units = 1, Occupar	ncy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Roor	ns 11	
a) Sleeping 5	b) Living Ro	ooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number Description	1	
a) Kitchen	2		
b) Bathrooms/Showers	1		
c) W.C.s	2		
Licence Details			
Commencement date:	10/11/2016	Duration of licence:	26/06/2021
Maximum number of person	s or nousenoids permitted to	occupy HMO under conditions of	licence:
Households 5	Persons 5		
Information referred to a	residential property tribun	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	cence		
HMO - Elec Mandatory conds	, HMO - Fire Doors 10, HMO - I	Fire Mandatory conds, HMO - Furnitu perty Chges Mandatory conds, HMO -	

Maint Mandatory conds, HMO - Repairs Drainage 2, HMO - Repairs Floors 5, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03714/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

25 Montpelier Street Brighton BN1 3DL

Ward

			vvalu Re	egency
Name & Address of Lice	nce Holder			
Geneva Investment Group Lt		e 77A Portland F	Road Hove BN3 5FE	
Name & Address of Pers	on Managing			
Ms Wendy Thomas, Geneva	House 77A Port	land Road Hove	BN3 5FE	
Property Description				
Short description of license	ed HMO (No of	storeys, etc)		
Property Type = BEDSIT, No	of Units = 3, Oc	cupancy = 3, No	of Storeys = 4	
N	T. (. I.N.			
Number of Rooms	lotal N	lumber of Room		
a) Sleeping 3		b) Living Ro	oms 3	
Number of Self Contained F	Flats:	0	Number of Non Self Cont. Fla	its: 1
Shared Amenities	Number	Description		
a) Kitchen	3			
b) Bathrooms/Showers	1			
c) W.C.s	1			
Licence Details				
				1
Commencement date:	17/08/	2016	<b>Duration of licence:</b>	11/07/2021
Maximum number of perso	ns or househol	ds permitted to	occupy HMO under conditions	of licence:
			coup,c and conditions	
Households 3	Persons	3		
Information referred to a	residential n	roperty tribuna	al or Lands Tribunal:	
None			<u></u>	
Decision of Tribunal			Reference number	
Cummon, of conditions of	loonoo			
Summary of conditions of I HMO - Flec Mandatory conds		andatory conds I	HMO - Furniture Mandatory cond	s HMO -

Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03721/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 40A Western Road Hove BN3 1JD

Ward

Brunswick And Adelaide

Name & Address of Licen	ce Holder		
Mr Philip Dono, 40 Western Ro	oad Hove BN3 1JD		
Name & Address of Perso	n Managing		
,			
Dranauty Deceription			
Property Description  Short description of licensed	LUMO (No of storovo e	<b>50</b> )	
•		•	
Property Type = SHARED HOU	JSE, NO OT UNITS = 8, UCC	cupancy = 8, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 8	
a) Sleeping	b) Liviı	ng Rooms	
Number of Self Contained Fla	ats: 0	Number of Non Self Cont. Flat	ts: 1
Shared Amenities	Number Descri	ption	
a) Kitchen	1		
b) Bathrooms/Showers c) W.C.s	8		
0) 11.0.0			
Licence Details			
	22//2/22		20/27/2024
Commencement date:	23/12/2016	Duration of licence:	03/07/2021
Maximum number of persons	s or households permit	ted to occupy HMO under conditions	of licence:
Households 8	Persons 8		
nousellolus	reisolis 0		
Information referred to a r	esidential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie			

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Doors 4, HMO - Fire Doors 8, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Kitchen 1, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Electrics 6, HMO -Repairs Ventilation 3, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03728/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

68 The Avenue Brighton BN2 4FA

Ward

Moulsecoomb And Bevendean

Name & Address of Licence	e Holder		
Ms Silvana Jones, Flat 7 7 Villa	Road St Leonards On S	Sea East Sussex TN37 6EJ	
Name & Address of Person	Managing		
John Hilton Ltd, 127 Lewes Roa	d Brighton BN2 3LG		
Property Description			
Short description of licensed	HMO (No of storeys, e	tc)	
Property Type = SHARED HOU	SE, No of Units = 1, Oc	cupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 7	
a) Sleeping	b) Livi	ng Rooms	
Number of Self Contained Flat	ts: 0	Number of Non Self Cont. Flat	s: 0
Shared Amenities	Number Descr	iption	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	08/11/2016	Duration of licence:	04/11/2020
Maximum number of persons	or households permit	ted to occupy HMO under conditions	of licence:
Households 6	Persons 6		
Information referred to a re	sidential property tı	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice	nce		

Emergency lighting, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - General 1, HMO - General 6, HMO - General 7, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Recessed lights, Self closer, Substantial door, Timescales, WHB



#### Licence No.

#### 2016/03729/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

52 Egremont Place Brighton BN2 0GB

Ward

Queen's Park

Name & Address of Licence	e Holder		
Alzbeta and Milovan Johnson, F	lat 2 Viper's Wharf Railv	vay Lane Lewes BN7 2AQ	
Name & Address of Persor	Managing		
Q Estate Agents Ltd, Maytree H	ouse Meres Lane Heath	field TN21 0TZ	
Property Description			
Short description of licensed	-		
Property Type = SHARED HOU	SE, No of Units = 1, Occ	cupancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 8	
a) Sleeping 7	D) LIVII	ng Rooms 1	
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Fla	ts: 0
Observat Americalists	Nombre Breed		
Shared Amenities a) Kitchen	Number Descri	ption	
b) Bathrooms/Showers	2		
c) W.C.s	2		
o)o			
Licence Details			
Commencement date:	10/11/2016	Duration of licence:	28/06/2021
Maximum number of persons	or households permitt	ed to occupy HMO under conditions	of licence:
	_		
Households 7	Persons 7		
Information referred to a re	esidential prope <u>rty tr</u>	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice		ande HMO. Eurnituro Mandatory conde	NUO Gas



#### Licence No.

#### 2016/03738/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

24 Seafield Road Hove BN3 2TP

Ward

Central Hove

Name & Address of Licen	ce Holder		
Geneva Investment Group Ltd	, Geneva House 77A R	utland Road Hove BN3 5FE	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	d HMO (No of storeys,	etc)	
Property Type = BEDSIT, No o	of Units = 4, Occupancy	= 15, No of Storeys = 4	
Number of Rooms	Total Number o	of Rooms 4	
a) Sleeping 13	b) Li	iving Rooms 13	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number Desc	cription	
a) Kitchen	13	cription	
b) Bathrooms/Showers	3		
c) W.C.s	2		
Licence Details			
Commencement date:	15/09/2016	Duration of licence:	03/07/2021
	10,00,2010		3373772321
Maximum number of person	s or households perm	itted to occupy HMO under conditions	of licence:
Households 15	Persons 15		
Information referred to a	residential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie HMO - Elec Mandatory conds.		conds. HMO - Furniture Mandatory cond	s. HMO -



#### Licence No.

#### 2016/03741/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

15 Caledonian Road Brighton BN2 3HX

Ward

St. Peter's And North Laine

Name & Address of Licence	e Holder		
Mrs & Mr Linda & Steve Harmer	-Strange, T/a Grosveno	r Properties Tudor Grange 13 The Upp	er Drive Hove
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed I		tc)	
Property Type = SHARED HOUS	SE, No of Units = 1, Occ	cupancy = 5, No of Storeys = 4	
Number of Rooms	Total Number of	Rooms 6	
a) Sleeping	b) Liviı	ng Rooms	
Number of Self Contained Flat	s: 0	Number of Non Self Cont. Fla	ats: 1
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Descri	ption	
Licence Details			
Commencement date:	15/12/2016	Duration of licence:	27/07/2021
Maximum number of persons	or households permiti	ted to occupy HMO under conditions	of licence:
		ted to occupy rimo under conditions	of ficerice.
Households 5	Persons 5		
Information referred to a re	sidential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice	nce	O Fire Mandatan, aanda UMO Firmii	h



#### Licence No.

#### 2016/03745/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 6 Caledonian Road Brighton BN2 3HX

Ward

St. Peter's And North Laine

Name & Address of Licen	nce Holder	
	er-Strange, T/a Grosvenor Properties Tudor Grange 13 The Upper	Drive Hove
DNI3 ECD		
Name & Address of Perso	on Managing	
1		
Property Description		
	d LIMO (No of storous sto)	
Short description of license		
Property Type = SHARED HO	SUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 5	b) Living Rooms 1	
Number of Self Contained F	lats: 0 Number of Non Self Cont. Flats	s: 1
	·	
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Commencement date:	01/11/2016 Duration of licence:	10/07/2021
Maximum number of person	s or households permitted to occupy HMO under conditions o	of licence:
maximum number of person	is of nouseholds permitted to occupy timo under conditions c	incence.
Households 5	Persons 5	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Cummony of conditions of !!	00000	
Summary of conditions of li	cence	



#### Licence No.

#### 2016/03748/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

27 Coleman Street Brighton BN2 9SQ

Ward

Hanover And Elm Grove

Name & Address of Licence	e Holder		
Ms C E Davies & Mr D Smokcu	m, 183 Mornington Ro	ad London E11 3DT	
N 0.4.1. CD			
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys,	etc)	
Property Type = SHARED HOL	JSE, No of Units = 1, C	Occupancy = 5, No of Storeys = 4	
Number of Rooms	Total Number of		
a) Sleeping	b) Li	ving Rooms	
Number of Self Contained Fla	nts: 0	Number of Non Self Cont. Flat	s: 1
Shared Amenities	Number Desc	cription	
a) Kitchen	1	•	
b) Bathrooms/Showers	2		
c) W.C.s	3		
Licence Details			
_		7	
Commencement date:	27/10/2016	Duration of licence:	02/07/2021
Maximum number of persons	or households perm	itted to occupy HMO under conditions	of licence:
Households 5	Persons 5		
	3.00110		
Information referred to a re	esidential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic		condo UMO. Eurnituro Mondotory condo	LIMO Coo



#### Licence No.

#### 2016/03751/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

St Georges House 1A St Georges Place Brighton BN1 4GA

Ward

St. Peter's And North Laine

Name & Address of Licen	ice Holder			
Geneva Investment Group Ltd	l, Geneva House 77A	Rutland Road Hove BN3	5FE	
Name & Address of Perso	on Managing			
,				
Property Description				
Short description of license	d HMO (No of storey	s, etc)		
Property Type = BEDSIT, No	of Units = 8, Occupan	cy = 10, No of Storeys = 5	ı	
Number of Rooms	Total Numbe	r of Rooms 8		
a) Sleeping 8	b)	Living Rooms 8		
Number of Self Contained F	lats:	Number of No	on Self Cont. Flats:	1
Shared Amenities	Number De	escription		
a) Kitchen	8			
b) Bathrooms/Showers	2			
c) W.C.s	3			
Licence Details				
Licence Details				
Commencement date:	06/09/2016	Duration of	f licence:	03/07/2021
Maximum number of person	s or households pe	mitted to occupy HMO u	inder conditions of li	icence:
Households 10	Persons 10			
Information referred to a	residential proper	y tribunal or Lands Tr	ibunal:	
None				
Decision of Tribunal		Refer	rence number	
Summary of conditions of li HMO - Elec Mandatory conds,	, HMO - Fire Mandato	•	•	MO -



#### Licence No.

#### 2016/03752/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

16 Burlington Street Brighton BN2 1AU

Ward

Queen's Park

Name & Address of Licen	ce Holder	
Geneva Investment Group Ltd	, 77A Rutland Road Hove East Sussex BN3 5FE	
Name & Address of Perso	on Managing	
Ms Wendy Thomas, 77A Rutla	and Road Hove East Sussex BN3 5FE	
Property Description		
Short description of licensed	d HMO (No of storeys, etc)	
Property Type = BEDSIT, No o	of Units = 2, Occupancy = 9, No of Storeys = 4	
Number of Rooms	Total Number of Rooms 2	
a) Sleeping 8	b) Living Rooms 8	
Number of Self Contained Fl	ats: 0 Number of Non Self Cont. Flats	: 1
Number of Self Contained Fi	Number of Non-Sen Cont. Flats	·
Shared Amenities	Number Description	
a) Kitchen	8	
b) Bathrooms/Showers	1	
c) W.C.s	1	
Licence Details		
Commencement date:	06/09/2016 Duration of licence:	11/07/2021
Maximum number of person	s or households permitted to occupy HMO under conditions o	f licence:
Households 9	Persons 9	
Information referred to a i	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lie		



#### Licence No.

#### 2016/03756/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 47 Lansdowne Place Hove BN3 1HF

Ward

Brunswick And Adelaide

Name & Address of Licen	ce Holder		
Mr Roger Kay, 87 Church Road	d Hove East Sussex BN3 2	ВВ	
Name & Address of Perso	n Managing		
Pier Associates Ltd, T/a Just L	ets 87 Church Road Hove I	BN3 2BB	
Property Description			
Short description of licensed	I HMO (No of storeys, etc	)	
Property Type = BEDSIT, No c	of Units = 7, Occupancy = 7	, No of Storeys = 5	
Number of Rooms	Total Number of Re	ooms 7	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. F	Flats: 1
Shared Amenities	Number Descript	tion	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	13/09/2016	Duration of licence:	04/07/2021
Maximum number of persons	s or households permitte	d to occupy HMO under condition	ns of licence:
Households 7	Persons 7		
7	7		
Information referred to a r	esidential property trib	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie	onoo		



#### Licence No.

#### 2016/03758/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

1 Barnett Road Brighton BN1 7GJ

Ward

Hollingdean And Stanmer

ame & Address of Lice	nce Holder		
Ir Ian Dunkerton, 191A Card	len Avenue Patcham Brighto	n BN1 8LE	
ame & Address of Pers	on Managing		
Property Description			
	ed HMO (No of storeys, etc)	1	
•	•		
roperty Type = SHARED HC	JUSE, NO OF UNITS = 1, OCCU	pancy = 6, No of Storeys = 3	
umber of Rooms	Total Number of Ro	ooms 8	
) Sleeping 6	b) Living	Rooms 1	
lumber of Self Contained F	Flats: 0	Number of Non Self Cont. Flat	s: 1
hared Amenities	Number Descript	tion	
) Kitchen	2		
Bathrooms/Showers	3		
W.C.s	3		
icence Details			
		,	
ommencement date:	02/11/2016	Duration of licence:	03/07/2021
laximum number of persor	ns or households permitte	d to occupy HMO under conditions o	of licence:
•	•	.,	
ouseholds 6	Persons 6		
nformation referred to a	residential property trib	ounal or Lands Tribunal:	
one			
ecision of Tribunal		Reference number	
	s, HMO - Fire Mandatory con	ds, HMO - Furniture Mandatory conds,	



#### Licence No.

#### 2016/03760/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

57 Brading Road Brighton BN2 3PE

Ward

Hanover And Elm Grove

Name & Address of Licence	Holder		
Mrs Tania Rayward, Blackstone G	Grange Blackstone Lane Nr	Henfield BN5 9TB	
Name & Address of Person I	Managing		
G4 Lets, 2 Hythe Road Brighton B	N1 6JS		
Property Description			
Short description of licensed HI	MO (No of storeys, etc)		
Property Type = SHARED HOUSI	E, No of Units = 1, Occupar	ncy = 7, No of Storeys = 3	
Number of Rooms	Total Number of Roor	ns 8	
a) Sleeping	b) Living Ro	ooms	
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flats	: 0
Shared Amenities N	lumber Description	1	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Licence Details			
Commencement date:	25/04/2017	Duration of licence:	11/07/2021
Maximum number of persons of	r housaholds parmittad to	o occupy HMO under conditions o	f licence:
Maximum number of persons of	nousenoius perinitteu to	occupy rimo under conditions of	i licelice.
Households 7 Pe	ersons 7		
Information referred to a re-		al and anda Tribunal	
Information referred to a res	idential property tribun	al or Lands Tribunal:	
None		Dafan	
Decision of Tribunal		Reference number	
Summary of conditions of ligan	00		

Summary of conditions of licence



#### Licence No.

#### 2016/03765/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

93 Stanmer Villas Brighton BN1 7HN

Ward

Hollingdean And Stanmer

Name & Address of Licence	Holder		
Miss Susan Heydon, Pavo Cotta	ge Bolney Chapel Roa	d Twineham RH17 5NG	
Name & Address of Person	Managing		
G4 Lets, 2 Hythe Road Brighton	BN1 6JS		
Property Description			
Short description of licensed h	IMO (No of storeys, e	etc)	
Property Type = SHARED HOUS	SE, No of Units = 1, Oc	ccupancy = 6, No of Storeys = 3	
Number of Doors	Total Number of	. Booms 6	
Number of Rooms	Total Number of		
a) Sleeping	b) Livi	ing Rooms	
Number of Self Contained Flat	s: 0	Number of Non Self Cont. Flats	:: 0
	Number Descr	ription	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
		1	
Commencement date:	09/12/2016	Duration of licence:	06/07/2021
Maximum number of persons of	or households permit	tted to occupy HMO under conditions o	f licence:
Hawashalda C F		]	
Households 6 F	Persons 6		
Information referred to a res	sidential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice	•••		
auminary of conditions of licel	ice		



#### Licence No.

#### 2016/03772/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 3 Parkmore Terrace Brighton BN1 6AL

Ward

Preston Park

Name & Address of Licence Holder
lan & Beverley Brentnall, La Vallade 24320 St Paul Lizonne France
Name & Address of Person Managing
G4 Lets, 2 Hythe Road Brighton BN1 6JS
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3
Number of Rooms Total Number of Rooms 6
a) Sleeping b) Living Rooms
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
Shared Amenities Number Description
a) Kitchen
b) Bathrooms/Showers
c) W.C.s
Licence Details
Commencement date: 16/12/2016 Duration of licence: 28/06/2021
Commencement date: 16/12/2016 Duration of licence: 28/06/2021  Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Commencement date: 16/12/2016 Duration of licence: 28/06/2021
Commencement date: 16/12/2016 Duration of licence: 28/06/2021  Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households 6 Persons 6
Commencement date: 16/12/2016 Duration of licence: 28/06/2021  Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Commencement date: 16/12/2016 Duration of licence: 28/06/2021  Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households 6 Persons 6  Information referred to a residential property tribunal or Lands Tribunal:



#### Licence No.

#### 2016/03779/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

68 Hollingdean Terrace Brighton BN1 7HA

Ward

Hollingdean And Stanmer

Name & Address of Licence	Holder		
Mark & Tanya Shields, Old Conna	Barn Cuckfield Road	Goddards Green BN6 9LQ	
Name & Address of Person I	<b>l</b> lanaging		
G4 Lets, 2 Hythe Road Brighton E	N1 6JS		
Property Description			
Short description of licensed H	VIO (No of storeys, e	etc)	
Property Type = SHARED HOUSI	Ξ, No of Units = 1, Oc	cupancy = 6, No of Storeys = 3	
		_	
Number of Rooms	Total Number of	Rooms 7	
a) Sleeping	b) Livi	ing Rooms	
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flats	s: 0
Shared Amenities N	lumber Descr	iption	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Licence Details			
Commencement date:	16/12/2016	Duration of licence:	28/06/2021
Maximum number of persons of	r households permit	ted to occupy HMO under conditions o	f licence:
Households 6 Pe	ersons 6		
	- [	1	
Information referred to a res	idential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licen	re		
Summary of Contamons of IICEN	<del></del>		



#### Licence No.

#### 2016/03782/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

83 Brading Road Brighton BN2 3PE

Ward

Hanover And Elm Grove

Name & Address of Lice	nce Holder		
Mr & Mrs H & A Cash, The O	ld Vicarage 27 Crescent Roa	ad Burgess Hill BN15 8EH	
Name & Address of Pers	on Managing		
G4 Lets, 2 Hythe Road Brigh	ton BN1 6JS		
Property Description			
Short description of license	ed HMO (No of storeys, etc	)	
Property Type = SHARED HO	OUSE, No of Units = 1, Occu	ipancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of R	ooms 8	
a) Sleeping		g Rooms	
a) Siechilig	D) LIVING	J 1.00(11)5	
Number of Calf Cantained I	-Tata: 0	Number of New Colf Cont. El	oto: 0
Number of Self Contained I	Flats: 0	Number of Non Self Cont. Fl	ats: 0
Shared Amenities	Number Descrip	tion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	23/01/2017	Duration of licence:	11/07/2021
	20/01/2011		11/01/2021
Maximum number of perso	ns or households permitte	d to occupy HMO under conditions	s of licence:
Households 7	Persons 7		
Information referred to a	residential property trib	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
0	!		

Summary of conditions of licence



#### Licence No.

#### 2016/03785/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

37 Totland Road Brighton BN2 3EP

Ward

Hanover And Elm Grove

Name & Address of Licence	Holder		
		d Purgona Hill PN15 OF H	
Mr & Mrs H & A Cash, The Old Vi	carage 27 Crescent Road	u burgess filli bin 15 ŏEff	
Name & Address of Person	Managing		
G4 Lets, 2 Hythe Road Brighton B			
O4 Lets, 2 Hythe Road Brighton I	3111 030		
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Occup	pancy = 6, No of Storeys = 3	
1 7 71	, , ,	<u> </u>	
Number of Rooms	Total Number of Ro	oms 8	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Flats	0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities 1	Number Descripti	ion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	09/11/2017	<b>Duration of licence:</b>	11/07/2021
Maximum number of persons of	ur hausehalds nermitted	to occupy HMO under conditions	of licence:
		to occupy rimo under conditions	or needlee.
Households 6 P	ersons 6		
Information referred to a res	idential property tribi	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
0			

Summary of conditions of licence



#### Licence No.

#### 2016/03787/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

95 Upper Lewes Road Brighton BN2 3FE

Ward

St. Peter's And North Laine

Name & Address of Licen	ice Holder		
Mrs & Mr Linda & Steve Harmo	er-Strange, T/a Gros	svenor Properties Tudor Grange 13 The Upp	er Drive Hove
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of licensed	d HMO (No of store	eys, etc)	
Property Type = SHARED HO	USE, No of Units = 1	1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Numbe	er of Rooms 6	
a) Sleeping	b	b) Living Rooms	
Number of Self Contained Fl	lats:	0 Number of Non Self Cont. Fla	ts: 1
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number D 1 1 2	Description	
Licence Details			
Commencement date:	09/03/2017	Duration of licence:	25/07/2021
Maximum number of person	s or households pe	ermitted to occupy HMO under conditions	of licence:
Households 5	Persons 5	5	
Information referred to a	residential prope	rty tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie		cary condo HMO. Eurnituro Mandatory cond	a HMO Coo



#### Licence No.

#### 2016/03790/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

47 Clyde Road Brighton BN1 4NN

Ward

St. Peter's And North Laine

Name O Adduses of Linear	an Haldan	
Name & Address of Licer		D: 41
Mrs & Mr Linda & Steve Harm	er-Strange, T/a Grosvenor Properties Tudor Grange 13 The Upper	Drive Hove
Name & Address of Perso	on Managing	
,		
Property Description		
Short description of license	d HMO (No of storeys, etc.)	
-		
Property Type = SHARED HC	DUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping 6	b) Living Rooms 1	
Number of Self Contained F	lats: 0 Number of Non Self Cont. Flats:	: 1
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	2	
c) W.C.s	3	
Licence Details		
Commencement date:	01/11/2016 <b>Duration of licence</b> :	10/07/2021
Maximum number of persor	ns or households permitted to occupy HMO under conditions of	i licence:
Households 6	Persons 6	
Tiouscrioius 0	Torsons	
Information referred to a	residential property tribunal or Lands Tribunal:	
None	, , , , , , , , , , , , , , , , , , , ,	
Decision of Tribunal	Reference number	
Decision of Hilband	Keletetice humber	
Summary of conditions of li		HMO Gas



#### Licence No.

#### 2016/03792/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

76B Beaconsfield Road Brighton BN1 6DD

Ward

Preston Park

Nama O Addusas a <del>flican</del>	aa Ilaldau		
Name & Address of Licen			
Mrs Patricia Camping, 69 Dyke	Road Avenue Hove BN	3 6DA	
Name 0 Address of Bone	. Managhan		
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys, e	tc)	
Property Type = SHARED HOL	JSE, No of Units = 1, Oc	cupancy = 6, No of Storeys = 4	
Number of Rooms	Total Number of	Doomo 7	
a) Sleeping	b) Livi	ng Rooms	
Number of Self Contained Fla	ats: 0	Number of Non Self Cont. Flat	s: 1
Shared Amenities	Number Descr	iption	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	23/12/2016	Duration of licence:	06/07/2021
commonociment date.	20/12/2010	Suration of modified.	00/01/2021
Maximum number of persons	s or households permit	ted to occupy HMO under conditions	of licence:
Households 6	Persons 6		
i iousciioius 0	i Gradiia U		
Information referred to a r	esidential property to	ribunal or Lands Tribunal:	
None	,,		
Decision of Tribunal		Reference number	
Summary of conditions of lic	· · · · · · · · · · · · · · · · · · ·		
Juninary of Conditions of IIC	ence		

HMO - Elec Mandatory conds, HMO - Fire Doors 8, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Bathroom 17, HMO - Repairs Roofs/Chimneys 1, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03793/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

14 Tisbury Road Hove BN3 3BA

Ward

Central Hove

Name & Address of Licence	e Holder		
Mr Ian MacGregor, 14A Tisbury	Road Hove BN3 3BA		
Name & Address of Person	n Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys, et	cc)	
Property Type = BEDSIT, No of			
7	, , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , ,	
Number of Rooms	Total Number of F	Rooms 5	
a) Sleeping	b) Livir	ng Rooms 5	
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Flat	s: 1
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description 5 5 5 5 5	ption	
Licence Details			
Commencement date:	02/11/2016	Duration of licence:	02/06/2021
Maximum number of persons	or households permitt	ed to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Information referred to a re	esidential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice		C. Fire Deere 9 HMO. Fire Mandatory	aanda JIMO



#### Licence No.

#### 2016/03795/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

64 Upper Lewes Road Brighton BN2 3FG

Ward

St. Peter's And North Laine

Name & Address of Licence	e Holder		
		nden Tonbridge Kent TN12 8DB	
IVII James I Old, The IVIIII IVIIII La	ne maidstone road noismo	ildeli Tolibildge Nelit TN 12 0DD	
Name & Address of Person	n Managing		
Mr Dan Lyons, 74 Lewes Road	5 5	BHZ	
		· ·	
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOU	ISE, No of Units = 1, Occupa	incy = 6, No of Storeys = 3	
	·		
Number of Rooms	Total Number of Roo	ms 8	
a) Sleeping	b) Living R	looms	
Number of Self Contained Fla	<b>ts</b> : 0	Number of Non Self Cont. Flat	s: 0
Shared Amenities	Number Description	n	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	07/10/2016	Duration of licence:	04/07/2021
Maximum number of persons	or households permitted t	o occupy HMO under conditions	of licence:
Households 6	Persons 6		
•	- 3		
Information referred to a re	esidential property tribu	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence



#### Licence No.

#### 2016/03796/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

22 Brunswick Place Hove BN3 1NA

Ward

Brunswick And Adelaide

Name & Address of Licence	Holder	
Mr John Speight, 20 Holland Roa		
Name & Address of Person	Managing	
Homelets (Brighton) Ltd, 47 Norfo	lk Square Brighton BN1 2PA	
<b>.</b>		
Property Description	MO (No of storous sto)	
Short description of licensed H	•	
Property Type = BEDSIT, No of U	nits = 7, Occupancy = 7, No of Storeys = 5	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping 7	b) Living Rooms 7	
	, <u> </u>	
Number of Self Contained Flats	: 0 Number of Non Self Cont. Flats:	0
Shared Amenities	lumber Description	
a) Kitchen	7	
b) Bathrooms/Showers	4	
c) W.C.s	4	
Licence Details		
Common comount data:	04/44/204C Duration of linear	02/07/2024
Commencement date:	01/11/2016 Duration of licence:	03/07/2021
Maximum number of persons o	r households permitted to occupy HMO under conditions of I	icence:
Households 7 Pe	ersons 7	
Tiousenoius /	7	
Information referred to a res	idential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licen HMO - Elec Mandatory conds, HM	<b>ce</b> //O - Fire Alarm Systems 2, HMO - Fire Mandatory conds, HMO - I	Furniture



#### Licence No.

#### 2016/03797/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

12 Buckingham Street Brighton BN1 3LT

Ward

St. Peter's And North Laine

Name & Address of Lice	nce Holder		
Mr David Miele, 45 Shirley Dr	ive Hove BN3 6UB		
Name & Address of Pers	on Managing		
Hove Lets, 204 Church Road	Hove BN3 2DJ		
Property Description			
Short description of license	ed HMO (No of storeys, etc)		
Property Type = Not Assigned	d, No of Units = 5, Occupancy	v = 5, No of Storeys = 3	
Number of Rooms	Total Number of Ro	oms 6	
a) Sleeping	b) Living	Rooms	
Number of Self Contained F	Flats: 0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities	Number Descripti	on	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	07/12/2016	Duration of licence:	05/07/2021
Mariana and a same		4	-f.ll
maximum number of persor	is or nousenoids permitted	to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Information referred to a	residential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of I	inaman		



#### Licence No.

#### 2016/03798/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

75 Hartington Road Brighton BN2 3LS

Ward

Hanover And Elm Grove

Name & Address of Licence	Holder		
Dr Simon Malik, Dean House Fari		O DNG OLE	
DI SIIIOII Walik, Deali House Fali	II Galeriouse Larie Hassock	S DIVO ALE	
Name & Address of Person I	Managing		
G4 Lets, 2 Hythe Road Brighton E			
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Occupan	cy = 6, No of Storeys = 3	
		_	
Number of Rooms	Total Number of Room	ns 7	
a) Sleeping	b) Living Ro	oms	
Number of Self Contained Flats		Number of New Colf Cont. Flater	0
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flats:	0
Shared Amenities N	lumber Description		
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	12/12/2016	Duration of licence:	28/06/2021
Maximum number of persons o	r households permitted to	occupy HMO under conditions of li	cence:
Households 6 Pe	ersons 6		
Information referred to a res	idential property tribun	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licen	00		

Summary of conditions of licence



#### Licence No.

#### 2016/03799/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

109 Upper Lewes Road Brighton BN2 3FE

Ward

St. Peter's And North Laine

Name & Address of Licence	Holder		_
Dr Simon Malik, Dean House Farn	n Gatehouse Lane Hass	socks BN6 9LE	
Name & Address of Person N	Managing		
G4 Lets, 2 Hythe Road Brighton B	N1 6JS		
Property Description	10 (N - 5 - 1 1 -	<b>,</b>	
Short description of licensed HI		•	
Property Type = SHARED HOUSE	E, No of Units = 1, Occu	ipancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of R	ooms 8	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Flats:	0	Number of Non Self Cont. Fl	ats: 0
Shared Amenities N	umber Descrip	tion	
a) Kitchen			
b) Bathrooms/Showers c) W.C.s			
C) W.O.S			
Licence Details			
Ī			
Commencement date:	23/12/2016	Duration of licence:	28/06/2021
Maximum number of persons or	households permitte	d to occupy HMO under conditions	s of licence:
Hawaahalda 7 Da	7		
Households 7 Pe	ersons 7		
		one of an Landa Talkanial.	
Information referred to a resi	dential property trib	ounai or Lands <u>i ribunai:</u>	
Information referred to a resi	dential property trib	bunal or Lands Tribunal:	
	dential property trib	Reference number	

Summary of conditions of licence



#### Licence No.

#### 2016/03800/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

34 Cheltenham Place Brighton BN1 4AB

Ward

St. Peter's And North Laine

Name & Address of Licence	ce Holder	
Mrs Patricia Camping, 69 Dyke	Road Avenue Hove BN3 6DA	
Name & Address of Perso	n Managing	
,		
Property Description		
Short description of licensed	HMO (No of storeys, etc)	
Property Type = SHARED HOL	JSE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
. , , ,		
Number of Rooms	Total Number of Rooms 7	
a) Sleeping	b) Living Rooms	
Number of Calf Contained Fl	Number of New Self Cour	4 Flata
Number of Self Contained Fla	ats: 0 Number of Non Self Con	nt. Flats: 1
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
•	20/40/2040	20/27/2024
Commencement date:	23/12/2016 Duration of licence:	06/07/2021
Maximum number of persons	s or households permitted to occupy HMO under condi	itions of licence:
Households 6	Persons 6	
Information referred to a r	esidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference numb	oer
Summary of conditions of lic	ence	

HMO - Elec Mandatory conds, HMO - Fire Doors 8, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Electrics 4, HMO - Repairs Roofs/Chimneys 1, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Not Assigned



#### Licence No.

#### 2016/03801/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

16 Beaconsfield Road Brighton BN1 4QH

Ward

St. Peter's And North Laine

Name & Address of Licence Ho	older		
Dr Simon Malik, Dean House Farm (	Gatehouse Lane Hasso	ocks BN6 9LE	
Name & Address of Person Ma	naging		
G4 Lets, 2 Hythe Road Brighton BN1	1 6JS		
Property Description			
Short description of licensed HMC			
Property Type = SHARED HOUSE, I	No of Units = 1, Occup	ancy = 8, No of Storeys = 3	
Number of Rooms a) Sleeping	Total Number of Roo b) Living I		
Number of Self Contained Flats:	0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	mber Description	on	
Licence Details			
Commencement date:	23/12/2016	Duration of licence:	28/06/2021
Maximum number of persons or h	ouseholds permitted	to occupy HMO under conditions	of licence:
Households 8 Pers	sons 8		
Information referred to a reside	ential property tribu	ınal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summany of conditions of license			

Summary of conditions of licence



#### Licence No.

#### 2016/03807/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 3 Dyke Road Drive Brighton BN1 6AJ

Ward

Preston Park

Name & Address of Licence	Holder		
		DNE OLIZ	
Mr & Mrs Digby Stephenson, 110	Parsonage Road Henlield	BN9 9HZ	
Name & Address of Person I	Managing		
G4 Lets, 2 Hythe Road Brighton E	3N1 6JS		
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS		ancy = 7 No of Storeys = 3	
1 10porty 1 1 po	_, 110 01 01 me 1, 000ape		
Number of Rooms	Total Number of Roo	oms 7	
a) Sleeping	b) Living F	Rooms	
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flats:	0
Shared Amenities N	lumber Description	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commonount data:	23/12/2016	Duration of licence:	20/06/2024
Commencement date:	23/12/2016	Duration of licence:	28/06/2021
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
Households 7 Po	ersons 7		
, ,			
Information referred to a res	idential property tribu	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence



#### Licence No.

#### 2016/03815/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

42 Hartington Road Brighton BN2 3LS

Ward

Hanover And Elm Grove

Name & Address of Licence	Holder			
Mr & Mrs Digby Stephenson, 110	Parsonage Road Henfield E	BN5 9HZ		
Name & Address of Person I	Managing			
G4 Lets, 2 Hythe Road Brighton E	3N1 6JS			
Property Description				
Short description of licensed H	MO (No of storeys, etc)			
Property Type = Not Assigned, No	o of Units = 1, Occupancy =	6, No of Storeys = 3		
Number of Deeps	Total Number of Dear			
Number of Rooms	Total Number of Roon			
a) Sleeping	b) Living Ro	oms		
		٦		
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flats:	0	
	Number Description			
a) Kitchen				
b) Bathrooms/Showers				
c) W.C.s				
Licence Details				
Commencement date:	12/12/2016	Duration of licence:	28/06/2021	
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
maximum number of persons o	i nousenoius perinitied to	occupy fimo under conditions of	ncence.	
Households 6 Pe	ersons 6			
Information referred to a res	idential property tribun	al or Lands Tribunal:		
None				
Decision of Tribunal		Reference number		
Summary of conditions of licen				

Summary of conditions of licence



#### Licence No.

#### 2016/03817/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

85 Hartington Road Brighton BN2 3LS

Ward

Hanover And Elm Grove

Name & Address of Licence Holder			
Mr & Mrs Digby Stephenson, 110 Parsonage Road Henfield BN5 9HZ			
IVII & IVII'S DIGDY Stephenson, TTO Paisonage Road Herineid BNS 9HZ			
Name & Address of Person Managing			
G4 Lets, 2 Hythe Road Brighton BN1 6JS			
C 1 2010, 2 Tryllio Troud Brighton Brit 000			
Property Description			
Short description of licensed HMO (No of storeys, etc)			
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Store	ys = 3		
Number of Rooms Total Number of Rooms 7			
a) Sleeping b) Living Rooms			
Number of Self Contained Flats: 0 Number of Non	Self Cont Flats:	0	
Number of Self Sofitained Flats.	oen cont. I lats.	U	
Shared Amenities Number Description			
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date: 12/12/2016 Duration of lice	cence:	28/06/2021	
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
Households 6 Persons 6			
Information referred to a residential property tribunal or Lands Tribu	unal:		
None			
Decision of Tribunal Referen	ce number		
Summary of conditions of license			

Summary of conditions of licence



### Licence No.

#### 2016/03838/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

51 Livingstone Road Hove BN3 3WN

Coldemid

		vvaru	Goldsiilid
Name & Address of Licen			
Mr Simeon Bowes, 17 Montpe	lier Road Brighton BN1 2LC	λ	
Name & Address of Perso			
Cambridge Brand Vaughan Lt	d, T/a Brand Vaughan 110 S	St Georges Road Brighton BN2	1EA
Property Description			
Short description of license	d HMO (No of storeys, etc	)	
Property Type = SHARED HO	USE, No of Units = 1, Occu	pancy = 5, No of Storeys = 4	
Number of Rooms	Total Number of R	ooms 5	
a) Sleeping 5			
a) Sieeping	b) Living	g Rooms 1	
Number of Self Contained Fl	lats: 0	Number of Non Self Con	t. Flats: 1
01	N. alama Barata	o	
Shared Amenities  a) Kitchen	Number Descript	tion	
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	19/12/2016	Duration of licence:	29/06/2021
Johnnencement date.	19/12/2010	Duration of ficerice.	29/00/2021
Maximum number of person	s or households permitte	d to occupy HMO under condi	tions of licence:
Households 5	Persons 5		
nousenoius 5	reisons 5		
Information referred to a	residential prope <u>rty trib</u>	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference numb	per
	HMO - Fire Mandatory con	nds, HMO - Furniture Mandatory	

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03840/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

16 Gladstone Place Brighton BN2 3QD

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder		
Ms Linda Brand, 2 Olive Hous	e Hurstwood Road Hurs	twood TN22 4DB	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of license		•	
Property Type = SHARED HO	USE, No of Units = 1, O	ccupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number o	f Rooms 7	
a) Sleeping 6	b) Li	ving Rooms 1	
,	,		
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number Desc	ription	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	3		
Licence Details			
Commencement date:	17/11/2016	Duration of licence:	08/07/2021
Maximum number of person	s or households perm	itted to occupy HMO under conditions of	licence:
		¬	
Households 6	Persons 6		
Information referred to a	residential property	tribunal or Lands Tribunal:	
None	residential property	tribunar of Lands Tribunal.	
Decision of Tribunal		Reference number	
Summary of conditions of lie		O - Fire Mandatory conds, HMO - Furniture N	Mandatory

HMO - Elec Mandatory conds, HMO - Fire Locks, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Bathroom 4, HMO - Licensing Kitchen 6, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03843/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

68 Wilbury Road Hove BN3 3PA

Ward

Goldsmid

Decision of Tribunal	Reference number	
None	property tribunal of Editus Tribunal.	
Information referred to a residential	property tribunal or Lands Tribunal:	
Households 12 Persons	12	
Maximum number of persons or housel	holds permitted to occupy HMO under conditions of	licence:
Commencement date: 17/0	01/2017 Duration of licence:	04/07/2021
Licence Details		
c) W.C.s		
b) Bathrooms/Showers 5		
a) Kitchen 2	· 	
Shared Amenities Number	Description	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	1
a) Sleeping	b) Living Rooms	
	Il Number of Rooms 7	
•	Units = 1, Occupancy = 12, No of Storeys = 3	
Short description of licensed HMO (No	of storevs. etc)	1111
Property Description		
,		
Name & Address of Person Managin	ng	
Mr Leslie Barber, 241 Kingsway Hove BN3	3 4HE	
Name & Address of Licence Holder		



#### Licence No.

#### 2016/03845/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

34 Viaduct Road Brighton BN1 4ND

Ward

St. Peter's And North Laine

Name & Address of Licence	e Holder	
Mr Maurice Kifford, 3 Princes Sq	uare Hove BN3 4GE	
Name & Address of Person	Managing	
,		
Property Description		
Short description of licensed h	HMO (No of storeys, etc)	
Property Type = SHARED HOUS	SE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 5	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flat	ts: 0 Number of Non Self Cont. F	lats: 1
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	1	
c) W.C.s	1	
Licence Details		
_		
Commencement date:	16/01/2017 Duration of licence:	02/07/2021
Maximum number of persons	or households permitted to occupy HMO under condition	ns of licence:
Households 5 F	Persons 5	
Information referred to a res	sidential property tribunal or Lands Tribunal:	
None		
None Decision of Tribunal	Reference number	



#### Licence No.

#### 2016/03848/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

57 Bernard Road Brighton BN2 3ER

Ward

Hanover And Elm Grove

Name & Address of Licence	Holder		_
Ms Samantha Kemp, Cranstones		R31 5 IH	
ivis Samantha Nemp, Granstones	Clatiles Aberdeelisille A	DO 1 3011	
Name & Address of Person	Managing		
G4 Lets, 2 Hythe Road Brighton E			
, , ,			
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Occupa	ancy = 7, No of Storeys = 3	
N	Tatal No. 10 15		
Number of Rooms	Total Number of Roo	oms 7	
a) Sleeping	b) Living F	Rooms	
Number of Self Contained Flats	0	Number of Non Self Cont. Flat	ts: 0
	Number Description	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	21/11/2016	Duration of licence:	28/06/2021
Commencement date.	21/11/2016	Duration of licence:	26/06/2021
Maximum number of persons o	r households permitted	to occupy HMO under conditions	of licence:
Households 7 P	ersons 7		
Information referred to a res	idential property tribu	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence



#### Licence No.

#### 2016/03850/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

12 Wakefield Road Brighton BN2 3FP

Ward

St. Peter's And North Laine

Name & Address of Licence Holder
Mr Reinhardt Dirk Slabbert, Hazel Cottage Warren Road Woodingdean Brighton BN2 6DA
Name & Address of Person Managing
,
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 4
Number of Rooms Total Number of Rooms 8
a) Sleeping b) Living Rooms
N -1
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
Shared Amenities Number Description
a) Kitchen
b) Bathrooms/Showers
c) W.C.s
Licence Details
Commencement date: 16/01/2017 Duration of licence: 03/07/2021
Duration of incence.
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Households 6 Persons 6
Information referred to a residential property tribunal or Lands Tribunal:
None
Decision of Tribunal Reference number
Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 6, HMO - Fire Doors 4, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Ventilation 3, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03853/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

6 Seville Street Brighton BN2 3AR

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder			
Ms Laura Dwyer-Smith, 26 Ho		a RN3 6DT		
ivis Laura Dwyer-Smith, 20 mg	ve Faik Way Hove	E DIAO OL I		
Name & Address of Perso	on Managing			
rtamo a rtaarooo or r orot	in managing			
,				
Property Description				
Short description of license	d HMO (No of sto	reys, etc)		
Property Type = SHARED HO	USE. No of Units	= 1. Occupan	cv = 5. No of Storevs = 3	
-1-3 71-			-, -,,	
Number of Rooms	Total Num	nber of Room	ns 5	
a) Sleeping		b) Living Ro	oms	
Number of Self Contained F	lats:	0	Number of Non Self Cont. Flats:	1
			_	
Shared Amenities	Number	Description		
a) Kitchen	1			
b) Bathrooms/Showers	1			
c) W.C.s	2			
Licence Details				
Licence Details				
Commencement date:	15/12/201	16	Duration of licence:	02/07/2021
				_
Maximum number of person	s or households	permitted to	occupy HMO under conditions of I	icence:
Households 5	Persons	5		
Information referred to a	residential prop	perty tribun	al or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of lie	cence			
		cet, HMO - Fir	e Mandatory conds, HMO - Furniture	



#### Licence No.

#### 2016/03858/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

74A Lewes Road Brighton BN2 3HZ

Ward

St. Peter's And North Laine

Name & Address of Lice	nce Holder		
Ms Laura Dwyer-Smith, 26 H	ove Park Way Hove BN3 6	PT	
Name & Address of Pers	on Managing		
,			
Property Description			
Short description of license	ed HMO (No of storevs. et	(c)	
·		cupancy = 7, No of Storeys = 5	
Troporty Type Of Witteb Tit	7, 000	supurity 1, 110 of Cloreys 0	
Number of Rooms	Total Number of	Rooms 7	
a) Sleeping	b) Livii	ng Rooms	
Number of Self Contained F	Flats: 0	Number of Non Self Cont. Fla	ts: 1
01 14 14		44	
Shared Amenities	Number Descri	ption	
a) Kitchen	2	ption	
		ption	
a) Kitchen b) Bathrooms/Showers c) W.C.s	2 2	ption	
<ul><li>a) Kitchen</li><li>b) Bathrooms/Showers</li></ul>	2 2	ption	
a) Kitchen b) Bathrooms/Showers c) W.C.s	2 2	Duration of licence:	02/07/2021
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:	2 2 2 2	Duration of licence:	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:	2 2 2 2		
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:	2 2 2 2	Duration of licence:	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of person Households 7	2 2 2 2 05/05/2017  ns or households permitted Persons 7	Duration of licence: ed to occupy HMO under conditions	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of person Households 7	2 2 2 2 05/05/2017  ns or households permitted Persons 7	Duration of licence:	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of person Households 7  Information referred to a	2 2 2 2 05/05/2017  ns or households permitted Persons 7	Duration of licence: ed to occupy HMO under conditions	



#### Licence No.

#### 2016/03868/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

34 Dudley Road Brighton BN1 7GN

Ward

Hollingdean And Stanmer

Name & Address of Licen	ce Holder	
Ms Laura Dwyer-Smith, 26 Ho	ve Park Way Hove BN3 6PT	
Name & Address of Perso	n Managing	
,		
Property Description		
Short description of license	d HMO (No of storeys, etc)	
-	USE, No of Units = 6, Occupancy = 6, No of Storey	vs = 3
Troperty Type – STIAINED TIO	OSE, NO OF STITES – O, Occupancy – O, NO OF Stores	ys – 5
Number of Rooms	Total Number of Rooms 7	
a) Sleeping	b) Living Rooms	
, , , , , , , , , , , , , , , , , , , ,	, ,	
Number of Self Contained Fl	ats: 0 Number of Non	Self Cont. Flats:
Number of Self Contained Fi	ats: 0 Number of Non-	Sell Cont. Flats:
01	N. akaran Barat Car	
Shared Amenities	Number Description	
a) Kitchen     b) Bathrooms/Showers	1	
c) W.C.s	2	
c) w.o.s		
Licence Details		
Commencement date:	14/03/2017 Duration of lic	cence: 02/07/2021
Maximum number of person	s or households permitted to occupy HMO und	er conditions of licence:
Households 6	Persons 6	
Information referred to a	residential property tribunal or Lands Tribu	ınal:
None		
Decision of Tribunal	Referen	ce number
Summary of conditions of lie	ence	



#### Licence No.

#### 2016/03878/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

165 Upper Lewes Road Brighton BN2 3FB

Ward

St. Peter's And North Laine

Name & Address of Licence Holder			
Mrs J Simmons, Penleat House Altarnum Launceston Cornwall PL15 7RJ			
Name & Address of Person Managing			
Home Leasing Brighton Ltd, 18 Hyde Gardens Eastbourne BN21 4PT			
Dronauty Docarintian			
Property Description Short description of licensed HMO (No of storeys, etc)			
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3			
Property Type – SHARED HOUSE, NO of Office – 1, Occupancy – 5, No of Storeys – 3			
Number of Rooms Total Number of Rooms 6			
a) Sleeping b) Living Rooms			
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	s: 0		
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s			
Licence Details			
Commencement date: 01/03/2017 Duration of licence:	02/07/2021		
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
Households 5 Persons 5			
Information referred to a residential property tribunal or Lands Tribunal:			
None			
Decision of Tribunal Reference number			
Summary of conditions of licence			

Fire doors, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - General 1, HMO - General 6, HMO - General 7, HMO - General Electrical 1, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Kitchen sockets, WC, edges to work tops., loft insulation, seal to sink, shower



#### Licence No.

#### 2016/03883/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 77 Bevendean Crescent Brighton BN2 4RE

Ward

Moulsecoomb And Bevendean

Name & Address of Licen	ce Holder		
Mr Paul Cousins, Flat 2 8 Chic		RN2 1EG	
IVII 1 aui Cousilis, 1 lat 2 o Chic	nester remade brighton i	SIVE II G	
Name & Address of Perso	n Managing		
MTM Property Services Ltd, 10	<u> </u>	n BN2 4AE	
Property Description			
Short description of licensed	l HMO (No of storeys, e	tc)	
Property Type = SHARED HO	USE, No of Units = 1, Oc	cupancy = 5, No of Storeys = 3	
		_	
Number of Rooms	Total Number of		
a) Sleeping 5	b) Livi	ng Rooms 1	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Flats	s: 1
Shared Amenities	Number Descr	iption	
a) Kitchen b) Bathrooms/Showers	1 2		
c) W.C.s	2		
Licence Details			
Commencement date:	12/09/2016	Duration of licence:	12/07/2021
Commencement date.	12/03/2010	Burution of ficence.	12/01/2021
Maximum number of persons	s or households permit	ted to occupy HMO under conditions o	of licence:
Households 5	Persons 5		
Information referred to a r	residential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	atory conds, HMO - Fire D MO - Gas Mandatory con	Doors 8, HMO - Fire Mandatory conds, HI ds, HMO - Property Chges Mandatory co	

Property Maint Mandatory conds, HMO - Repairs Floors 1, HMO - RubbishRecyc Mandatory conds, HMO -Tenant Agrmnt Mandatory conds, Management / Repairs



#### Licence No.

#### 2016/03886/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

12 Whippingham Road Brighton BN2 3PG

Ward

Hanover And Elm Grove

Name & Address of Licence	Holder		
Mr Michael Buroni, 12 Whippingh		3PG	
Name & Address of Person	Managing		
,			
Duamanty Dagarintian			
Property Description  Short description of licensed F	IMO (No of storays at	<u>^\</u>	
Property Type = SHARED HOUS	-		
Froperty Type – SHARED HOUS	ie, No or offits = 1, occ	upancy – 0, NO of Stoleys – 3	
Number of Rooms	Total Number of F	Rooms	
a) Sleeping	b) Livin	g Rooms	
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Descrip	otion	
Licence Details			
Commencement date:	28/10/2016	Duration of licence:	24/07/2021
Maximum number of persons of	or households permitte	ed to occupy HMO under conditions	of licence:
Households F	Persons 6		
Information referred to a res	sidential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence



#### Licence No.

#### 2016/03887/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

19 Aberdeen Road Brighton BN2 3JA

Ward

St. Peter's And North Laine

Name & Address of Licence Holder
Mr Patrick Williams, 68 Foley Road Claygate Surrey KT10 0ND
Name & Address of Person Managing
John Hilton Estate Agents, 127 Lewes Road Brighton BN2 3LG
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 5, Occupancy = 5, No of Storeys = 3
Number of Rooms Total Number of Rooms 6
a) Sleeping b) Living Rooms
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1
Shared Amenities Number Description
Shared Amenities Number Description  a) Kitchen 1
a) Kitchen 1
a) Kitchen b) Bathrooms/Showers c) W.C.s  1 c) W.C.s
a) Kitchen 1 b) Bathrooms/Showers 1
a) Kitchen b) Bathrooms/Showers c) W.C.s  1 c) W.C.s
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  22/12/2016  Duration of licence: 18/07/2021
a) Kitchen b) Bathrooms/Showers c) W.C.s 2  Licence Details
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  22/12/2016  Duration of licence: 18/07/2021
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  22/12/2016  Duration of licence:  18/07/2021  Maximum number of persons or households permitted to occupy HMO under conditions of licence:
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  22/12/2016  Duration of licence:  18/07/2021  Maximum number of persons or households permitted to occupy HMO under conditions of licence:
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  22/12/2016  Duration of licence: 18/07/2021  Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households  5  Persons 5
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  22/12/2016  Duration of licence: 18/07/2021  Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households  Persons 5  Information referred to a residential property tribunal or Lands Tribunal:



#### Licence No.

#### 2016/03889/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

31 Riley Road Brighton BN2 4AG

Ward

Moulsecoomb And Bevendean

Name & Address of Licer		
Mr Patrick Williams, 68 Foley	Road Claygate Surrey KT10 0ND	
Nama 9 Address of Dava	on Managina	
Name & Address of Pers		
John Hilton Ltd, 100 Church S	street Brighton BN1 10J	
Property Description		
Short description of license	ed HMO (No of storeys, etc)	
Property Type = SHARED HC	DUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping	b) Living Rooms	
		T
Number of Self Contained F	Flats: 0 Number of Non Self Cont. F	Flats: 1
<b>.</b>		
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2 2	
c) W.C.s		
Licence Details		
Commencement date:	23/01/2017 Duration of licence:	24/07/2021
Commencement date.	23/01/2017 Duration of ficence.	24/07/2021
Maximum number of persor	ns or households permitted to occupy HMO under condition	ns of licence:
	_	
Households 6	Persons 6	
Households 6	Persons 6	
	residential property tribunal or Lands Tribunal:	
Information referred to a		



#### Licence No.

#### 2016/03896/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 47 Ditchling Road Brighton BN1 4SB

Ward

St. Peter's And North Laine

Name & Address of Licence	Holder	
Mrs Patricia Camping, 69 Dyke Ro	pad Avenue Hove BN3 6DA	
Name & Address of Person I	Managing	
,		
Property Description		
Short description of licensed Hi	MO (No of storeys, etc)	
Property Type = SHARED HOUSE	E, No of Units = 1, Occupancy = 5, No of Storeys = 4	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flats	Number of Non Self Cont. Flats	s: <u> </u>
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s	Umber Description  1 1 2	
Licence Details		
1		
Commencement date:	23/12/2016 Duration of licence:	06/07/2021
Maximum number of persons of	households permitted to occupy HMO under conditions o	f licence:
Households 5 Pe	ersons 5	
	dential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
	2	

Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Drainage 11, HMO - Repairs Roofs/Chimneys 1, HMO - Repairs Stairs 3, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03906/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

33 Brading Road Brighton BN2 3PE

Ward

Hanover And Elm Grove

Name & Address of Licence Holder	
Mrs Samantha Kemp, Cranstones Crathes Aberdeenshire AB31 5JH	
Name & Address of Person Managing	
G4 Lets, 2 Hythe Road Brighton BN1 6JS	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms Total Number of Rooms 6	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	: 0
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers	
c) W.C.s	
Licence Details	
Licence Details	
Commencement date: 12/12/2016 Duration of licence:	29/06/2021
Maximum number of persons or households permitted to occupy HMO under conditions of	flicence:
Households 5 Persons 5	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of license	

Summary of conditions of licence



#### Licence No.

#### 2016/03914/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

32 Preston Road Brighton BN1 4QF

Ward

Preston Park

Name & Address of Licence Holder	
Miss Shula Rich, 52 Kingsway Court First Avenue Hove BN3 2LQ	
Name & Address of Person Managing	
John Hilton Estate Agents, 127 Lewes Road Brighton BN2 3LG	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 9, No of Storeys = 3	
Number of Rooms Total Number of Rooms 10	
a) Sleeping 9 b) Living Rooms 1	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	s: 1
Shared Amenities Number Description	
a) Kitchen 2	
b) Bathrooms/Showers 3	
c) W.C.s	
Licence Details	
Commencement date: 16/11/2016 Duration of licence:	06/07/2021
Maximum number of persons or households permitted to occupy HMO under conditions of	of licence:
Households 9 Persons 9	
Information referred to a residential property tribunal or Lands Tribunal:  None	
Information referred to a residential property tribunal or Lands Tribunal:	



#### Licence No.

#### 2016/03916/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

2 Nesbitt Road Brighton BN2 4BL

Ward

Moulsecoomb And Bevendean

		Train a modification	71110 20101100011
Name & Address of Licer	ice Holder		
Mr David Mrs Sue Humphrey	, Clock Investments Clock	Cottage Itchen Abbas Winchester Hant	ts SO21 1BQ
Name & Address of Person	on Managing		
G4 Lets, 2 Hythe Road Bright	on BN1 6JS		
Property Description			
Short description of license	d HMO (No of storevs, etc	2)	
Property Type = SHARED HC	-		
Number of Rooms	Total Number of F	Rooms 10	
a) Sleeping	b) Livin	g Rooms	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Descrip	otion	
Licence Details			
Commencement date:	09/03/2017	Duration of licence:	11/07/2021
Maximum number of persor	s or households permitte	ed to occupy HMO under conditions	of licence:
Households 8	Persons 8		
Information referred to a	residential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
0			

Summary of conditions of licence



#### Licence No.

#### 2016/03919/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

22 Preston Road Brighton BN1 4QF

Ward

Preston Park

Name & Address of Licence	Holder		
Miss Shula Rich, 52 Kingsway C		RN3 2LO	
Wild Chala Horr, 62 Hingoway C	Sart i not / Worldo i lovo L	7.10 22 4	
Name & Address of Person	Managing		
John Hilton Estate Agents, 127 L		2 3LG	
	<del></del>		
Property Description			
Short description of licensed H	IMO (No of storeys, etc	·)	
Property Type = SHARED HOUS	SE, No of Units = 1, Occu	ipancy = 5, No of Storeys = 4	
Number of Rooms	Total Number of R	ooms 6	
a) Sleeping 5	b) Living	g Rooms 1	
Number of Self Contained Flat	s: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number Descrip	tion	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	2		
Licence Details			
Commencement date:	16/11/2016	<b>Duration of licence:</b>	06/07/2021
Maximum number of persons	or households permitte	d to occupy HMO under conditions	of licence:
•	·	.,	
Households 5 F	Persons 5		
Information referred to a res	sidential property tril	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	ry conds, HMO - Fire Ma	andatory conds, HMO - Furniture Mand andatory conds, HMO - Property Maint	



#### Licence No.

#### 2016/03920/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 54 Newmarket Road Brighton BN2 3QF

Ward

Hanover And Flm Grove

	VValu	Tianovci And	LIII GIOVC
Name & Address of Licence Hold	er		
Ms Natalie Nash, 103 Calle Sirio Los Na	aranjos Nuera Andalucia Marbella,	Malaga Spain 29660	
Name & Address of Person Mana	ging		
MTM Property Services Ltd, Ursa Court	108A Lewes Road Brighton East	t Sussex BN2 4AE	
Property Description	la of atomore ato)		
Short description of licensed HMO (N			
Property Type = SHARED HOUSE, No	of Units = 6, Occupancy = 6, No of	f Storeys = 4	
Number of Rooms To	otal Number of Rooms 7		
a) Sleeping 6	b) Living Rooms	1	
Number of Self Contained Flats:	0 Number o	of Non Self Cont. Flats:	1
Shared Amenities Number	er Description		
a) Kitchen 2			
b) Bathrooms/Showers 2 c) W.C.s 2			
c) W.C.s			
Licence Details			
Commencement date:	02/11/2016 <b>Duratio</b>	n of licence:	07/07/2021
Maximum number of persons or hous	seholds permitted to occupy HM	O under conditions of l	icence:
Households 6 Person	s 6		
nousellolus 0 Feisoli	• 0		
Information referred to a resident	ial property tribunal or Lands	s Tribunal:	
None			
Decision of Tribunal	R	eference number	
Summary of conditions of licence			
HMO - Elec Mandatory conds, HMO - F	re Mandatory conds, HMO - Furni	ture Mandatory conds, H	MO - Gas

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03921/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

13 Beaconsfield Road Brighton BN1 4QH

Ward

Preston Park

Name & Address of Licen	oo Holdor		
		DNIG GL G	
Miss Shula Rich, 52 Kingsway	Court First Avenue Hove	BN3 2LQ	
Name & Address of Perso	n Managing		
		10.21.0	
John Hilton Estate Agents, 127	Lewes Road Brighton Br	NZ 3LG	
Property Description			
Short description of licensed	HMO (No of storous of	c)	
•		•	
Property Type = SHARED HO	JSE, NO of Units = 1, Occ	upancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of I	Rooms 8	
a) Sleeping 7	b) Livir	g Rooms 1	
a, 6.66pg	2, <b>-</b>	g . teee	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Flats	s: 1
Number of Sen Contained in	<b>113.</b>	Number of Non-Sen Cont. Flats	). <u> </u>
Shared Amenities	Number Descri	otion	
a) Kitchen	2 Descri	otion	
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
	47/44/0040	<b>-</b> [	00/07/0004
Commencement date:	17/11/2016	Duration of licence:	06/07/2021
Maximum number of persons	s or households permitt	ed to occupy HMO under conditions o	of licence:
	_		
Households 7	Persons 7		
Information referred to a r	residential property tr	bunal or I ands Tribunal:	
None	estachtial property tri	bundi of Eurids Tribunal.	
Decision of Tribunal		Reference number	
		Neierence number	
	HMO - Fire Blanket, HMC	) - Fire Doors 4, HMO - Fire Mandatory o	



#### Licence No.

#### 2016/03922/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

30 Upper Lewes Road Brighton BN2 3FH

Ward

St. Peter's And North Laine

Name & Address of Licence	e Holder
	ottage Bramble Mead Balcombe RH17 6HU
Name & Address of Persor	Managing
Home Leasing Brighton Ltd, 18	Hyde Gardens Eastbourne BN21 4PT
Property Description	
Short description of licensed	
Property Type = SHARED HOL	SE, No of Units = 1, Occupancy = 5, No of Storeys = 3
Number of Rooms	Total Number of Rooms 6
a) Sleeping	b) Living Rooms
Number of Self Contained Fla	s: 0 Number of Non Self Cont. Flats: 1
Shared Amenities	Number Description
a) Kitchen	1
b) Bathrooms/Showers c) W.C.s	1 2
c) vv.c.s	
Licence Details	
Commencement date:	30/01/2017 <b>Duration of licence:</b> 10/07/2021
Maximum number of persons	or households permitted to occupy HMO under conditions of licence:
Households 5	Persons 5
TIOUS J	
Information referred to a re	sidential property tribunal or Lands Tribunal:
Information referred to a re	sidential property tribunal or Lands Tribunal:
	sidential property tribunal or Lands Tribunal:  Reference number

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management items



#### Licence No.

#### 2016/03925/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

11 Balfour Road Brighton BN1 6NA

Ward

Withdean

Name & Address of Licen	ce Holder	
Mr J E Pietraszko, 35 Woodruf		
Wil J L i letraszko, 35 Woodrui	Avenue Hove BNS 01 11	
Name & Address of Perso	n Managing	
,		
Property Description		
Short description of licensed	I HMO (No of storeys, etc)	
Property Type = BEDSIT, No o	of Units = 5, Occupancy = 8, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 4	
a) Sleeping	b) Living Rooms	
Number of Self Contained Fla	ats: 0 Number of Non Self Con	nt. Flats: 1
Shared Amenities	Number Description	
a) Kitchen	4	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
0	40/00/0047	00/07/0004
Commencement date:	10/03/2017 Duration of licence:	03/07/2021
Maximum number of persons	s or households permitted to occupy HMO under condi	itions of licence:
	_	
Households 8	Persons 8	
Information referred to a r	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference numb	ber
Summary of conditions of lic	conco	
Summary of Conditions of IIC	FIICE	

Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2016/03926/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

27 Caledonian Road Brighton BN2 3HX

Ward

St. Peter's And North Laine

Name & Address of Licence	e Holder	
Mr Mrs Martin Shelley Tayler, 1	18 Sheering Mill Lane Sawbridgeworth Hertfordshire CM21 9ND	)
Name & Address of Person	Managing	
Ms Jo-Ann Stafford, John Hilton	Ltd 127 Lewes Road Brighton BN2 3LG	
Property Description		
Short description of licensed I	HMO (No of storeys, etc)	
Property Type = SHARED HOUS	SE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flat	s: 0 Number of Non Self Cont. Flats	s: 1
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	1	
c) W.C.s	2	
Licence Details		
Commencement date:	14/02/2017 Duration of licence:	27/06/2021
Maximum number of persons	or households permitted to occupy HMO under conditions o	of licence:
Households 5 F	Persons 5	
Information referred to a re	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lice	nce	11110

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



## Licence No.

#### 2016/03934/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

56 The Drive Hove BN3 3PD

Ward

Goldsmid

Name & Address of Lice	nce Holder		
Mr Roger Kay, 87 Church Ro	ad Hove East Sussex BN3	2BB	
Name & Address of Pers	on Managing		
,			
Property Description			
Short description of license	ad HMO (No of storeys, et	c)	
Property Type = BEDSIT, No	•	•	
Property Type - BEDSIT, No	of Offics – 7, Occupancy –	7, NO OI Stoleys - 5	
Number of Rooms	Total Number of F	Rooms 7	
a) Sleeping 7	b) Livir	g Rooms 7	
Number of Self Contained F	Flats: 0	Number of Non Self Cont. Fla	ats: 1
Shared Amenities	Number Descri	otion	
a) Kitchen	7		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	07/10/2016	Duration of licence:	04/07/2021
Maximum number of perso	ns or households permitte	ed to occupy HMO under conditions	s of licence:
Households 7	Persons 7		
7	7		
Information referred to a	residential property tr	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Furniture Mandatory conds, F	latory conds, HMO - Fire Bl IMO - Property Chges Man	anket, HMO - Fire Mandatory conds, I datory conds, HMO - Property Maint N	Mandatory

Repairs



#### Licence No.

#### 2016/03941/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

51 Park Crescent Terrace Brighton BN2 3HE

St Deter's And North Laine

			vvaru	St. Peters And	North Laine
Name & Address of Licen					
Mr & Mrs Neil & Felicity Weisf	eld, The Saddle	ery 1A Shenleybı	ury Farm Cottage	es Shenleybury Shen	ley WD7
Name & Address of Perso	on Managing				
Arington Ltd, 277 London Roa	d Burgess Hill	RH15 9QU			
Property Description					
Short description of license	d HMO (No of	storeys, etc)			
Property Type = SHARED HO	USE, No of Un	nits = 1, Occupan	cy = 5, No of Sto	reys = 4	
Number of Rooms	Total N	lumber of Room	ns 6		
a) Sleeping	Total I	b) Living Ro			
a) Sieeping		b) Living No	OIIIS		
Number of Self Contained F	lats:	0	Number of No	on Self Cont. Flats:	1
			1		
Shared Amenities	Number	Description			
a) Kitchen	1				
b) Bathrooms/Showers	1				
c) W.C.s	2				
Licence Details					
Commencement date:	22/05/	/2017	Duration of	licence:	03/07/2021
Maximum number of person	s or househo	lds permitted to	occupy HMO u	nder conditions of I	icence:
Households 5	Persons	5			
Information referred to a	residential n	roperty tribun	al or Lands Tr	ihunal <sup>.</sup>	
None		- porty thisum	un or Darrage II		
Decision of Tribunal			Refer	ence number	
Summary of conditions of li	cence		LIMO Francistana	Manadakan canada 111	40. 0

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/03952/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

4 Pevensey Road Brighton BN2 3AG

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder			
Mr Laurence Venus, 6 Rother	Road Seaford BN2	25 4HT		
Name & Address of Perso	n Managing			
Kendrick Property Services Ltd	d, 10-12 Lewes Ro	ad Brighton E	BN2 3HP	
Property Description				
Short description of license	d HMO (No of sto	reys, etc)		
Property Type = SHARED HO	USE, No of Units =	= 1, Occupano	cy = 5, No of Storeys = 3	
Number of Rooms	Total Num	ber of Room		
	i Otai Num			
a) Sleeping 5		b) Living Roo	oms 1	
				Γ
Number of Self Contained Fi	ats:	0	Number of Non Self Cont. Flats:	1
Shared Amenities		Description		
a) Kitchen b) Bathrooms/Showers	2			
c) W.C.s	2			
-,				
Licence Details				
	00/44/004	•	<b>5</b>	00/00/0004
Commencement date:	28/11/201	6	Duration of licence:	09/08/2021
Maximum number of person	s or households	permitted to	occupy HMO under conditions of li	cence:
Households 5	Persons	5		
		<u> </u>		
Information referred to a	residential prop	erty tribuna	al or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of lie HMO - Elec Mandatory conds,		atory conds, I	HMO - Furniture Mandatory conds, HM	MO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Bathroom 14, HMO - Repairs Bathroom 17, HMO - Repairs Kitchen 5, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs



#### Licence No.

#### 2016/03954/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

15 Trinity Street Brighton BN2 3HN

Ward

St. Peter's And North Laine

Name & Address of Licen	nce Holder			
Mr Laurence Venus, 6 Rother		N25 4HT		
Name & Address of Perso	on Managing			
Kendrick Property Services Ltd	d, 10-12 Lewes F	Road Brighton	BN2 3HP	
Property Description				
Short description of license	·			
Property Type = SHARED HO	USE, No of Units	s = 1, Occupar	ncy = 5, No of Storeys = 3	
Number of Rooms	Total Nu	mber of Roon	ns 6	
a) Sleeping 5		b) Living Ro	ooms 1	
, . <b>.</b>		, •		
Number of Self Contained F	lats:	0	Number of Non Self Cont. Flats:	1
			_	
Shared Amenities	Number	Description	1	
a) Kitchen	1			
b) Bathrooms/Showers c) W.C.s	2			
C) VV.C.S	2			
Licence Details				
_				
Commencement date:	28/11/20	016	Duration of licence:	14/08/2021
Maximum number of person	s or households	s permitted to	occupy HMO under conditions of l	icence:
Households 5	Persons	5		
nousellolus	reisons	5		
Information referred to a	residential pro	perty tribun	al or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of lie Fire Alarm, HMO - Elec Manda		O - Fire Manda	tory conds, HMO - Furniture Mandator	ry conds,

Fire Alarm, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Kitchen 4, HMO - Repairs Windows 3, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs



## Licence No.

#### 2016/03955/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

15 Upper Hollingdean Road Brighton BN1 7GA

Ward

Hollingdean And Stanmer

Name & Address of Licen	ice Holder		
Mr Laurence Venus, 6 Rother	Road Seaford BN25 4HT		
Name & Address of Perso	on Managing		
Kendrick Property Services Ltd	d, 10-12 Lewes Road Brig	hton BN2 3HP	
Property Description			
Short description of license	d HMO (No of storeys, e	tc)	
Property Type = SHARED HO	USE, No of Units = 1, Oct	cupancy = 6, No of Storeys = 4	
Number of Rooms	Total Number of	Rooms 7	
a) Sleeping 6	b) Livii	ng Rooms 1	
			Γ
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number Descri	ption	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	28/11/2016	Duration of licence:	16/08/2021
Maximum number of nersen	a ar hausahalda narmiti	to a conjunct LIMO under conditions of li	
maximum number of person	s or nousenous permit	ted to occupy HMO under conditions of li	cence.
Households 6	Persons 6		
Information referred to a	residential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
conds, HMO - Furniture Mand	, HMO - Fire Alarm Syster atory conds, HMO - Gas N	ns 7, HMO - Fire Blanket, HMO - Fire Manda Mandatory conds, HMO - Property Chges Mandatory Collings 1, HMO - Publich Pacy of Mandatory	andatory

conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs



#### Licence No.

#### 2016/03956/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

20 Viaduct Road Brighton BN1 4NB

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
Mrs F Glare, 23 Cissbury Cres	scent Saltdean BN2 8PN		
Name & Address of Perso	on Managing		
Kendrick Property Services Ltd	d, Carlton House 28-29 C	arlton Terrace Brighton BN41 1UR	
Property Description			
Short description of license	-		
Property Type = SHARED HO	USE, No of Units = 1, Oc	cupancy = 5, No of Storeys = 4	
Number of Rooms	Total Number of	Rooms 6	
a) Sleeping	b) Livi	ng Rooms	
	2, 2		
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Fla	ts: 1
	, and a		1
Shared Amenities	Number Descr	iption	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	2		
Licence Details			
Licence Details			
Commencement date:	04/01/2017	<b>Duration of licence:</b>	02/07/2021
Maximum number of nercen	a or households normit	ted to occupy HMO under conditions	of liganos
maximum number of person	s or nousenoids permit	ted to occupy rimo under conditions	of ficerice.
Households 5	Persons 5		
l		dhaan ah ah ah ah Talbana da	
	residential property ti	ribunal or Lands Tribunal:	
None		Defenence months	
Decision of Tribunal		Reference number	
	cence		

Extractor, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - General 1, HMO - General 6, HMO - General 7, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, IS, Self closers, Ventilation, basement detector



#### Licence No.

#### 2016/03957/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

36 Belton Road Brighton BN2 3RE

Ward

St. Peter's And North Laine

Name & Address of Licer	nce Holder		
Mr Laurence Venus, 6 Rother	Road Seaford BN25 4HT		
Name & Address of Person	on Managing		
Kendrick Property Services Lt	d, 10-12 Lewes Road Bright	on BN2 3HP	
Property Description			
Short description of license	d HMO (No of storeys, etc)		
Property Type = SHARED HC	OUSE, No of Units = 1, Occup	pancy = 5, No of Storeys = 3	
N	T. (1)	_	
Number of Rooms	Total Number of Ro		
a) Sleeping 5	b) Living	Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats	s: 1
Shared Amenities	Number Descript	ion	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Licence Details			
Commencement date:	28/11/2016	Duration of licence:	14/08/2021
		L	
Maximum number of persor	is or households permitted	to occupy HMO under conditions of	of licence:
Households 5	Persons 5		
Information referred to a	residential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	, HMO - Fire Mandatory cond	ds, HMO - Furniture Mandatory conds,	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Bathroom 3, HMO - Repairs Doors 2, HMO - Repairs Ventilation 3, HMO - Repairs Windows 3, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Heating, Management / Repairs, Other Fire Works



#### Licence No.

#### 2016/03958/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

74 Stanley Road Brighton BN1 4NH

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder			
Mr Laurence Venus, 6 Rother	Road Seaford BN25	5 4HT		
Name & Address of Perso	on Managing			
Kendrick Property Services Ltd	d, 10-12 Lewes Roa	ad Brighton E	BN2 3HP	
Property Description				
Short description of license	d HMO (No of store	eys, etc)		
Property Type = SHARED HO	USE, No of Units =	1, Occupan	cy = 5, No of Storeys = 3	
Number of Rooms	Total Numb	per of Room	s 6	
a) Sleeping 5	t	b) Living Ro	oms 1	
Number of Self Contained Fl	lats:	0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number D	Description		
a) Kitchen	1			
b) Bathrooms/Showers	1			
c) W.C.s	2			
Licence Details				
Liconoc Dotano				
Commencement date:	28/11/2016	6	Duration of licence:	08/08/2021
M				
Maximum number of person	s or households po	ermitted to	occupy HMO under conditions of li	cence:
Households 5	Persons 5	5		
Information referred to a	residential prope	erty tribuna	al or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of lie HMO - Elec Mandatory conds,		itory conds, l	HMO - Furniture Mandatory conds, HM	MO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Bathroom 14, HMO - Repairs Ceilings 3, HMO - Repairs Stairs 3, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs



#### Licence No.

#### 2016/03959/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

50 Rose Hill Close Brighton BN1 4HT

Ward

St. Peter's And North Laine

Name & Address of Licence	ce Holder	
Mrs F Glare, 23 Cissbury Creso		
<u> </u>		
Name & Address of Perso	n Managing	
Kendrick Property Services Ltd	, Carlton House 28-29 Carlton Terrace Brighton BN41 1UR	
Property Description		
Short description of licensed	HMO (No of storeys, etc)	
Property Type = SHARED HOL	JSE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping	b) Living Rooms	
u) olcoping	b) Living Rooms	
Number of Self Contained Fla	ats: 0 Number of Non Self Cont. Flats:	1
Number of Gen Contained Fig	Number of Non-Sen Sont. Flats.	
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Licence Details		
Commencement date:	18/01/2017 Duration of licence:	02/07/2021
Maximum number of nercens	or households permitted to occupy HMO under conditions of lic	20001
waxiiiluiii iluiiiber oi persons	or nouseholds permitted to occupy mile under conditions of its	cence.
Households 6	Persons 6	
lufa	anida akial ana angka kaibana langka Taibana la	
	esidential property tribunal or Lands Tribunal:	
None	Defendance would be	
Decision of Tribunal	Reference number	
Summary of conditions of lice Seed HMO - Fire Mandator	ence v conds HMO - Eurniture Mandatory conds HMO - Gas Mandatory c	conds

Elec cert, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - General 1, HMO - General 6, HMO - General Electrical 1, HMO - General Electrical 2, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Heating, IS, WHBs, self closer



#### Licence No.

#### 2016/03966/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

25 Egremont Place Brighton BN2 0GA

Ward

Queen's Park

Name & Address of Licence	Holder	
Mr Altan Halil, 4 Wurzburger Str 4		
Wil Altan Halli, 4 Wul2burger Sti 4	Defilit 10709	
Name & Address of Person N	Managing	
	lottingdean East Sussex BN2 7HY	
Lynne Woss, 7 Ot Aubyns Wedd IV	Ottingdedii Eddi Oddock Biya 7111	
Property Description		
Short description of licensed HI	MO (No of storeys, etc)	
Property Type = SHARED HOUSE	E, No of Units = 1, Occupancy = 5, No of Storeys = 4	
	-, c. c , c c c c c c c c c c	
Number of Rooms	Total Number of Rooms 5	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flats	Number of Non Self Cont. Flat	s: 1
Shared Amenities N	umber Description	
a) Kitchen	1	
b) Bathrooms/Showers	1	
c) W.C.s	2	
Licence Details		
Commencement date:	18/04/2017 Duration of licence:	07/08/2021
maximum number of persons of	r households permitted to occupy HMO under conditions	ot licence:
Households 5 Pe	ersons 5	
Information referred to a res	idential property tribunal or Lands Tribunal:	
Information referred to a resi	idential property tribunal or Lands Tribunal:	
	idential property tribunal or Lands Tribunal:  Reference number	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2016/03979/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 32 Upper Lewes Road Brighton BN2 3FH

Ward

St. Peter's And North Laine

Name & Address of Licence	ce Holder		
Mr Timothy Simmons, 17 Fore	Street Bampton Devon E	X16 9ND	
Name & Address of Perso	n Managing		
ı			
Duamanti / Daganintian			
Property Description	HMO (No of storous et	2)	
Short description of licensed			
Property Type = SHARED HOL	JSE, NO OF UNITS = 1, OCC	upancy = 5, No or Storeys = 3	
Number of Rooms	Total Number of F	Rooms 6	
a) Sleeping 5	b) Livin	ng Rooms 1	
Number of Self Contained Fla	nts: 0	Number of Non Self Cont. Flat	s: 1
Shared Amenities	Number Descrip	ption	
a) Kitchen	1		
b) Bathrooms/Showers c) W.C.s	1 2		
_			
Licence Details			
0	07/00/0040	Denotion of the case	00/07/0004
Commencement date:	27/09/2016	Duration of licence:	02/07/2021
Maximum number of persons	or households permitte	ed to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Tiousenoius 5	0		
Information referred to a re	esidential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic		ndo HMO. Euroituro Mandatory condo	HMO Coo

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs



#### Licence No.

#### 2016/03983/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 31 Upper Lewes Road Brighton BN2 3FH

Ward

St. Peter's And North Laine

Name & Address of Licen			
Mr Timothy Simmons, Crispin	House 17 Fore Street Ba	mpton Devon EX16 9ND	
Nama 8 Adduaga of Davas	n Managing		
Name & Address of Perso	on Managing		
1			
Property Description			
	d UMO (No of otorovo a	40)	
Short description of license		•	
Property Type = SHARED HO	USE, No of Units = 1, Oc	cupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 6	
a) Sleeping 5	h) Livi	ng Rooms 1	
a) 5.66pmg	J) 2		
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Flats:	1
Number of Sen Contained Fi	als:	Number of Non Self Cont. Flats:	I
Shared Amenities	Number Descr	intian	
a) Kitchen	1 Descr	iption	
b) Bathrooms/Showers	1		
c) W.C.s	2		
Licence Details			
Commencement date:	27/09/2016	Duration of licence:	02/07/2021
Commencement date.	27709/2010	Duration of ficence.	02/01/2021
Maximum number of person	s or households permit	ted to occupy HMO under conditions of l	cence:
		ted to occupy HMO under conditions of li	cence:
	s or households permit  Persons 5	ted to occupy HMO under conditions of l	icence:
Households 5	Persons 5		icence:
Households 5	Persons 5	ted to occupy HMO under conditions of li	icence:
Households 5	Persons 5		icence:
Households 5  Information referred to a None	Persons 5 residential property to	ribunal or Lands Tribunal:	icence:

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Other Fire Work



#### Licence No.

#### 2016/03986/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

145 Upper Lewes Road Brighton BN2 3FD

Ward

St. Peter's And North Laine

ame & Address of Licen	ce Holder		
Ir Timothy Simmons, Crispin	House 17 Fore Street Bamp	ton Tiverton Devon EX16 9ND	
ame & Address of Perso	on Managing		
roperty Description			
hort description of license	d HMO (No of storeys, etc)		
roperty Type = SHARED HO	USE, No of Units = 1, Occup	pancy = 5, No of Storeys = 3	
		_	
lumber of Rooms	Total Number of Ro		
) Sleeping 5	b) Living	Rooms 1	
lumber of Self Contained F	lats: 0	Number of Non Self Cont. Flats:	1
hared Amenities	Number Descripti	ion	
) Kitchen	1		
) Bathrooms/Showers ) W.C.s	2 2		
) vv.c.s			
icence Details			
ommencement date:	27/09/2016	Duration of licence:	02/07/2021
laximum number of person	s or households permitted	I to occupy HMO under conditions of I	icence:
	-		
louseholds 5	Persons 5		
oformation referred to a	residential property trib	unal or Lande Tribunal:	
one	residential property tribi	unai or Lands Inibunai.	
ecision of Tribunal		Reference number	
ecision of Fribulial		izererance number	
summary of conditions of li		No LIMO. Furniture Mandatan, canda LII	MO Coo
iviO - Elec iviandatory conds,	nivio - rire iviandatory cond	ds, HMO - Furniture Mandatory conds, HI	viO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire works, Other fire works



#### Licence No.

#### 2016/03988/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Ocean House 11 Regency Square Brighton BN1 2FG

Ward

Regency

Name & Address of Lice	nce Holder		
	oad Hove East Sussex BN3 1A	AF	
Name & Address of Pers	on Managing		
,			
<b>5</b>			
Property Description	ad LIMO (No of atomore ato)		
-	ed HMO (No of storeys, etc)		
Property Type = BEDSIT, No.	of Units = 19, Occupancy = 19	9, No of Storeys = 6	
Number of Rooms	Total Number of Roo	oms 21	
a) Sleeping	b) Living F	Rooms	
Number of Self Contained	Flats: 0	Number of Non Self Cont. Flat	s: 0
Shared Amenities	Number Description	on	
a) Kitchen			
b) Bathrooms/Showers c) W.C.s			
c) w.o.s			
Licence Details			
Commencement date:	07/12/2016	Duration of licence:	26/10/2020
Maximum number of perso	ns or households permitted	to occupy HMO under conditions	of licence:
Households 19	Persons 19		
Households 19	Persons 19		
Information referred to a	residential property tribu	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2016/03995/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

51 Bernard Road Brighton BN2 3ER

Ward

Hanover And Elm Grove

Name & Address of Licence Holder
Natalie Nash, 103 Calle Sirio Los Naranjos, Nuera Andalucia Marbella Malaga Spain 29660
Name & Address of Person Managing
MTM Property Services Ltd, 108A Lewes Road Brighton BN2 4AE
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3
Number of Rooms Total Number of Rooms 6
a) Sleeping b) Living Rooms 1
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1
Shared Amenities Number Description
a) Kitchen 1
b) Bathrooms/Showers 2 2 2 2
2
Licence Details
Commencement date: 04/10/2016 Duration of licence: 06/07/2021
Commencement date. 04/10/2010 Duration of licence. 00/07/2021
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Households 5 Persons 5
Information referred to a residential property tribunal or Lands Tribunal:
None
Decision of Tribunal Reference number
Summary of conditions of licence Fire Alarm, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Fire Test Certificates, HMO -

Fire Alarm, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Fire Test Certificates, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Electrics 11, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural Fire Works



#### Licence No.

#### 2016/04013/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

39 St Mary Magdalene Street Brighton BN2 3HU

Ward

St. Peter's And North Laine

Name & Address of Licence Holder		
Mr James Ford, The Mill Mill Lane Tonbrid	lge Kent TN12 8DB	
Name & Address of Person Managir	•	
Mr Dan Lyons, 74 Lewes Road Brighton Ea	ast Sussex BN2 3HZ	
Duamanti, Daganintian		
Property Description	of storous ats)	
Short description of licensed HMO (No	• • •	
Property Type = SHARED HOUSE, No of	Units = 1, Occupancy = 6, No of Storeys = 4	
Number of Rooms Tota	al Number of Rooms 8	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flat	s: 0
Shared Amenities Number	Description	
a) Kitchen b) Bathrooms/Showers		
c) W.C.s		
Licence Details		
Commencement date: 07/	10/2016 Duration of licence:	12/07/2021
<u> </u>		
Maximum number of persons or househ	holds permitted to occupy HMO under conditions	of licence:
Households 6 Persons	6	
	l property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/04014/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

51 Totland Road Brighton BN2 3EP

Ward

Hanover And Elm Grove

Name & Address of Licence	e Holder	
Mr James Ford, The Mill Mill La	ne Maidstone Road Tonbridge Kent TN12 8DB	
Name & Address of Persor	n Managing	
Mr Dan Lyons, T/a Brighton Acc	commodation Agency 74 Lewes Road Brighton East Sussex BN2 3HZ	
Property Description		
Short description of licensed	HMO (No of storeys, etc)	
Property Type = SHARED HOU	JSE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping	b) Living Rooms	
Number of Self Contained Fla	ts: 0 Number of Non Self Cont. Flats: 0	
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Commencement date:	01/11/2016 <b>Duration of licence:</b> 10/07/2021	
Maximum number of persons	or households permitted to occupy HMO under conditions of licence:	
maximum number of persons	or nouseholds permitted to occupy rimo under conditions of licence.	
Households 6	Persons 6	
Information referred to a re	Persons 6 esidential property tribunal or Lands Tribunal:	
Information referred to a re	esidential property tribunal or Lands Tribunal:	
Information referred to a re		

Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



## Licence No.

## 2016/04023/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

48 Viaduct Road Brighton BN1 4ND

Ward

St. Peter's And North Laine

N 0 A 1 1 C 1 1			
Name & Address of Licer		0.4544.0047.544	
Mr Alfred Haagman, Meadowl	Drook House Brook Street	Cuckfield RH17 5JJ	
Name & Address of Person	on Managing		
Hove Lets Ltd. C/o Parkers Co		burch Road Hove, BN3 2DJ	
Tioro Loto Lia, oro i ainoro o	31101100 110000 110 100 01	initial result in the last section in the last	
Property Description			
Short description of license	d HMO (No of storeys, et	c)	
Property Type = SHARED HC	OUSE, No of Units = 1, Occ	cupancy = 6, No of Storeys = 3	
		_	
Number of Rooms	Total Number of I	Rooms 6	
a) Sleeping 6	b) Livir	ng Rooms 1	
Nl			
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats:	0
Shared Amenities	Number Descri	ntion	
a) Kitchen	1	<b>,</b>	
b) Bathrooms/Showers	2		
c) W.C.s	2		
Linear Batalla			
Licence Details			
Commencement date:	19/06/2017	Duration of licence:	04/07/2021
Maximum number of persor	ıs or households permitt	ed to occupy HMO under conditions of I	icence:
Households 6	Persons 6		
Tiouseriolus	0		
Information referred to a	residential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Mandatory conds, HMO - Prop	, HMO - Fire Mandatory co perty Chges Mandatory co	onds, HMO - Furniture Mandatory conds, HI nds, HMO - Property Maint Mandatory cond Mandatory conds, Management/Pagairs, S	ds, HMO -

Fire works



#### Licence No.

#### 2016/04025/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

1-2 Ventnor Villas Hove BN3 3DD

Ward

Central Hove

Name & Address of Pers	,a.			
Duamanti Daganintian				
Property Description  Short description of license	d HMO (No of storeys	a. etc)		
Property Type = Not Assigned			f Storevs = 4	
. , , ,				
Number of Rooms	Total Number		4	
a) Sleeping 4	b) L	iving Rooms	4	
Number of Self Contained F	lats: 0	Numi	ber of Non Self Cont. Fla	nts: 1
Shared Amenities	Number Des	scription		
a) Kitchen	4			
b) Bathrooms/Showers c) W.C.s	2 2			
c) vv.o.s	2			
Licence Details				
	07/10/0010			05/05/0004
Commencement date:	07/10/2016	Du	ration of licence:	05/07/2021
Maximum number of persor	ıs or households perr	nitted to occup	y HMO under conditions	of licence:
Households 8	Persons 8			
Tiouseriolus 0	0			
Information referred to a	residential property	tribunal or L	ands Tribunal:	
None				

Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/04031/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

7 Campbell Road Brighton BN1 4QD

Ward

Preston Park

Name & Address of Licence	e Holder		
Mr Roger Kay, Just Lets 87 Chu	ırch Road Hove BN3 2BB		
Name & Address of Person	Managing		
,			
Dranasty Description			
Property Description Short description of licensed	HMO (No of storous, etc.	.1	
•		•	
Property Type = SHARED HOL	SE, NO OF OTHES = 1, OCCL	spancy = 6, No of Storeys = 4	
Number of Rooms	Total Number of R	ooms 7	
a) Sleeping	b) Living	g Rooms	
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Flat	ts: 1
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Descrip	tion	
Licence Details			
Commencement date:	09/11/2017	Duration of licence:	06/07/2021
Maximum number of persons	or households permitte	d to occupy HMO under conditions	of licence:
Households 6	Persons 6		
Information referred to a re	sidential property tril	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice	ence		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/04042/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

55 Viaduct Road Brighton BN1 4ND

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
Mrs Angela Chettleburgh, C/o	47 Norfolk Square Brighto	n BN1 2PA	
Name & Address of Perso	n Managing		
Homelets (Brighton) Ltd, 47 No	orfolk Square Brighton BN	1 2PA	
Property Description			
Short description of license	d HMO (No of storeys, et	c)	
Property Type = SHARED HO	USE, No of Units = 1, Occ	cupancy = 6, No of Storeys = 3	
N	T. (.1N)	-	
Number of Rooms	Total Number of F		
a) Sleeping 6	b) Livir	ng Rooms 1	
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number Descri	ption	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	13/10/2016	Duration of licence:	13/07/2021
Maximum number of person	s or households permitt	ed to occupy HMO under conditions of I	icence:
Households 6	Persons 6		
Information referred to a	rocidential property tri	ibunal or Landa Tribunal:	
Information referred to a None	residential property tri	ibunal of Lanus Tribunal.	
Decision of Tribunal		Reference number	
Decision of Hibanal		Veletelice linilinet	
	HMO - Fire Mandatory co	onds, HMO - Furniture Mandatory conds, H	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Ventilation 3, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs



#### Licence No.

#### 2016/04045/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

10 Upper Lewes Road Brighton BN2 3FJ

Ward

St. Peter's And North Laine

Name & Address of Licenc	e Holder	
Mr Alfred Haagman, Meadowbro	ook House Brook Street Cuckfield RH17 5JJ	
Name & Address of Persor	Managing	
Hove Lets Ltd, C/o Parkers Corr	nelius House 178-180 Church Road Hove BN3 2D	J
Property Description		
Short description of licensed	HMO (No of storeys, etc)	
Property Type = SHARED HOU	SE, No of Units = 1, Occupancy = 6, No of Storeys =	4
Number of Rooms	Total Number of Rooms 6	
a) Sleeping	b) Living Rooms	
Number of Self Contained Fla	s: 0 Number of Non Self	Cont. Flats: 1
Ob and Amazzitia	Normhan Banarinttan	
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2 2	
c) W.C.s		
Licence Details		
Commencement date:	22/05/2017 Duration of licence	ce: 04/07/2021
Maximum number of persons	or households permitted to occupy HMO under c	onditions of licence:
Households 6	Persons 6	
Information referred to a re	sidential property tribunal or Lands Tribuna	l:
None		
Decision of Tribunal	Reference r	number
Summary of conditions of lice	nce	stem, conde LIMO. Con

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

## 2016/04057/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

25 Ewart Street Brighton BN2 9UP

Ward

Hanover And Elm Grove

Name & Address of Lice			
Mr Alfred Haagman, Meadow	brook House Brook Street	Cuckfield RH17 5JJ	
Name & Address of Pers			
Hove Lets Ltd, C/o Parkers	Cornelius House 178-180	Church Road Hove BN3 2D	)J
Daniel Daniel Con			
Property Description			
Short description of license		•	
Property Type = SHARED HC	OUSE, No of Units = 1, Occ	cupancy = 7, No of Storeys = 4	
Number of Rooms	Total Number of	Rooms 7	
a) Sleeping 7		ng Rooms 1	
a) Olcoping	b) Livii	ig recomo	
Number of Solf Contained E	Flats: 0	Number of Non Colf C	ont. Flats:
Number of Self Contained F	Tats:	Number of Non Self C	ont. Flats:
Shared Amenities	Number Descri	ntion	
a) Kitchen	1 Descri	puon	
b) Bathrooms/Showers	2		
c) W.C.s	3		
Licence Details			
Communication and data:	20/00/2047	Duration of licenses	04/07/2024
Commencement date:	20/06/2017	Duration of licence:	04/07/2021
Maximum number of persor	ns or households permitt	ed to occupy HMO under cor	ditions of licence:
Households 7	Persons 7		
Tiouseriolus	reisons /		
Information referred to a	residential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference nu	mber
Mandatory conds, HMO - Gas	s, HMO - Fire Blanket, HMO s Mandatory conds, HMO -	D - Fire Mandatory conds, HMO Property Chges Mandatory co	nds, HMO - Property

Management/Repairs, Structural Fire Works



#### Licence No.

#### 2016/04058/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 30 Montreal Road Brighton BN2 9UY

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder		
Mr Alfred Haagman, Meadowb	rook House Brook St	reet Cuckfield RH17 5JJ	
Name & Address of Perso	n Managing		
Hove Lets Ltd, C/o Parkers Co	ornelius House 178-1	180 Church Road Hove BN3 2DJ	
Property Description			
Short description of licensed	HMO (No of storey	s, etc)	
Property Type = SHARED HOL	JSE, No of Units = 6,	Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number		
a) Sleeping 6	b)	Living Rooms 1	
Number of Self Contained Fla	ats:	Number of Non Self Cont. Flats:	0
Shared Amenities	Number De	escription	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	19/06/2017	Duration of licence:	04/07/2021
Maximum number of persons	s or households per	rmitted to occupy HMO under conditions of I	icence:
Households 6	Persons 6		
Information referred to a r	esidential propert	ty tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	HMO - Fire Mandator	ry conds, HMO - Furniture Mandatory conds, Hl y conds, HMO - Property Maint Mandatory cond	

Repairs Floors 3, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural Fire Works



#### Licence No.

#### 2016/04065/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

35 Viaduct Road Brighton BN1 4ND

Ward

St. Peter's And North Laine

Name & Address of Licence	e Holder		
Mr Alfred Haagman, Meadowbr	ook House Brook Stre	et Cuckfield RH17 5JJ	
Name & Address of Person	n Managing		
Hove Lets Ltd, C/o Parkers Co	nelius House 178-18	0 Church Road Hove BN3 2DJ	
Property Description			
Short description of licensed		,	
Property Type = SHARED HOU	SE, No of Units = 1, C	occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number o	of Rooms 6	
a) Sleeping 5	b) Li	ving Rooms 1	
, , , , , , , , , , , , , , , , , , , ,	,	<u> </u>	
Number of Self Contained Fla	<b>ts</b> : 0	Number of Non Self Cont. Flats:	0
Shared Amenities	Number Desc	cription	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	2		
Licence Details			
Commencement date:	19/06/2017	Duration of licence:	04/07/2021
Maximum number of persons	or households perm	itted to occupy HMO under conditions of l	icence:
Households 5	Persons 5		
Information referred to a re	esidential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	HMO - Fire Mandatory	conds, HMO - Furniture Mandatory conds, H	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Structural Fire Works



## Licence No.

#### 2016/04071/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

58 Viaduct Road Brighton BN1 4ND

Ward

St. Peter's And North Laine

Name & Address of Licence Holder
Mr Alfred Haagman, Meadowbrook House Brook Street Cuckfield RH17 5JJ
MI Allied Haagillali, Meadowblook House Blook Street Cucklield KH 17 555
Name & Address of Barson Managing
Name & Address of Person Managing
Hove Lets Ltd, C/o Parkers Cornelius House 178-180 Church Road Hove BN3 2DJ
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3
Number of Rooms 7
a) Sleeping b) Living Rooms 1
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
Shared Amenities Number Description
a) Kitchen 2
b) Bathrooms/Showers 2
c) W.C.s 3
Licence Details
Common of the 10/00/2017
Commencement date: 19/06/2017 Duration of licence: 04/07/2021
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Households 6 Persons 6
Tiouscholds 0 1 classification 0
Information referred to a residential property tribunal or Lands Tribunal:
None
Decision of Tribunal Reference number
Summary of conditions of licence  HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Furniture  Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property  Maint Mandatory conds, HMO - Repairs Heating 5, HMO - RubbishRecyc Mandatory conds, HMO - Tenant  Agrent Mandatory conds, Management Repairs, Management/Repairs, Structural Fire Works, Structural

Repair Works



#### Licence No.

#### 2016/04077/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

13 Norfolk Road Brighton BN1 3AA

Ward

Brunswick And Adelaide

Name & Address of Licence Holder	
South East Properties Ltd, 126 Western Road Brighton BN1 2AD	
Name & Address of Person Managing	
Good Deal Agency, 126 Western Road Brighton BN1 2AD	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms 7	
a) Sleeping b) Living Rooms	
Notes to the state of the state	<b>-</b> 1.1.
Number of Self Contained Flats: 0 Number of Non Self Cont. F	Flats: 0
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s  Number Description  2	
Licence Details	
	47/07/0004
Commencement date: 23/12/2016 Duration of licence:	17/07/2021
Maximum number of persons or households permitted to occupy HMO under condition	ns of licence:
Households 6 Persons 6	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of licence	LIMO

Additional facilities, Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Loft Insulation, Structural fire works, Ventilation



## Licence No.

#### 2016/04094/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Miami Hotel 22-23 Bedford Square Brighton BN1 2PL

Ward

Regency

Name & Address of Licen	ce Holder		
Mr Rob Anderson, 35 Sillwood	Street Brighton BN1 2PS	}	
Name & Address of Perso	on Managing		
MTM Property Services, 108A	Lewes Road Brighton BN	N2 4AE	
Property Description	d LIMO (No. of etc., e.e.	1-1	
Short description of license	•	•	
Property Type = BEDSIT, No	of Units = 25, Occupancy	= 24, No of Storeys = 5	
Number of Rooms	Total Number of	Rooms 26	
a) Sleeping 25	b) Liviı	ng Rooms 1	
Number of Self Contained F	lats: 3	Number of Non Self Cont. Fl	ats: 21
Shared Amenities	Number Descri	ption	
a) Kitchen	8		
b) Bathrooms/Showers c) W.C.s	10		
o, <b>vv</b> .o.o			
Licence Details			
0	00/44/0040	Donation of Bossess	04/07/0004
Commencement date:	23/11/2016	Duration of licence:	24/07/2021
Maximum number of person	s or households permitt	ted to occupy HMO under condition	s of licence:
Households 24	Persons 24		
Touseriolus 24	1 6130113		
Information referred to a	residential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	, HMO - Fire Mandatory co	onds, HMO - Furniture Mandatory cond	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/04096/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

3 Trinity Street Brighton BN2 3HN

Ward

St. Peter's And North Laine

Name & Address of Licer	ice Holder		
Mr Alfred Haagman, Meadow	orook House Brook Street Cuck	dield RH17 5JJ	
Name & Address of Pers	on Managing		
Hove Lets Ltd, C/o Parkers C	ornelius House 178-180 Church	Road Hove BN3 2DJ	
Property Description			
Short description of license	d HMO (No of storeys, etc)		
Property Type = SHARED HC	OUSE, No of Units = 1, Occupan	cy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Room	ns 7	
a) Sleeping 6	b) Living Ro		
a) olcoping	b) Living No	OIIIO .	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flat	:s: 1
Number of Self Contained F	iats. 0	Number of Non Sen Cont. Flat	3.
Shared Amenities	Number Description		
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Liver Potelle			
Licence Details			
Commencement date:	20/06/2017	Duration of licence:	04/07/2021
Maximum number of persor	s or households permitted to	occupy HMO under conditions	of licence:
Households 6	Persons 6		
Information referred to a	residential property tribun	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	cence		
HMO - Elec Mandatory conds	, HMO - Fire Blanket, HMO - Fir	e Mandatory conds, HMO - Furnitu	
ivianuatory conus, niviO - Gas	ivianuatory conus, mivio - Prop	erty Chges Mandatory conds, HM0	J - Flopelty

Maint Mandatory conds, HMO - Repairs Floors 3, HMO - Repairs Heating 5, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Structural Fire Works



#### Licence No.

#### 2016/04098/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

7 Coronation Street Brighton BN2 3AQ

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder	
Mr Alfred Haagman, Meadowb	prook House Brook Street Cuckfield RH17 5JJ	
Name & Address of Perso		
Hove Lets Ltd, C/o Parkers Co	ornelius House 178-180 Church Road Hove BN3 2DJ	
D ( D ) (		
Property Description		
Short description of licensed	• • •	
Property Type = SHARED HO	USE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 5	b) Living Rooms 1	
, . <b>.</b>	, <del>-</del>	
Number of Self Contained FI	ats: 0 Number of Non Self Cont. Fl	ats: 0
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	1	
c) W.C.s		
Licence Details		
Commencement date:	31/08/2017 Duration of licence:	04/07/2021
Maximum number of person	s or households permitted to occupy HMO under conditions	s of licence:
Hawaahalda 5	Parrage 5	
Households 5	Persons 5	
Information referred to a <b>i</b>	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lic	cence HMO - Fire Mandatory conds HMO - Furniture Mandatory cond	ds HMO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural Fire Works



#### Licence No.

#### 2016/04106/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

42 Viaduct Road Brighton BN1 4ND

Ward

St. Peter's And North Laine

Name & Address of Licence	Holder	
Mrs Sharon Dance, C/o 47 Norfo	olk Square Brighton BN1 2PA	
Name & Address of Person	Managing	
Homelets (Brighton) Ltd, 47 Norf	olk Square Brighton BN1 2PA	
Property Description		
Short description of licensed h	HMO (No of storeys, etc)	
Property Type = SHARED HOUS	SE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
NI (B	Total North Control of Processing	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 5	b) Living Rooms 1	
Number of Self Contained Flat	s: 0 Number of Non Self Cont. Flats:	1
	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers c) W.C.s	1 2	
0) **.0.3		
Licence Details		
0	40/40/0040	04/07/0004
Commencement date:	19/10/2016 Duration of licence:	21/07/2021
Maximum number of persons of	or households permitted to occupy HMO under conditions of	licence:
Households 5 F	Persons 5	
Information referred to a res	sidential property tribunal or Lands Tribunal:	
None		_
Decision of Tribunal	Reference number	
Summary of conditions of lice HMO - Elec Mandatory conds. H	nce MO - Fire Mandatory conds, HMO - Furniture Mandatory conds, F	IMO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/04111/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

2 Ditchling Road Brighton BN1 4SF

Ward

St. Peter's And North Laine

Name & Address of Licence	e Holder		
		Lane Epsom Surrey KT19 8RY	
<u> </u>			
Name & Address of Person	n Managing		
Ms Sarah Whitmarsh, Brand Va	ughan Ltd 117-118 West	ern Road Hove East Sussex BN3 1DB	
Property Description			
Short description of licensed	HMO (No of storeys, et	c)	
Property Type = SHARED HOU	ISE, No of Units = 1, Occ	upancy = 7, No of Storeys = 5	
Number of Rooms	Total Number of F	Rooms 8	
a) Sleeping 7	h) Livin	g Rooms 1	
a) clooping	5) 2	g 1.66.116	
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Flats:	1
rumber of den contained i la		Number of Non-Sen Sont. Flats.	
Shared Amenities	Number Descrip	otion	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	3		
License Deteile			
Licence Details			
Commencement date:	19/10/2016	Duration of licence:	02/07/2021
			_
Maximum number of persons	or households permitte	ed to occupy HMO under conditions of I	icence:
Households 7	Persons 7		
Information referred to a re	esidential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal	Reference number		
	ory conds, HMO - Fire Do	pors 8, HMO - Fire Mandatory conds, HMO	

Fire Alarm, HMO - Elec Mandatory conds, HMO - Fire Doors 8, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/04122/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

22 Viaduct Road Brighton BN1 4NB

Ward

St. Peter's And North Laine

Name & Address of Licen	ice Holder		
Mrs Susan Langridge, 15 Ditcl	hling Road Brighton BN1 4S	В	
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license	•		
Property Type = SHARED HO	USE, No of Units = 1, Occup	pancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Ro	ooms 6	
a) Sleeping 5	b) Living	Rooms 1	
,	, 3		
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number Descript	ion	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	02/11/2016	Duration of licence:	08/07/2021
Maximum number of person	ıs or households nermitted	I to occupy HMO under conditions of I	icence
		to codapy time under conditions of the	
Households 5	Persons 5		
Information referred to a	regidential property trib	unal or Landa Tribunal:	
None	residential property trib	unai or Lanus Impunai.	
Decision of Tribunal		Reference number	
		Neierence number	
Summary of conditions of lie HMO - Elec Mandatory conds,		ds, HMO - Furniture Mandatory conds, HN	MO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Electrics 10, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Other Fire works



## Licence No.

#### 2016/04126/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

30 Beaconsfield Road Brighton BN1 4QH

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder			
Mr Awad Simmonds, Flat 2 91	Western Road Brighton BN1 2NW			
Name & Address of Perso	n Managing			
Home Leasing Ltd, 18 Hyde G	ardens Eastbourne BN21 4PT			
Property Description				
Short description of licensed	I HMO (No of storeys, etc)			
Property Type = SHARED HO	JSE, No of Units = 1, Occupancy = 6, No of	Storevs = 3		
	,			
Number of Rooms	Total Number of Rooms 7			
a) Sleeping	b) Living Rooms			
Number of Self Contained FI	ats: 0 Number o	f Non Self Cont. Flats:	1	
rumbor or oon contamour.	interior of the state of the st	Then con cont. Thate.		
Shared Amenities	Number Description			
a) Kitchen	1			
b) Bathrooms/Showers	2			
c) W.C.s	3			
Licence Details				
Commencement date:	04/12/2017 <b>Duratio</b>	n of licence: 03/07/2	2021	
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
Households 6	Persons 6			
Information referred to a I	esidential property tribunal or Lands	Tribunal:		
None				
None Decision of Tribunal	R	eference number		



## Licence No.

#### 2016/04133/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

36 Buckingham Place Brighton BN1 3PJ

Ward

St. Peter's And North Laine

Name & Address of Licenc	e Holder	
Mr David Franks, 56 Montague		
Name & Address of Person	n Managing	
My Lets Ltd, Ameila House Cre	escent Road Worthing BN11 1QR	
Property Description		
Short description of licensed	• • •	
Property Type = SHARED HOU	SE, No of Units = 1, Occupancy = 5, No of Storeys = 5	
Number of Rooms	Total Number of Rooms 5	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flat	ts: 0 Number of Non Self Con	t. Flats:
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers c) W.C.s	2	
c) w.c.s		
Licence Details		
	20/25/2015	05/07/0004
Commencement date:	23/05/2017 Duration of licence:	25/07/2021
Maximum number of persons	or households permitted to occupy HMO under condi	tions of licence:
Households 5	Persons 5	
TIOUSOIIOIUS 0	0	
Information referred to a re	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference numb	oer



## Licence No.

#### 2016/04135/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

19 Ditchling Rise Brighton BN1 4QL

Ward

Preston Park

Name & Address of Licen	ce Holder
Mr Sanjeev Dhuna, 48 Woodla	nd Drive Hove East Sussex BN3 6DL
Name & Address of Perso	n Managing
S J Lettings Ltd, 52 Lewes Roa	d Brighton BN2 3HW
Property Description	
Short description of licensed	HMO (No of storeys, etc)
Property Type = SHARED HO	JSE, No of Units = 1, Occupancy = 8, No of Storeys = 4
Number of Rooms	Total Number of Rooms 9
a) Sleeping 8	b) Living Rooms 1
a) Sieeping	b) Living Rooms
November of Oalf Oantain ad El	Niverban of Nan Calf Cant Flate
Number of Self Contained Fl	Number of Non Self Cont. Flats: 1
Shared Amenities	Number Description
a) Kitchen	Number Description 2
b) Bathrooms/Showers	2
c) W.C.s	2
Licence Details	
Commencement date:	14/11/2016 <b>Duration of licence</b> : 19/07/2021
Commencement date.	14/11/2010 Duration of ficence.
Maximum number of person	or households permitted to occupy HMO under conditions of licence:
Households 8	Persons 8
Tious officials of the second	
Information referred to a r	esidential property tribunal or Lands Tribunal:
None	
Decision of Tribunal	Reference number
HMO - Furniture Mandatory co	ence HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Fire Notices 1, nds, HMO - Gas Mandatory conds, HMO - Licensing Kitchen 1, HMO - perty Chges Mandatory conds, HMO - Property Maint Mandatory conds,

HMO - Repairs Drainage 2, HMO - Repairs Floors 3, HMO - Repairs Walls 2, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs



## Licence No.

#### 2016/04137/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

70 Newmarket Road Brighton BN2 3QF

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder		
Mr & Mrs Jeremy & Caroline H	lubert, 2 Hangleton Mano	or Close Hove BN3 8AJ	
Name & Address of Perso	n Managing		
1			
Property Description			
Short description of license	d HMO (No of storeys, e	etc)	
Property Type = SHARED HO	USE, No of Units = 1, Oc	ccupancy = 6, No of Storeys = 3	
N	T. (.15)	<b>D</b>	
Number of Rooms	Total Number of		
a) Sleeping 6	b) Livi	ing Rooms 1	
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Fl	ats: 1
Shared Amenities	Number Descr	ription	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
		1	
Commencement date:	24/11/2016	Duration of licence:	05/07/2021
Maximum number of person	s or housaholds normit	ted to occupy HMO under conditions	s of licence:
maximum number of person	s of flousefloids perfillit	ted to occupy rimo under conditions	of ficerice.
Households 6	Persons 6		
Information referred to a	residential property to	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie			
HMO - Elec Mandatory conds,	HMO - Fire Locks, HMO	- Fire Mandatory conds, HMO - Furnitu	ure Mandatory



## Licence No.

#### 2016/04138/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

11 Cross Street Hove BN3 1AJ

Ward

Brunswick And Adelaide

Name & Address of Licen	ice Holder	
Charlotte Sommers, 7 Vallance	ce Gardens Hove East Sussex BN3 2DB	
Name & Address of Perso		
Charlotte Sommers, Gladstone	e Sommers Ltd 7 Vallance Gardens Hove East Sussex BN3 2DB	
Property Description		
Short description of licensed	d HMO (No of storous atc)	
-		
Property Type = SHARED HO	DUSE, No of Units = 7, Occupancy = 7, No of Storeys = 4	
Number of Rooms	Total Number of Rooms 8	
a) Sleeping	b) Living Rooms	
, , , ,	, 3	
Number of Self Contained Fl	lats: 0 Number of Non Self Cont. Flats:	1
Training of Containing 1	idio.	
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	3	
c) W.C.s	3	
5 ( )		
Licence Details		
Commencement date:	24/01/2017 Duration of licence:	19/07/2021
Maximum number of person	ns or households permitted to occupy HMO under conditions of lic	cence:
Households 7	Persons 7	
Information referred to a i	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lic	cence	



## Licence No.

#### 2016/04141/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 99 Stanmer Park Road Brighton BN1 7JL

Ward

Hollingdean And Stanmer

Name & Address of Licen	ce Holder		
Mr & Mrs Jeremy & Caroline F	lubert, 2 Hangleton Mand	or Close Hove BN3 8AJ	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, e	etc)	
Property Type = SHARED HO	USE, No of Units = 1, Oc	ccupancy = 6, No of Storeys = 3	
Number of Decree	Total Number of	f Doomo 7	
Number of Rooms	Total Number of		
a) Sleeping 6	b) Liv	ving Rooms 1	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Fla	ats: 1
Shared Amenities	Number Descri	ription	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s			
Licence Details			
Commencement date:	24/11/2016	Duration of licence:	05/07/2021
Maximum number of person	s or households nermi	tted to occupy HMO under conditions	s of licence
		_	5 OT 11001100.
Households 6	Persons 6		
	residential property t	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie			
HMO - Elec Mandatory conds,	HMO - Fire Mandatory of	conds, HMO - Furniture Mandatory cond	is, HMO - Gas

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Works



## Licence No.

#### 2016/04142/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

26 Reeves Hill Brighton BN1 9AS

Ward

Hollingdean And Stanmer

Name & Address of Licen	ice Holder		
Mr & Mrs Jeremy & Caroline F	lubert, 2 Hangleton Mano	r Close Hove BN3 8AJ	
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, e	tc)	
Property Type = SHARED HO	USE, No of Units = 1, Oc	cupancy = 8, No of Storeys = 3	
Normalia and Danasa	Takal Novelan af	D	
Number of Rooms	Total Number of		
a) Sleeping 8	b) Livi	ng Rooms 1	
			-
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ats: 1
Shared Amenities	Number Descr	iption	
a) Kitchen	2		
b) Bathrooms/Showers c) W.C.s	2		
5) VV.C.S			
Licence Details			
Commencement date:	24/11/2016	Duration of licence:	05/07/2021
Maximum number of person	s or households permit	ted to occupy HMO under conditions	s of licence:
Households 8	Persons 8		
Information referred to a	uaaidantial muanautu t	sibal au l auda Tuibal.	
	residential property tr	ribunal or Lands Tribunal:	
None		Deference number	
Decision of Tribunal		Reference number	
Summary of conditions of li		anda HMO. Eurnitura Mandatany aana	la HMO Coo
TIVIO - Elec iviaridatory conds,	niviO - rife Mandatory Co	onds, HMO - Furniture Mandatory cond	is, nivio - Gas



## Licence No.

#### 2016/04157/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

6 Argyle Road Brighton BN1 4QA

Ward

Preston Park

Name & Address of Licer	nce Holder	
/Ir Awad Simmons, Flat 2 91	Western Road Brighton BN1 2NW	
Name & Address of Perso	on Managing	
Home Leasing Brighton Ltd, 1	8 Hyde Gardens Eastbourne BN21 4PT	
Property Description		
Short description of license	d HMO (No of storeys, etc)	
	DUSE, No of Units = 1, Occupancy = 6, No of Storeys = 4	
Topolly Typo Olivated Tio	coapano, c, no or energic	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping	b) Living Rooms	
Number of Self Contained F	lats: 0 Number of Non Self Cont. Fl	lats: 1
Shared Amenities	Number Description	
a) Kitchen	1	
) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Commencement date:	04/12/2017 Duration of licence:	29/06/2021
Maximum number of person	ns or households permitted to occupy HMO under condition	e of licence:
		of nectice.
Households 6	Persons 6	
nformation referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of li		do UMO Coo



## Licence No.

## 2016/04162/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

7 Boyces Street Brighton BN1 1AN

Ward

Regency

Name & Address of Licen	ce Holder		
Mr Alfred Haagman, Meadowb	rook House Brook Street C	uckfield RH17 5JJ	
Name & Address of Perso	n Managing		
Hove Lets Ltd, C/o Parkers Co	ornelius House 178-180 Ch	urch Road Hove BN3 2DJ	
Property Description			
Short description of licensed	I HMO (No of storeys, etc)		
Property Type = SHARED HO	USE, No of Units = 1, Occu	pancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Ro	ooms 6	
a) Sleeping 5	b) Living	Rooms	
N		N	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities	Number Descript	ion	
a) Kitchen	1 Descript		
b) Bathrooms/Showers	1		
c) W.C.s	2		
,			
Licence Details			
Commencement date:	19/06/2017	Duration of licence:	04/07/2021
Commencement date.	19/00/2017	Duration of ficerice.	04/07/2021
Maximum number of persons	s or households permitted	d to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Tiouscrioius	0		
Information referred to a r	residential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
conds, HMO - Furniture Manda conds, HMO - Property Maint N	HMO - Fire Alarm Systems atory conds, HMO - Gas Ma Mandatory conds, HMO - Re RubbishRecyc Mandatory co	7, HMO - Fire Blanket, HMO - Fire M Indatory conds, HMO - Property Chge Pepairs Floors 3, HMO - Repairs Heati Ends, HMO - Tenant Agrmnt Mandato	es Mandatory ng 5, HMO -



## Licence No.

#### 2016/04163/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

17 Campbell Road Brighton BN1 4QD

Ward

Preston Park

Name & Address of Licence	ce Holder	
Mr David Todd, Highwood Brig	htling Robertsbridge TN32 5HP	
Name & Address of Perso	n Managing	
,		
Property Description		
Short description of licensed	HMO (No of storeys, etc)	
Property Type = SHARED HOL	JSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 8	
a) Sleeping 5	b) Living Rooms 1	
a) dicepling	b) Living Rooms	
Number of Self Contained Fla	ats: 0 Number of Non Self Cont. Flats:	1
Number of Self Contained Fig	number of Non Sen Cont. Flats.	I
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	1	
c) W.C.s	2	
License Details		
Licence Details		
Commencement date:	16/09/2016 Duration of licence:	20/07/2021
Maadaaaaaa aa		
waximum number of persons	s or households permitted to occupy HMO under conditions of lic	cence:
Households 5	Persons 5	
	esidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lic	ence HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HM	O - Gas



## Licence No.

#### 2016/04205/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

8 Shaftesbury Place Brighton BN1 4QS

Ward

**Preston Park** 

Name & Address of Licen	ce Holder		
		m Henfield Road Small Dole BN5 9X	
Name & Address of Perso	n Managing		
Property Description			
Short description of license	d HMO (No of storeys, etc	c)	
Property Type = SHARED HO	USE, No of Units = 6, Occi	upancy = 6, No of Storeys = 4	
Number of Rooms	Total Number of R	Rooms 7	
a) Sleeping 6	b) Livin	g Rooms 1	
, , , , , , , , , , , , , , , , , , , ,	,		
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. F	lats: 1
Shared Amenities	Number Descrip	otion	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
	1-10-110-11-	<b>-</b>	20/20/2004
Commencement date:	17/01/2017	Duration of licence:	03/08/2021
Maximum number of person	s or households permitte	ed to occupy HMO under condition	s of licence:
Households 6	Persons 6		
lousellolus 0	reisons 0		
nformation referred to a	residential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie HMO - Elec Mandatory conds.		nds. HMO - Furniture Mandatory con	ds, HMO - Gas



## Licence No.

#### 2016/04207/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

32 Egremont Place Brighton BN2 0GA

Ward

Queen's Park

		Train a	
Name & Address of Lice	ence Holder		
Mrs Susanne P Green, The	Coast House Gorse Avenue k	Gingston Gorse East Preston BN16 1S	Q
Name & Address of Per	son Managing		
Bonnets, 78-79 George Stre	et Hove East Sussex BN3 3Y	E	
Property Description			
Short description of licens	sed HMO (No of storeys, etc)		
Property Type = SHARED H	IOUSE, No of Units = 5, Occu	pancy = 5. No of Storeys = 3	
Troporty Typo Ormates T	, 140 di Gime - 0, 0000	panely of the or exercise of	
Number of Rooms	Total Number of Ro	ooms 6	
a) Sleeping	b) Living	Rooms	
	_	<del></del>	
Number of Self Contained	Flats: 0	Number of Non Self Cont. Flat	s: 1
Number of Self Contained	i iats.	Number of Non Sen Cont. Flat	3. <u> </u>
Charad Amanitias	Number Descript	i.a.m	
Shared Amenities a) Kitchen	Number Descript	ion	
b) Bathrooms/Showers	2		
c) W.C.s	2		
-,			
Licence Details			
Commencement date:	11/01/2017	Duration of licence:	26/06/2021
Marrian and a second			-£1!
Maximum number of perso	ons or nousenoids permitted	d to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Information referred to	a residential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of	licence		
Juninary of Conditions of	IICCIICC		



## Licence No.

#### 2016/04208/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

31 Buckingham Road Brighton BN1 3RP

Ward

St. Peter's And North Laine

Name & Address of Licence	Holder	
Mr David Miele, 45 Shirley Drive		
Name & Address of Person	Managing	
Mr Stephen Chipp, Brighton Lettii	ngs 81 Church Road Hove BN3 2BB	
Property Description		
Short description of licensed H	IMO (No of storeys, etc)	
Property Type = SHARED HOUS	SE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping	b) Living Rooms	
a) Sieeping	b) Living Rooms	
Number of Self Contained Flats	s: 0 Number of Non Self Cont. Fla	ats: 0
Number of Self Contained Flats	Number of Non-Seil Cont. Fig.	ats. U
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	3	
Licence Details		
Commencement date:	16/12/2016 Duration of licence:	07/08/2021
Maximum number of persons o	or households permitted to occupy HMO under conditions	s of licence:
Households 6 P	Persons 6	
Information referred to a res	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	



## Licence No.

#### 2016/04220/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 9 Upper Lewes Road Brighton BN2 3FJ

Ward

St. Peter's And North Laine

Name & Address of Licence H	lolder		
Mr David Neill, Michelham Gate Mid	chelham Priory Road Upper	r Dicker Arlington BN27 3QR	
Name & Address of Person M	anaging		
G4 Lets, 2 Hythe Road Brighton BN	N1 6JS		
Property Description			
Short description of licensed HM	O (No of storeys, etc)		
Property Type = SHARED HOUSE,	, No of Units = 1, Occupand	cy = 8, No of Storeys = 4	
	•	•	
Number of Rooms	Total Number of Room	s 9	
a) Sleeping	b) Living Roo	oms	
Number of Self Contained Flats:	0	Number of Non Self Cont. Flats:	0
Shared Amenities Nu	ımber Description		
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	28/02/2017	Duration of licence:	24/07/2021
Commencement date.	20/02/2017	Duration of licence.	24/07/2021
Maximum number of persons or	households permitted to	occupy HMO under conditions of	licence:
Households 8 Per	rsons 8		
Information referred to a resid	dential property tribuna	l or Lands Tribunal	_
None	rential property tribuna	ir or Earlas Tribaliai.	
Decision of Tribunal		Reference number	
Decision of Tribulial		I/GIGIGIICE IIUIIIDEI	
Cummany of conditions of license	^		



## Licence No.

#### 2016/04229/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

6 Upper Wellington Road Brighton BN2 3AN

Ward

Hanover And Elm Grove

Name & Address of Lice	nce Holder		
Ms Sue Heydon, Pavo Cotta	ge Bolney Chapel Road	Twineham West Sussex RH17 5NG	
Name & Address of Pers	on Managing		
G4 Lets, 2 Hythe Road Brigh	ton BN1 6JS		
Property Description			
Short description of license	ed HMO (No of storeys	s, etc)	
Property Type = SHARED He	OUSE, No of Units = 1, (	Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number	of Rooms 8	
a) Sleeping 6	b) L	Living Rooms 1	
Normalis and Code Constation and	Flata	Name to a state of the state of	-4
Number of Self Contained	Flats: 0	Number of Non Self Cont. Fla	ats: 0
Shared Amenities		scription	
a) Kitchen	2		
b) Bathrooms/Showers c) W.C.s	3		
0) 11.0.0			
Licence Details			
Commencement date:	18/10/2016	Duration of licence:	24/07/2021
Maximum number of perso	ns or households pern	nitted to occupy HMO under conditions	s of licence:
Hawaahalda C	<b>D</b> arrage C		
Households 6	Persons 6		
Information referred to a	residential property	/ tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of HMO - Elec Mandatory conditions		y conds, HMO - Furniture Mandatory cond	ds, HMO - Gas



## Licence No.

#### 2016/04231/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

18 Egremont Place Brighton BN2 0GA

Ward

Queen's Park

Name & Address of Licence Ho	older		
Alium Properties Ltd, Woodmans Gr	een Farm Linch Liphook G	GU30 7NF	
Name & Address of Person Ma	naging		
G4 Lets, 2 Hythe Road Brighton BN2	1 6JS		
Property Description			
Short description of licensed HMC	) (No of storeys, etc)		
Property Type = SHARED HOUSE,	No of Units = 1, Occupand	cy = 9, No of Storeys = 4	
	<b>-</b>		
Number of Rooms	Total Number of Room	s 11	
a) Sleeping	b) Living Roo	oms	
Number of Self Contained Flats:	0	Number of Non Self Cont. Flats:	0
Shared Amenities Nur	mber Description		
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Licence Betails			
Commencement date:	16/11/2016	Duration of licence:	24/07/2021
Maximum number of persons or h	ouspholds parmitted to	occupy HMO under conditions of	licanca:
Maximum number of persons of fi	ousenoius permitteu to	occupy rimo under conditions of	ilcerice.
Households 9 Pers	sons 9		
Information referred to a reside	ential property tribuna	ll or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licence			

Summary of conditions of licence



## Licence No.

#### 2016/04250/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

152 Milner Road Brighton BN2 4BQ

Ward

Moulsecoomb And Bevendean

Name & Address of Licence	Holder		
Mr S Plent, 17 Lenham Road Eas	t Brighton BN2 8AF		
Name & Address of Person I	Managing		
,			
Property Description			
Short description of licensed H	MO (No of storeys, e	tc)	
Property Type = SHARED HOUS	E, No of Units = 6, Oc	cupancy = 6, No of Storeys = 3	
Normalis and Charles	Tatal November of	Danier 0	
Number of Rooms	Total Number of		
a) Sleeping	b) Livi	ng Rooms	
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flat	s: 1
Shared Amenities N	lumber Descr	iption	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	18/04/2017	Duration of licence:	18/04/2018
Maximum number of nercens o	r hausahalda narmit	ted to ecoupy HMO under conditions	of liganos
maximum number of persons o	i nousenolus periilit	ted to occupy HMO under conditions	or neerice.
Households 6 Pe	ersons 6		
Information referred to a res	idential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licen	ce		



## Licence No.

#### 2016/04279/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

57 Livingstone Road Hove BN3 3WN

Ward

Goldsmid

Name & Address of Licen	ice Holder		
Mr Clive Senior, 21 Benett Dri	ve Hove East Sussex BN	3 6PL	
Name & Address of Perso			
Home James Residential Lets	Ltd T/as Home James Le	ets, Kingsway 134-140 Church Road F	Hove East Sussex
Property Description			
Short description of license	d HMO (No of storeys, e	etc)	
Property Type = SHARED HO	USE, No of Units = 1, Oc	ccupancy = 5, No of Storeys = 4	
Number of Rooms	Total Number of	Rooms 9	
a) Sleeping 5	b) Livi	ing Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. F	lats: 1
Shared Amenities	Number Descr	ription	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	22/12/2016	Duration of licence:	20/06/2021
Commencement date.	22/12/2010	Duration of ficelice.	20/00/2021
Maximum number of person	s or households permit	ted to occupy HMO under condition	ns of licence:
Households 5	Persons 5		
Information referred to a	residential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li HMO - Elec Mandatory conds,		IO - Fire Locks, HMO - Fire Mandatory	conds, HMO -



## Licence No.

#### 2016/04280/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

95 Beaconsfield Villas Brighton BN1 6HF

Ward

Preston Park

Name & Address of Licence Holder				
Mr Clive Senior & Mrs Susan Winter, 21 Benett Drive Hove BN3 6PL				
Name & Address of Person Managing				
Home James Residential Lets Ltd T/as Home James Lets, Kingsway 134-140 Church Road Hov	e East Sussex			
Property Description				
Short description of licensed HMO (No of storeys, etc)				
Property Type = HMO Envelope - Mixed, No of Units = 9, Occupancy = 13, No of Storeys = 4				
Number of Rooms Total Number of Rooms 13				
a) Sleeping b) Living Rooms				
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	s: 1			
Shared Amenities Number Description				
a) Kitchen 1				
b) Bathrooms/Showers 4				
c) W.C.s				
Licence Details				
Commencement date: 04/01/2017 Duration of licence:	03/04/2021			
	00/0 // 2021			
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
Households 13 Persons 13				
To some to the som				
Information referred to a residential property tribunal or Lands Tribunal:				
None				
Decision of Tribunal Reference number				
Summary of conditions of licence				



## Licence No.

#### 2016/04286/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

50 Over Street Brighton BN1 4EE

Ward

St. Peter's And North Laine

Name & Address of Licence Holder	
Mr Clive & Mrs Gill Senior, 21 Benett Drive Hove BN3 6PL	
Name & Address of Person Managing	
Home James Residential Lets Ltd T/as Home James Lets, Kingsway 134-140 Church Road H	ove East Sussex
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 4	
Number of Rooms Total Number of Rooms 6	
a) Sleeping b) Living Rooms	
a) clooping	
Number of Self Contained Flats: 0 Number of Non Self Cont. Fl	lats:
Number of contamour late.	1
Shared Amenities Number Description	
a) Kitchen 1	
b) Bathrooms/Showers 2	
c) W.C.s	
Licence Details	
2.17.17.27.	00/00/0004
Commencement date: 04/01/2017 Duration of licence:	20/06/2021
Maximum number of persons or households permitted to occupy HMO under condition	s of licence:
Households 5 Persons 5	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of licence	de LIMO. Occ



## Licence No.

#### 2016/04290/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

3 Clyde Road Brighton BN1 4NN

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
Mr Robert & Mrs Pearl Neish,	Medlar Cottage Lodge Land	e Keymer BN6 8NA	
Name & Address of Perso	on Managing		
Mr Anthony M Uden, Uden Es	tate Agents 88 Dyke Road	Brighton BN1 3JD	
<b>Property Description</b>			
Short description of license	d HMO (No of storeys, etc	)	
Property Type = SHARED HO	USE, No of Units = 1, Occı	pancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of R	ooms 10	
a) Sleeping	b) Livinç	Rooms	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number Descrip	tion	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Licence Details			
Commencement date:	10/01/2017	Duration of licence:	25/06/2021
Maximum number of person	s or households permitte	d to occupy HMO under conditions	of licence:
Households 6	Persons 6		
Information referred to a	residential property trib	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	cence	J. JINO. F. W. W. J. W. W. J. W. W. J. W.	



## Licence No.

#### 2016/04294/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

75 The Highway Brighton BN2 4GD

Ward

Moulsecoomb And Bevendean

Name of Additional Children	Labelson		
Name & Address of Licence I			
Mr David Bull, 16 Windmill Avenue	Epsom Surrey KT17 1L	L	
Name & Address of Person N	lanaging		
Mr Dan Lyons, 74 Lewes Road Bri	ghton BN2 3HZ		
Property Description			
Short description of licensed HN	IO (No of storeys, etc)		
Property Type = SHARED HOUSE	, No of Units = 1, Occup	pancy = 8, No of Storeys = 3	
Number of Rooms	Total Number of Ro	oms 8	
a) Sleeping	b) Living	Rooms	
			T
Number of Self Contained Flats:	0	Number of Non Self Cont. Flat	<b>s</b> : 0
Shared Amenities No	umber Descripti	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	07/06/2017	Duration of licence:	27/07/2021
Maximum number of nersons or	households negotited	to coounty UMO under conditions	of lineman.
waxiiiuiii iiuiiibei oi persons or	nousenoius perimitteu	to occupy HMO under conditions	or neerice.
Households 8 Pe	rsons 8		
Information referred to a resi	dential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

#### Summary of conditions of licence

Fire doors, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Room sizes, Under Stairs Cupboard, Washing to Kitchen



## Licence No.

#### 2016/04301/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

14 Upper Hollingdean Road Brighton BN1 7GA

Ward

Hollingdean And Stanmer

Name O Address of Process Holder	
Name & Address of Licence Holder	
Mr Gary Burgess, 2A Rugby Road Brighton BN1 6EB	
Name & Address of Person Managing	
G K White Company Ltd, 88 Boundary Road Hove East Sussex BN3 7GA	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 7, No of Storeys =	Λ
Troporty Type – STIANED TIOODE, No of Office – 1, Occupancy – 1, No of Otology –	<u> </u>
Number of Rooms 7	
a) Sleeping b) Living Rooms 1	
Number of Self Contained Flats: 0 Number of Non Self	Cont. Flats: 1
Shared Amenities Number Description	
a) Kitchen 1	
b) Bathrooms/Showers 2	
c) W.C.s	
Licence Details	
Commencement date: 12/05/2017 Duration of licence	e: 23/08/2021
Maximum number of persons or households permitted to occupy HMO under co	onditions of licence:
Households 7 Persons 7	
Information referred to a residential property tribunal or Lands Tribunal	
None	
213012	umbor
	uiiibei
Summary of conditions of licence HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Manda	tory conds, HMO - Gas



## Licence No.

#### 2016/04317/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

3 Addison Road Hove BN3 1TN

Ward

Goldsmid

Name & Address of Licen	ce Holder		
Miss Hilary Crozier, 19 Albany	Villas Hove BN3 2F	RS	
Name & Address of Perso	n Managing		
Mr Dan Lyons, 74 Lewes Road	d Brighton BN2 3HZ		
Property Description			
Short description of license	d HMO (No of store	eys, etc)	
Property Type = SHARED HO	USE, No of Units =	1, Occupancy = 9, No of Storeys = 3	
Number of Rooms	Total Number	er of Rooms 10	
a) Sleeping 9	b	o) Living Rooms 1	
Number of Self Contained Fl	ats:	0 Number of Non Self Cont. Flats:	1
Shared Amenities	Number D	Description	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	3		
Licence Details			
Commencement date:	27/10/2016	Duration of licence:	02/07/2021
Maximum number of person	s or households no	ermitted to occupy HMO under conditions of	licence:
			nochoc.
Households 9	Persons 9	9	
	residential prope	erty tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	Mandatory conds, HI	MO - Fire Blanket, HMO - Fire Mandatory conds y conds, HMO - Property Chges Mandatory con	

Electrical Works, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Bathroom 3, HMO - Repairs Ventilation 2, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs



## Licence No.

#### 2016/04323/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

45 Osmond Road Hove BN3 1TF

Ward

Goldsmid

Name & Address of Licer	nce Holder		
Alfred Haagman / Lincoln Hol	and Holdings Ltd, Meadowbroo	k House Brook Street Cuckfield RI	H175JJ
Name & Address of Pers	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, etc)		
Property Type = BEDSIT, No	of Units = 11, Occupancy = 11,	No of Storeys = 3	
Number of Deems	Total Number of Deer	0	
Number of Rooms	Total Number of Roon		
a) Sleeping 11	b) Living Ro	ooms 1	
		7	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flat	s: 1
Charad Amenities	Number Description		
Shared Amenities a) Kitchen	Number Description	l	
b) Bathrooms/Showers	3		
c) W.C.s	3		
0, 11.0.0			
Licence Details			
Common comput data:	26/07/2047	Duration of linears	20/07/2024
Commencement date:	26/07/2017	Duration of licence:	28/07/2021
Maximum number of persor	s or households permitted to	occupy HMO under conditions	of licence:
Households 11	Persons 11		
i iouseiioius	L GI 30113		
Information referred to a	residential property tribun	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	cence	- Mandatany aand- UMO - 5 - 22	us Mandatau



## Licence No.

#### 2016/04326/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

Montpelier Cottage 2A Montpelier Road Brighton BN1 2LQ

Ward

Regency

Name & Address of Licen			
Mr Mel Brown, 59 Barbuda Qu	ay Sovereign Harbour	Eastbourne BN23 5SX	
Name & Address of Perso	n Managing		
,			
D			
Property Description			
Short description of license		•	
Property Type = SHARED HO	USE, No of Units = 1, C	Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number	of Rooms 7	
a) Sleeping 6	b) I	iving Rooms 1	
u) diceping	0) L	iving recents	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Fla	ats: 1
Number of Sen Contained Fi	ais.	Number of Non Sen Cont. Fig	115.
Shared Amenities	Number Des	cription	
a) Kitchen	2	Cription	
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	10/01/2017	Duration of licence:	02/07/2021
	1010112011		
Maximum number of person	s or households perm	nitted to occupy HMO under conditions	s of licence:
Households 6	Persons 6		
•			
Information referred to a	residential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie	cence		
		conds, HMO - Furniture Mandatory cond	ls, HMO - Gas



## Licence No.

#### 2016/04338/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

19 Osmond Gardens Osmond Road Hove BN3 1TE

Ward

Goldsmid

Name & Address of Licence Holder		
Mr V Shah, 16 Richmond Court 28 Osmond	Road Hove BN3 1TD	
Name & Address of Person Managing		
,		
Property Description		
Short description of licensed HMO (No of	storevs. etc)	
Property Type = SHARED HOUSE, No of U		
	, , , , , , , , , , , , , , , , , , , ,	
Number of Rooms Total I	Number of Rooms 10	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats	: 1
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s  Number  1  4	Description	
Licence Details		
Commencement date: 25/09	Duration of licence:	02/07/2021
Maximum number of persons or househo	olds permitted to occupy HMO under conditions of	flicence:
Households 10 Persons	10	
Information referred to a residential p	property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence	Andatan, condo LIMO. Eurnituro Mandatan, condo I	HMO Coc



## Licence No.

#### 2016/04367/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

49 Surrey Street Brighton BN1 3PB

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
Mr Philip Young, Heversham H	House 18 - 22 Boundary Roa	ad Hove BN3 4EF	
Name & Address of Perso	on Managing		
Home Leasing Ltd, 64 Queens	Road Brighton BN1 3XD		
Property Description			
Short description of license	d HMO (No of storeys, etc)		
Property Type = SHARED HO	USE, No of Units = 1, Occup	pancy = 5, No of Storeys = 4	
N	T. (.I.N		
Number of Rooms	Total Number of Ro		
a) Sleeping 5	b) Living	Rooms 1	
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Flat	ts: 1
Shared Amenities	Number Descript	ion	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
Commencement date:	22/11/2016	Duration of licence:	04/07/2021
Maximum number of person	s or households permitted	I to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Information referred to a	residential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	HMO - Fire Doors 8, HMO -	- Fire Mandatory conds, HMO - Furnit	

HMO - Elec Mandatory conds, HMO - Fire Doors 8, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Structural Fire Works



## Licence No.

#### 2016/04368/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

48 Surrey Street Brighton BN1 3PB

Ward

St. Peter's And North Laine

Name & Address of Lice	nce Holder	
Mr Philip Young, Heversham	House 18 - 22 Boundary Road Hove BN3 4EF	
Name & Address of Pers	on Managing	
Home Leasing Ltd, 64 Queen	s Road Brighton BN1 3XD	
Property Description		
Short description of license	d HMO (No of storeys, etc)	
Property Type = SHARED HC	OUSE, No of Units = 1, Occupancy = 6, No of Storeys = 4	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping 6	b) Living Rooms 1	
a) Sieeping	b) Living Rooms	
Normalian of Oalf Oantains of F	Number of New Oals Court Flater	4
Number of Self Contained F	Number of Non Self Cont. Flats:	1
Shared Amenities a) Kitchen	Number Description	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Lisanas Bataila		
Licence Details		
Commencement date:	01/11/2016 <b>Duration of licence:</b>	04/07/2021
Maximum number of person	ns or households permitted to occupy HMO under conditions of I	icence:
Households 6	Persons 6	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of li HMO - Elec Mandatory conds	icence , HMO - Fire Doors 8, HMO - Fire Mandatory conds, HMO - Furniture	



## Licence No.

#### 2016/04370/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

32 Trafalgar Street Brighton BN1 4ED

Ward

St. Peter's And North Laine

Name & Address of Licenc	e Holder	
Mrs Pamela Young, Heversham	House 18-22 Boundary Road Hove East Sussex BN3 4EF	
Name & Address of Person	Managing	
Home Leasing Ltd, 64 Queens F	Road Brighton BN1 3XD	
Property Description		
Short description of licensed	HMO (No of storeys, etc)	
Property Type = SHARED HOU	SE, No of Units = 1, Occupancy = 6, No of Storeys = 4	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flat	ts: 0 Number of Non Self Cont. I	Flats: 1
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number  1 2 2	
Licence Details		
Commencement date:	20/12/2016 Duration of licence:	04/07/2021
Maximum number of persons	or households permitted to occupy HMO under conditio	ns of licence:
Households 6	Persons 6	
Information referred to a re	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lice		ndo LIMO. Coo

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Roofs/Chimneys 1, HMO - Repairs Ventilation 3, HMO - Repairs Walls 2, HMO - Repairs Walls 5, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



## Licence No.

#### 2016/04394/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

14 Coleman Street Brighton BN2 9SQ

Ward

Hanover And Elm Grove

Name & Address of Licence	e Holder		
Mr Philip L Skinner, 8 William V	Vay Alton Hampshire GU	34 2UW	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys, et	tc)	
Property Type = SHARED HOL	JSE, No of Units = 1, Occ	cupancy = 6, No of Storeys = 4	
Number of Rooms	Total Number of	Rooms 7	
a) Sleeping	b) Livir	ng Rooms	
Number of Self Contained Fla	ats: 0	Number of Non Self Cont. Flat	ts: 1
Shared Amenities	Number Descri	iption	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Licence Details			
Commencement date:	06/01/2017	Duration of licence:	30/08/2021
maximum number of persons	or nouseholds permitt	ted to occupy HMO under conditions	of licence:
Households 6	Persons 6		
Information referred to a r	esidential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic	ence		



## Licence No.

#### 2016/04479/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 53 Providence Place Brighton BN1 4GE

Ward

St. Peter's And North Laine

Nome O Address of License Helden	
Name & Address of Licence Holder	Dian at
Mr Darren Slight, C/o Associated Property Investors Ltd First Floor 75-78 Earl Grey House Grey Newcastle upon Type NE1 6EE	Street
Name & Address of Person Managing	
Uden Estate Agents, 88 Dyke Road Brighton BN1 3JD	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms Total Number of Rooms 6	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	: 0
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers	
c) W.C.s	
Licence Details	
Commencement date: 13/03/2017 Duration of licence:	19/09/2021
Maximum number of persons or households permitted to occupy HMO under conditions o	f licence:
Households 6 Persons 6	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of licence	

Cooking Appliances, Exit Door, Fire blanket, Fire doors, Gas certificate, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - General 1, HMO - General 6, HMO -General Electrical 1, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, MOE obstruction



## Licence No.

#### 2016/04487/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

31 Robertson Road Brighton BN1 5NL

Ward

Withdean

Name & Address of Licen	ce Holder		
Mr Adam Blackburn, 112 The	Drive Hove BN3 6GP		
Name & Address of Perso	on Managing		
ı			
December 1981			
Property Description	d LIMO (No of otorous oto	<b>\</b>	
Short description of license			
Property Type = SHARED HO	USE, No of Units = 1, Occu	ipancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of R	ooms 6	
a) Sleeping	h) Livino	g Rooms	
a) diceping	b) Living		
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ts: 0
Number of Sen Contained F	als:	Number of Non Self Cont. Fla	is: 0
Shared Amenities	Number Descrip	tion	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	23/12/2016	Duration of licence:	08/08/2021
Maximum number of nersen	a ar hausahalda narmitta	d to coouncy UMO under conditions	of linenes.
waxiiiluiii iluiiiber oi person	s or nousenoids permitte	d to occupy HMO under conditions	of ficerice.
Households 5	Persons 5		
l. (		one of an Landa Talleman	
Information referred to a	residential property trib	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li		ode HMO Eurniture Mandatory conde	NUMO Coo



## Licence No.

#### 2016/04517/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

107A St Georges Road Brighton BN2 1EA

Ward

Queen's Park

Name & Address of Licer	sce Holder		
Vimy Ridge Ltd, 62 St Andrew		ames Oxon RG9 1JD	
, . <b>0</b> ,			
Name & Address of Person O1 Property Letting Limited, 5		0 St. James's Street Brighton East Sussex	England BN2
Property Description			
Short description of license	d HMO (No of storeys	s, etc)	
Property Type = SHARED HC	USE, No of Units = 1,	Occupancy = 7, No of Storeys = 3	
Number of Rooms a) Sleeping 7	<b>Total Number</b> b) L	of Rooms 7 Living Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Des	scription	
Licence Details			
Commencement date:	02/02/2017	Duration of licence:	09/08/2021
Maximum number of persor	s or households pern	mitted to occupy HMO under conditions	of licence:
Households 7	Persons 7		
	residential property	y tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li Additional Facilities, Fire Alari		tory conds, HMO - Fire Mandatory conds,	HMO -



## Licence No.

#### 2016/04518/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

309 Queens Park Road Brighton BN2 9XL

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder		
Mr Tim Nagle, 20 College Roa	d Brighton East Sus	ssex BN2 1JB	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	HMO (No of store	eys, etc)	
Property Type = SHARED HO	USE, No of Units = {	5, Occupancy = 5, No of Storeys = 3	
N	<b>T</b> . (.1.)		
Number of Rooms		er of Rooms 6	
a) Sleeping 5	b	) Living Rooms 1	
Number of Self Contained Fl	ats:	0 Number of Non Self Cont. Flats:	1
Shared Amenities	Number D	Description	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	25/01/2017	Duration of licence:	09/08/2021
Mavino un nombre ef naveau			liaanaa.
maximum number of person	s or nousenoids pe	ermitted to occupy HMO under conditions of	ncence:
Households 5	Persons 5	5	
Information referred to a	residential prope	rty tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie			
		r, HMO - Fire Mandatory conds, HMO - Furniture HMO - Licensing Kitchen 6, HMO - Property Chg	

Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO -Tenant Agrmnt Mandatory conds



## Licence No.

#### 2016/04521/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 53A Crespin Way Brighton BN17FG

Ward

Hollingdean And Stanmer

Name & Address of Licence Holder	
Mr Alan O'Sullivan, 63 South Coast Road Peacehaven BN10 8QP	
Will read to Gamiyan, 60 Court Couct read to Gasonavon Brito Gai	
Name & Address of Person Managing	
,	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms Total Number of Rooms 6	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats:	0
Shared Amenities Number Description	
a) Kitchen 1	
b) Bathrooms/Showers 3	
c) W.C.s	
c) W.C.s 3	00/00/2024
c) W.C.s 3	09/08/2021
Licence Details  Commencement date: 23/12/2016 Duration of licence:	
Licence Details  Commencement date: 23/12/2016 Duration of licence:  Maximum number of persons or households permitted to occupy HMO under conditions of	
Licence Details  Commencement date: 23/12/2016 Duration of licence:  Maximum number of persons or households permitted to occupy HMO under conditions of	
Licence Details  Commencement date: 23/12/2016 Duration of licence:  Maximum number of persons or households permitted to occupy HMO under conditions of	
Licence Details  Commencement date: 23/12/2016 Duration of licence:  Maximum number of persons or households permitted to occupy HMO under conditions of Households 5 Persons 5  Information referred to a residential property tribunal or Lands Tribunal:	
Licence Details  Commencement date: 23/12/2016 Duration of licence:  Maximum number of persons or households permitted to occupy HMO under conditions of Households 5 Persons 5	



#### Licence No.

#### 2016/04525/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

18 Colbourne Avenue Brighton BN2 4GE

Ward

Moulsecoomb And Bevendean

Name & Address of Licence Hol	der	
Mr George Birtwell, 8 Bramble Rise B		
	-	
Name & Address of Person Man	aging	
MTM Property Services Ltd, 108A Lev	wes Road Brighton BN2 4AE	
D ( D ) (		
Property Description	(No of storoug sto)	
Short description of licensed HMO	·	
Property Type = SHARED HOUSE, N	o of Units = 1, Occupancy = 8, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 8	
a) Sleeping 8	b) Living Rooms	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	0
Shared Amenities Num	ber Description	
a) Kitchen 2 b) Bathrooms/Showers 2		
c) W.C.s		
Licence Details		
Commencement date:	31/08/2016 Duration of licence:	05/02/2021
Maximum number of persons or ho	useholds permitted to occupy HMO under conditions of	licence:
Households 8 Perso	ons 8	
	ntial property tribunal or Lands Tribunal:	
None Decision of Tribunal	Reference number	
	Reference number	
<b>Summary of conditions of licence</b> Fire Alarm, HMO - Elec Mandatory co	nds, HMO - Fire Mandatory conds, HMO - Furniture Mandato	ory conds,



#### Licence No.

#### 2016/04529/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

30 Sussex Terrace Brighton BN2 9QJ

Ward

Queen's Park

Name & Address of Licence	Holder		
Mr John T Nash, 30 Sussex Terr	ace Brighton East Sus	sex BN2 9QJ	
Name O Address of Dames.	Managina		
Name & Address of Person			
Lone Nash, 30 Sussex Terrace E	righton East Sussex B	N2 9QJ	
Property Description			
Short description of licensed F	IMO (No of storeys, e	tc)	
Property Type = SHARED HOUS	SE, No of Units = 5, Oc	cupancy = 5, No of Storeys = 4	
		_	
Number of Rooms	Total Number of	Rooms 5	
a) Sleeping	b) Livi	ng Rooms	
Number of Calf Cantains of Flat		Normhan of Nan Calf Cant Flat	· 1
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Flat	ts: 1
Shared Amenities	Number Descri	iption	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	3		
Licence Details			
Commencement date:	13/12/2016	<b>Duration of licence:</b>	02/05/2021
Maximum number of persons of	or households permit	ted to occupy HMO under conditions	of licence:
		- <del></del> 	
Households 5 F	<b>Persons</b> 5		
Information referred to a res	sidential property ti	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licer		onds HMO - Eurniture Mandatory conds	HMO Gas



#### Licence No.

#### 2016/04559/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

78 Upper Lewes Road Brighton BN2 3FF

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		_
Mrs Sheila Mann, 15 Grand Av		5 9HU	
Wils Official Marin, 10 Orana A	reflue ourbiton ourrey ivie	7 31 10	
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, etc	c)	
Property Type = SHARED HO	USE, No of Units = 1, Occ	upancy = 6, No of Storeys = 4	
N	T-(-15)		
Number of Rooms	Total Number of F		
a) Sleeping 6	b) Livin	g Rooms 1	
Number of Self Contained Fi	ats: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number Descrip	otion	
a) Kitchen     b) Bathrooms/Showers	2		
c) W.C.s	2		
,			
Licence Details			
Common common to detail	01/11/2016	Duration of linears	04/07/2024
Commencement date:	01/11/2016	Duration of licence:	04/07/2021
Maximum number of person	s or households permitte	ed to occupy HMO under conditions	of licence:
Households 6	Persons 6		
i iouseiioius 0	i Gradiia U		
Information referred to a	residential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie	cence	O. Fire Alexan Ocateres 5 UMO. Fire I	2

Fire - Under Stairs 3, HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 5, HMO - Fire Doors 8, HMO - Fire Mandatory conds, HMO - Fire Test Certificates, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Kitchen 6, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/04602/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

17 Russell Square	
Brighton	
BN1 2EE	

Ward

Regency

			Wald	rteger	Су
Name & Address of Licence	e Holder				
Mr Frederick Anson Lane, 40 A	nson Court Gunv	wharf Portsmout	h PO1 3BG		
Name & Address of Perso	n Managing				
Parks Residential Ltd, 107 Que	ens Road Brighto	on BN1 3XF			
Property Description					
Short description of licensed	HMO (No of sta	orevs. etc)			
Property Type = SHARED HOL	-		= 6. No of Storevs :	= 4	
		, ,			
Number of Rooms	Total Num	nber of Rooms	7		
a) Sleeping		b) Living Room	าร		
Number of Self Contained Fla	ate:	0	Number of Non Se	If Cont Flats	0
Number of Jen Johnamed Fit	113.	U I	Number of Non Ge	ii oont. i lats.	<u> </u>
Shared Amenities	Number	Description			
a) Kitchen	1				
b) Bathrooms/Showers	1				
c) W.C.s	2				
Licence Details					
Commencement date:	23/12/20	16	Duration of licen	ice:	11/08/2021
Maximum number of persons	or households	normitted to ov	nouny HMO undor	conditions of li	000001
maximum number of persons	or nousenous	permitted to ot	ccupy rivio under	conditions of it	cence.
Households 6	Persons	6			
Information referred to a r	esidential prop	perty tribunal	or Lands Tribuna	al:	
None					
Decision of Tribunal			Reference	number	
Summary of conditions of lic HMO - Elec Mandatory conds.		datory conds. HN	ЛО - Furniture Mand	latory conds. HN	10 - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, LOFT INSULATION, STRUCTURAL FIRE WORKS, Ventilation, aDDITIONAL FACILITIES



#### Licence No.

#### 2016/04623/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

40 Medmerry Hill Brighton BN2 4TQ

Ward

Moulsecoomb And Bevendean

Name & Address of Licen	ice Holder		
Dr Ryan Scott, 4 Rugby Road	Brighton East Sussex BN	I1 6EB	
Name & Address of Perso	on Managing		
Home James Residential Lets	Ltd T/as Home James Le	ets, Kingsway 134-140 Church Road Ho	ove East Sussex
Property Description			
Short description of license	d HMO (No of storeys, e	tc)	
Property Type = SHARED HO	USE, No of Units = 1, Oc	cupancy = 6, No of Storeys = 3	
		_	
Number of Rooms	Total Number of		
a) Sleeping 6	b) Livi	ng Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ats: 1
Shared Amenities	Number Descr	iption	
a) Kitchen	2		
o) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	25/01/2017	Duration of licence:	15/08/2021
Maximum number of person	e or housaholds normit	ted to occupy HMO under conditions	e of licence:
waxiiilalii ilaliibel ol person	s of flousefloids perfilli	ted to occupy nime under conditions	or incentee.
Households 6	Persons 6		
nformation referred to a	residential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	datory conds, HMO - Fire	Mandatory conds, HMO - Furniture Ma	



#### Licence No.

#### 2016/04657/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

63 Bodiam Avenue Brighton BN2 4LN

Ward

Moulsecoomb And Bevendean

Name & Address of Licen	nce Holder
Mr George Birtwell, 63 Bodian	n Avenue Brighton BN2 4LN
Name & Address of Perso	on Managing
,	
Property Description	
Short description of license	d HMO (No of storeys, etc)
Property Type = SHARED HO	OUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3
N	T (III)
Number of Rooms	Total Number of Rooms 8
a) Sleeping 6	b) Living Rooms 1
Number of Self Contained F	lats: 0 Number of Non Self Cont. Flats: 1
Shared Amenities	Number Description
<ul><li>a) Kitchen</li><li>b) Bathrooms/Showers</li></ul>	2 2
c) W.C.s	2
0, 11.0.0	
Licence Details	
Commencement date:	14/09/2016 <b>Duration of licence</b> : 07/03/2021
Maximum number of person	ns or households permitted to occupy HMO under conditions of licence:
Households 6	Persons 6
Information referred to a	residential property tribunal or Lands Tribunal:
None	
Decision of Tribunal	Reference number
Summary of conditions of lie	cence



#### Licence No.

#### 2016/04671/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

81 Hartington Road Brighton BN2 3LS

Ward

Hanover And Elm Grove

lame & Address of Licence Holder	
/Irs Geraldine Buxton, 22 The Park Rottingdean BN2 7GQ	
lame & Address of Person Managing	
Pembertons, 108 Dyke Road Brighton East Sussex BN1 3TE	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
lumber of Rooms 7	
) Sleeping b) Living Rooms	
lumber of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1	
Shared Amenities Number Description	
) Kitchen 1	
) Bathrooms/Showers 2	
) W.C.s	
icence Details	
15/02/03/5	24
Commencement date: 15/03/2017 Duration of licence: 15/06/202	21
Maximum number of persons or households permitted to occupy HMO under conditions of licence:	
louseholds 5 Persons 5	
nformation referred to a residential property tribunal or Lands Tribunal:	
lone	
Pecision of Tribunal Reference number	
Summary of conditions of licence Enlargement of bedrooms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture	



#### Licence No.

#### 2016/04712/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

17 Barcombe Road Brighton BN1 9JQ

Ward

Moulsecoomb And Bevendean

Name & Address of Licen	ce Holder	
Mr Roger Whittington, 6 Brang	wyn Avenue Brighton BN1 8XG	
Nama & Address of Bores	n Managing	
Name & Address of Perso	п мападіпд	
,		
Property Description		
Short description of license	I HMO (No of storeys, etc)	
Property Type = SHARED HO	USE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping 6	b) Living Rooms 1	
Number of Self Contained Fl	ats: 0 Number of Non Self Cont. Flats:	0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description 2 2 2 2	
Licence Details		
Commencement date:	12/09/2013 Duration of licence:	28/05/2018
Maximum number of person	s or households permitted to occupy HMO under conditions of	licence:
Households 6	Persons 6	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lie HMO - Elec Mandatory conds.	cence HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, I	HMO - Gas



### Licence No.

#### 2016/04722/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

12 Hollingdean Road Brighton BN2 4AA

Ward

Hollingdean And Stanmer

Name & Address of Licen	ce Holder			
Mrs Pauline Agg, 45 The Aver	nue Shoreham By S	Sea West Su	ssex BN43 5GJ	
Name & Address of Perso	n Managing			
G4 Lets, 2 Hythe Road Brighton	on BN1 6JS			
Property Description				
Short description of license	d HMO (No of stor	reys, etc)		
Property Type = SHARED HO	USE, No of Units =	= 1, Occupan	cy = 6, No of Storeys = 4	
Number of Rooms	Total Num	ber of Room	ns 7	
a) Sleeping 6		b) Living Ro	oms 1	
Number of Self Contained Fl	ats:	0	Number of Non Self Cont. Flats:	0
Shared Amenities	Number	Description		
a) Kitchen	2			
b) Bathrooms/Showers	3			
c) W.C.s	3			
Licence Details				
Licence Details				
Commencement date:	25/10/201	16	Duration of licence:	22/08/2021
Maximum number of person	s or households	permitted to	occupy HMO under conditions of	icence:
Households 6	Persons	6		
Information referred to a	residential prop	erty tribun	al or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of lie	cence			
HMO - Elec Mandatory conds,	, HMO - Fire Blanke		e Mandatory conds, HMO - Furniture	
Mandatory conds, HMO - Gas	Mandatory conds,	, HMO - Prop	erty Chges Mandatory conds, HMO -	Property

Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire works, Structural Fire works



### Licence No.

#### 2016/04736/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 2 Trinity Street Brighton BN2 3HN

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
Ms Sarah Mackenzie, 40 Rugb	y Road Brighton BN1 6EB		
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	d HMO (No of storeys, etc	c)	
Property Type = SHARED HO	USE, No of Units = 1, Occi	upancy = 5, No of Storeys = 3	
. , ,,			
Number of Rooms	Total Number of R	Rooms 7	
a) Sleeping	b) Livin	g Rooms	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Flat	s: 1
Shared Amenities	Number Descrip	otion	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
<b>0</b>	40/04/0047	B	00/00/0004
Commencement date:	12/01/2017	Duration of licence:	30/08/2021
Maximum number of person	s or households permitte	ed to occupy HMO under conditions	of licence:
	-		
Households 5	Persons 5		
Information referred to a	rocidential <del>prepents tri</del>	hunal ar Landa Tribunal	
Information referred to a	residential property tri	bunar or Lanus Tribunai:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie	cence		



### Licence No.

### 2016/04761/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

12 Devonshire Place Brighton BN2 1QA

Ward

Queen's Park

Name & Address of Licer	nce Holder		
Geneva Investment Group Ltd	d, Geneva House 77A Rutlar	nd Road Hove BN3 5FE	
Name & Address of Pers	on Managing		
,			
D ( D ) (			
Property Description	d IIMO (No of etamos eta)		
Short description of license	-		
Property Type = BEDSIT, No	of Units = 12, Occupancy =	15, No of Storeys = 5	
Number of Rooms	Total Number of Ro	ooms 12	
a) Sleeping 12	b) Living	Rooms 12	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats	s: 1
		<del></del>	
Shared Amenities	Number Descript	tion	
a) Kitchen	12		
b) Bathrooms/Showers c) W.C.s	12		
c) vv.o.3	10		
Licence Details			
		Г	
Commencement date:	07/10/2016	Duration of licence:	30/08/2021
Maximum number of persor	ns or households permitted	d to occupy HMO under conditions o	f licence:
Haveahalda 45	Domono 45		
Households 15	Persons 15		
Information referred to a	residential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Mandatory conds, HMO - Pro	s, HMO - Fire Mandatory con perty Chges Mandatory cond	ds, HMO - Furniture Mandatory conds, ds, HMO - Property Maint Mandatory co Mandatory conds, Management / Repair	onds, HMO -

Fire Works, Other Fire works



### Licence No.

#### 2016/04793/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

12 Dean Street	
Brighton	
BN1 3EG	

Ward

Regency

Name & Address of Licen	ce Holder	
Mr C I Wellings, 2 Westbourne	Street Hove BN3 5PG	
Name & Address of Perso	on Managing	
,		
Property Description		
Short description of license	d HMO (No of storeys, etc)	
Property Type = SHARED HO	USE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping	b) Living Rooms	
Number of Self Contained F	lats: 0 Number of Non Self Con	nt. Flats: 1
Charad Amanitias	Number Description	
Shared Amenities a) Kitchen	Number Description	
b) Bathrooms/Showers	2	
c) W.C.s	3	
,		
Licence Details		
0	00/00/0047	47/00/0004
Commencement date:	28/02/2017 Duration of licence:	17/08/2021
Maximum number of person	s or households permitted to occupy HMO under condi	itions of licence:
Harrack alda 5	<b>B</b> amana <b>5</b>	
Households 5	Persons 5	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference numb	ber
Summary of conditions of li	cence	
	HMO - Fire Doors 4, HMO - Fire Mandatory conds, HMO -	Furniture



### Licence No.

### 2016/04798/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

1 East Drive Brighton BN2 0BQ

Ward

Queen's Park

		vvaru	Queen's Park
Name & Address of Licen	ce Holder		
Mr Mel Wilder, Ryecroft 57 Asi	kham Fields Lane York York	shire YO23 3PS	
Name & Address of Perso	on Managing		
Mr Richard Wilder, 1B Bolney	Avenue Peacehaven East S	ussex BN10 8BD	
Property Description			
Short description of licensed			
Property Type = BEDSIT, No o	of Units = 13, Occupancy = 1	3, No of Storeys = 3	
Number of Rooms	Total Number of Ro	oms 13	
a) Sleeping 13	b) Living	Rooms 13	
, . <del>.</del>	, .		
Number of Self Contained Fl	lats: 0	Number of Non Self	f Cont. Flats:
Shared Amenities	Number Descripti	on	
a) Kitchen	13		
b) Bathrooms/Showers	3		
c) W.C.s	3		
Licence Details			
Commencement date:	26/01/2017	Duration of liceno	ce: 28/09/2021
Maximum number of person	s or households permitted	to occupy HMO under o	conditions of licence:
Hawaahalda 42	Dorono 12		
Households 13	Persons 13		
Information referred to a	residential property trib	unal or Lands Tribuna	1:
None			
Decision of Tribunal		Reference	number
Summary of conditions of lie HMO - Elec Mandatory conds, conds, HMO - Furniture Manda conds, HMO - Property Maint I conds, HMO - Tenant Agrmnt	HMO - Fire Alarm Systems : atory conds, HMO - Gas Mar Mandatory conds, HMO - Re	ndatory conds, HMO - Pro	perty Chges Mandatory



#### Licence No.

#### 2016/04813/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

Flat 5 Kings Gate 10 North Street Brighton RN1 1FR

Ward

Regency

Name & Address of Licen	ce Holder			
Carr Priddle Management Ltd,	34 Ship Street B	Brighton BN1 1.	AD	
Name & Address of Perso	n Managing			
,				
Property Description				
Short description of license	d HMO (No of sto	oreys, etc)		
Property Type = SHARED HO	USE, No of Units	s = 1, Occupan	cy = 6, No of Storeys = 3	
1 7 71				
Number of Rooms	Total Nur	mber of Room	ns 7	
a) Sleeping 6		b) Living Ro	oms 1	
Number of Self Contained F	ats:	0	Number of Non Self Cont. Flats:	1
			_	
Shared Amenities	Number	Description		
a) Kitchen	2			
b) Bathrooms/Showers	5			
c) W.C.s	5			
Licence Details				
Commencement date:	22/11/20	116	Duration of licence:	30/08/2021
	22/11/20	<i>y</i> 1.0		00/00/2021
Maximum number of person	s or households	s permitted to	occupy HMO under conditions of I	icence:
Households 6	Persons	6		
TIOUS U	1 6130113	U		
Information referred to a	residen <u>tial pro</u>	perty tribun	al or Lands Trib <u>unal:</u>	
None		,		
Decision of Tribunal			Reference number	
Summary of conditions of lie HMO - Elec Mandatory conds.		datory conds.	HMO - Furniture Mandatory conds, H	MO -

Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



### Licence No.

#### 2016/04859/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

51 Egremont Place Brighton BN2 0GB

Ward

Queen's Park

Name & Address of Licence Holder	
SAFPRE Europe S A, 01-27 7 Ocean Way Singapore 098390	
Name & Address of Person Managing	
S J Lettings Ltd, 52 Lewes Road Brighton BN2 3HW	
December December 1999	
Property Description  Short description of licensed HMO (No of storage atc)	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms Total Number of Rooms 6	
a) Sleeping b) Living Rooms 1	
Number of Self Contained Flats: 0 Number of Non Self Cont. Fla	ats: 1
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s  Number Description  2 2	
Licence Details	
Commencement date: 17/01/2017 Duration of licence:	30/08/2021
Maximum number of persons or households permitted to occupy HMO under conditions	of licence:
Households 5 Persons 5	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of licence HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory cond	ls. HMO - Gas



#### Licence No.

#### 2016/04868/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

72 Albion Hill Brighton BN2 9NX

Ward

Hanover And Elm Grove

Name & Address of Licence Holder
Mr E Savvides, 131 Kings Road Brighton BN1 2HH
Name & Address of Person Managing
My Lets Ltd, Amelia House Crescent Road Worthing West Sussex BN11 1QR
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3
Number of Rooms 8 Total Number of Rooms 8
a) Sleeping b) Living Rooms 1
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1
Shared Amenities Number Description
a) Kitchen 2
b) Bathrooms/Showers 2
c) W.C.s
Licence Details
Commencement date: 25/01/2017 Duration of licence: 30/06/2021
25/37/2517
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Households 6 Persons 6
nouseriolus 0 reisolis 0
Information referred to a residential property tribunal or Lands Tribunal:
None
Decision of Tribunal Reference number
Summary of conditions of licence HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas



#### Licence No.

#### 2016/04895/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

8 St Pauls Street Brighton BN2 3HR

Ward

St. Peter's And North Laine

Name & Address of Licence Holder	
Haydan Ltd, 28 Fourth Avenue Hove East Sussex BN3 2PJ	
Name & Address of Person Managing	
Dan Lyons, 74 Lewes Road Brighton East Sussex BN2 3HZ	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy =	6, No of Storeys = 4
Number of Rooms Total Number of Rooms	7
a) Sleeping b) Living Rooms	1
1, 1 1 1, 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Number of Self Contained Flats: 0 Nu	umber of Non Self Cont. Flats:
Shared Amenities Number Description	
a) Kitchen 2	
b) Bathrooms/Showers 2	
c) W.C.s 2	
Licence Details	
07/40/0040	04/00/0004
Commencement date: 27/10/2016	Duration of licence: 01/09/2021
Maximum number of persons or households permitted to occ	upy HMO under conditions of licence:
Households 6 Persons 6	
1 6130113	
Information referred to a residential property tribunal or	r Lands Tribunal:
None	
Decision of Tribunal	Reference number
Summary of conditions of licence HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Ma	andatory conds, HMO - Furniture



#### Licence No.

#### 2016/04900/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

17 Viaduct Road Brighton BN1 4NB

Ward

St. Peter's And North Laine

Name & Address of Licence Holder			
Mrs Fiona Glare, 23 Cissbury Crescent Saltdean BN2 8PN			
Name & Address of Person Managing			
Kendrick Property Services Ltd, Carlton House 28-29 Carlton Terrace Brighton BN41 1UR			
Property Description			
Short description of licensed HMO (No of storeys, etc)			
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3			
Number of Rooms Total Number of Rooms 6  a) Sleeping b) Living Rooms			
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0			
Shared Amenities  A) Kitchen  D) Bathrooms/Showers  C) W.C.s			
Licence Details			
Commencement date: 17/05/2017 Duration of licence: 02/07/202	1		
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
Households 6 Persons 6			
nformation referred to a residential property tribunal or Lands Tribunal:			
None			
Decision of Tribunal Reference number			
Summary of conditions of license			

GF Shower Room /WC, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - General 1, HMO - General 6, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO -Tenant Agrmnt Mandatory conds, Hand rails, Lounge Door, kitchen sink



#### Licence No.

#### 2016/04944/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

1 Coronation Street Brighton BN2 3AQ

Ward

Hanover And Elm Grove

Nama O Addusas a <del>f L'assa</del>	an Haldan		
Name & Address of Licen			
Mr Phil Donovan, Sunset Down	1 Henfield Rd Henfield B	N5 9XJ	
N 0.4.11 (B			
Name & Address of Perso	n Managing		
,			
D ( D ) (			
Property Description			
Short description of licensed	l HMO (No of storeys, e	etc)	
Property Type = SHARED HO	JSE, No of Units = 1, Oc	ccupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 6	
a) Sleeping	b) Livi	ing Rooms	
Number of Self Contained Fla	ats: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number Descr	ription	
a) Kitchen	1		
b) Bathrooms/Showers c) W.C.s	1 2		
c) w.o.s			
Licence Details			
		1	
Commencement date:	30/12/2016	Duration of licence:	03/07/2021
Maximum number of persons	s or households nermit	tted to occupy HMO under conditions	of licence:
Households 5	Persons 5		
	esidential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic	ence		



#### Licence No.

#### 2016/04951/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

43 Bear Road Brighton BN2 4DB

Ward

Moulsecoomb And Bevendean

Name & Address of Licer	nce Holder		
Mrs Margaret Francis, Heathle	ands Bramshaw Lyndhurst	t SO43 7JJ	
Name & Address of Pers	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, et	tc)	
Property Type = SHARED HC	OUSE, No of Units = 1, Occ	cupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 10	
a) Sleeping ###		ng Rooms 3	
a) Sieepilig	b) Livii	ig Rooms	
Number of Self Contained F	late: 0	Number of New Self Cont. El	ats: 1
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fl	als:
Shared Amenities	Number Descri	intion	
a) Kitchen	1	ption	
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	05/02/2018	Duration of licence:	21/06/2021
Maximum number of persor	is or households permitt	ted to occupy HMO under condition	s of licence:
Households 5	Persons 5		
Information referred to a	residential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li			
HMO - Elec Mandatory conds	, HMO - Fire Mandatory co	onds, HMO - Furniture Mandatory cond	ds, HMO - Gas



#### Licence No.

#### 2016/04953/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

32 Dudley Road Brighton BN1 7GN

Ward

Hollingdean And Stanmer

Name & Address of Licence	e Holder		
Mr Tim Connor, 15 Mount Pleas	ant King James Lane F	Henfield BN5 9ER	
Name & Address of Person			
Brighton Homes, 3 St Georges F	vace Brighton BN1 4GA	4	
Property Description			
Short description of licensed I	HMO (No of storeys, e	tc)	
Property Type = SHARED HOUS	SE, No of Units = 1, Oc	cupancy = 6, No of Storeys = 3	
		_	
Number of Rooms	Total Number of	Rooms 7	
a) Sleeping	b) Livi	ng Rooms	
Number of Self Contained Flat	s: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number Descr	intion	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	3		
Licence Details			
Commencement date:	02/03/2017	Duration of licence:	17/09/2021
Maximum number of persons	or households permit	ted to occupy HMO under conditions	of licence:
Households 6 I	Persons 6		
nousellolus 0	reisons		
Information referred to a re	sidential property ti	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice		onds HMO - Furniture Mandatory conds	s HMO - Gas



#### Licence No.

#### 2016/04955/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

152 Birdham Road Brighton BN2 4RR

Ward

Moulsecoomb And Bevendean

Name & Address of Licence	Holder	
Ms Guiling Guo, 3 Adams Close B		
Wis Culling Cuo, o Adams Close B	Ingilion Bitt 7110	
Name & Address of Person N	Managing	
,		
Property Description		
Short description of licensed HI	MO (No of storeys, etc)	
Property Type = SHARED HOUSE	E, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping 6	b) Living Rooms 1	
Number of Self Contained Flats:	Number of Non Self Cont. Flats:	0
Shared Amenities N	umber Description	
a) Kitchen	2	
b) Bathrooms/Showers	2	
c) W.C.s	2	
,		
Licence Details		
Commencement date:	13/01/2017 Duration of licence:	01/09/2021
Commencement date:	13/01/2017 Duration of licence:	01/09/2021
Maximum number of persons or	households permitted to occupy HMO under conditions of lie	cence:
Households 6 Pe	ersons 6	
Tiousenoius 0 1 e	0	
Information referred to a resi	dential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licendary	ce Flec Mandatory conds HMO - Fire Mandatory conds HMO - Furi	niture

ADDITIONAL FACILITIES, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, STRUCTURAL FIRE WORKS, VENTILATION



#### Licence No.

#### 2016/04957/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

2 Gordon Road Brighton BN1 6PD

Ward

Withdean

Name & Address of Licence	e Holder		
Mr Tim Connor, 15 Mount Pleas	sant King James Lane I	Henfield BN5 9ER	
Name & Address of Person	n Managing		
Brighton Homes, 3 St Georges	Place Brighton BN1 4G	A	
December 19 and			
Property Description	LIMO (No of otomore o	4-1	
Short description of licensed			
Property Type = SHARED HOU	JSE, No of Units = 1, Oc	cupancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 7	
a) Sleeping	b) Liv	ing Rooms	
Number of Self Contained Fla	its: 0	Number of Non Self Cont. Flat	s: 1
Shared Amenities	Number Descr	iption	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	3		
Licence Details			
	20/20/20/2	l	(=:a=:a=:
Commencement date:	02/03/2017	Duration of licence:	17/09/2021
Maximum number of persons	or households permit	ted to occupy HMO under conditions	of licence:
Households 7	Persons 7		
		-	
Information referred to a re	esidential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice	ence		



#### Licence No.

#### 2016/04980/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

21 St Mary Magdalene Street Brighton BN2 3HU

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder			
Seaside Capital Ltd, 48 Hill Bro	ow Hove East Sus	sex BN3 6QH		
Name & Address of Perso	n Managing			
D&L Property Services Ltd, 2 A	Ashford Road Brigh	nton East Sus	sex BN1 6LJ	
Property Description				
Short description of licensed	d HMO (No of sto	reys, etc)		
Property Type = SHARED HO	USE, No of Units =	= 1, Occupano	cy = 6, No of Storeys = 4	
Number of Rooms	Total Num	ber of Room	s 7	
a) Sleeping 6		b) Living Roo	oms 1	
Number of Self Contained Fl	ats:	0	Number of Non Self Cont. Flats:	0
Shared Amenities	Number	Description		
a) Kitchen	2			
b) Bathrooms/Showers	2			
c) W.C.s	2			
Licence Details				
Commencement date:	12/10/201	6	Duration of licence:	30/03/2021
Maximum number of person	e or households :	normitted to	occupy HMO under conditions of li	conco:
maximum number of person	s of flousefloids	permitted to	occupy nime under conditions of in	Cence.
Households 6	Persons	6		
Information referred to a	residential prop	erty tribuna	al or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of lic HMO - Elec Mandatory conds,		atory conds, I	HMO - Furniture Mandatory conds, HM	ЛО - Gas



#### Licence No.

#### 2016/05014/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

42 Hawkhurst Road Brighton BN1 9GF

Ward

Hollingdean And Stanmer

Name & Address of Licen	ce Holder		
Mr John Wright, 36 Green Rid	ge Brighton East Sussex	x BN1 5LL	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	HMO (No of storevs.	etc)	
-	-	occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number o	of Rooms 6	
a) Sleeping	b) Li	ving Rooms	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Flats	s: 0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description 1 2 2 2	cription	
Licence Details			
Commencement date:	13/01/2017	Duration of licence:	08/09/2021
Maximum number of person	s or households perm	itted to occupy HMO under conditions o	of licence:
Households 6	Persons 6		
Information referred to a	residential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie		conde HMO Eurniture Mandatory conde	HMO Gas



### Licence No.

### 2016/05022/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

52 Brading Road Brighton BN2 3PD

Ward

Hanover And Elm Grove

Name & Address of Licen	ica Holder		
Mr Brett Vallier, 182 Balfour R			
Name & Address of Licen			
Mr Gary Vallier, 47 Langdale F			
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, etc)		
Property Type = SHARED HO	USE, No of Units = 1, Occup	pancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Ro	oms 6	
a) Sleeping 6	b) Living		
a) olcoping	b) Living	TOOMS	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fl	ats: 1
Number of Sen Contained in	ats.	Number of Non Self Cont. 11	ats.
Shared Amenities	Number Descripti	ion	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Licence Details			
Commencement date:	28/11/2016	<b>Duration of licence:</b>	05/10/2021
Maximum number of nerson	o or households normitted	l to occupy UMO under condition	o of licenses
Maximum number of person	s or nousenoids permitted	to occupy HMO under condition	s of ficefice.
Households 6	Persons 6		
lu Common d'annum Common de			
Information referred to a	residential property tribi	unal or Lands Tribunal:	
None	HMO Fire Doors 9 HMO	Fire Mandatomy canda LIMO - Furn	nituro
Mandatory conds, HMO - Gas	Mandatory conds, HMO - Pi	Fire Mandato <b>perendsceปMภาษ</b> สหา roperty Chges Mandatory conds, HI	MO - Property
saintmarv catebnerners-UMA	ceReabishRecyc Mandatory	conds, HMO - Tenant Agrmnt Mand	datory conds



#### Licence No.

#### 2016/05047/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

68 Riley Road Brighton BN2 4AH

Ward

Moulsecoomb And Bevendean

Name & Address of Lice	nce Holder		
Mr & Mrs P & M Hilliard, 76 T		DD	
Wild Wild Calvi Tilliara, 70 T	The broveway Flove bivo o	T IX	
Name & Address of Pers	on Managing		
,	····		
<u>,                                      </u>			
Property Description			
Short description of license	ed HMO (No of storeys, e	etc)	
Property Type = SHARED HO	OUSE, No of Units = 1, Oc	cupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 6	
a) Sleeping	b) Livi	ing Rooms	
Number of Self Contained F	Flats: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number Descr	iption	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	26/01/2017	Duration of licence:	25/06/2021
Maximum number of person	is or households permit	ted to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Information referred to a	residential property to	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of I	icence		



#### Licence No.

#### 2016/05051/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

45 Gladstone Place Brighton BN2 3QE

Ward

Hanover And Elm Grove

Name & Address of Licence Holder	
Mr P & Mrs M Hilliard, 76 The Droveway Hove East Sussex BN3 6PR	
Name O Address of Barrers Managiner	
Name & Address of Person Managing	
,	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 4	
Number of Rooms Total Number of Rooms 7	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont	. Flats:
Number of deli contained rists.	1 1013.
Shared Amenities Number Description	
a) Kitchen 1	
b) Bathrooms/Showers 2	
c) W.C.s	
Licence Details	
Commencement date: 30/01/2017 Duration of licence:	26/06/2021
Maximum number of persons or households permitted to occupy HMO under conditi	ions of licence:
Households 6 Persons 6	
Todascriotas 0 Tersons 0	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	er
Summary of conditions of licence	· 14



#### Licence No.

#### 2016/05067/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

285 Queens Park Road Brighton BN2 9XL

Ward

Hanover And Elm Grove

Name & Address of Licence	e Holder		
Mr P & Mrs M Hilliard, 76 The D	roveway Hove East Sus	sex BN3 6PR	
Name & Address of Persor	Managing		
Capital Home Loans, Admiral H	ouse Harlington Way Fle	et Hampshire GU51 4YA	
Property Description			
Short description of licensed		•	
Property Type = SHARED HOU	SE, No of Units = 5, Occ	supancy = 5, No of Storeys = 4	
Number of Rooms	Total Number of I	Rooms 6	
a) Sleeping	b) Livir	ng Rooms	
, , , ,	,		
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Flat	es: 1
Shared Amenities	Number Descri	ption	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	3		
Licence Details			
Commencement date:	23/01/2017	<b>Duration of licence:</b>	26/06/2021
Maximum number of persons	or households permitt	ed to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Information referred to a re	esidential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice	ance		
Cammany of Conditions of fice	/110C		



#### Licence No.

#### 2016/05077/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

14 Islingword Street Brighton BN2 9UR

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder		
Mr & Mrs P & M Hilliard, 76 Th	e Droveway Hove BN3 6F	PR	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	d HMO (No of storeys, et	c)	
Property Type = SHARED HO	USE, No of Units = 5, Occ	supancy = 5, No of Storeys = 4	
Number of Rooms	Total Number of F	Rooms 6	
a) Sleeping	b) Livin	ng Rooms	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Flat	ts: 1
Shared Amenities	Number Descrip	ption	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Liberioe Betails			
Commencement date:	23/01/2017	Duration of licence:	26/06/2021
Maximum number of person	s or households permitte	ed to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Information referred to a	residential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie	rence		



#### Licence No.

#### 2016/05100/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

259 Old Shoreham Road Portslade BN41 1XS

Ward

South Portslade

Name & Address of Licence Holder		
Mr Robert Brooks, 16 Park Street Brighton BN2 0BS		
IIII Tobort Brooke, To Fair Casest Brighton Bive obe		
Name & Address of Person Managing		
Mr Paul Nash, 8 Bristol Street Brighton BN2 5JT		
Property Description		
Short description of licensed HMO (No of storeys	etc)	
Property Type = SHARED HOUSE, No of Units = 6, 0	Occupancy = 7, No of Storeys = 3	
Number of Rooms Total Number	of Rooms 7	
a) Sleeping b) L	iving Rooms	
Number of Self Contained Flats: 0	Number of Non Self Cont. Flats:	0
Shared Amenities Number Des	cription	
Shared Americas Number Des		
a) Kitchen 1	оприон ————————————————————————————————————	
a) Kitchen 1 b) Bathrooms/Showers 4		
a) Kitchen 1 b) Bathrooms/Showers 4		
a) Kitchen 1 b) Bathrooms/Showers 4		
a) Kitchen 1 b) Bathrooms/Showers 4 c) W.C.s 3		42/40/2024
a) Kitchen 1 b) Bathrooms/Showers 4 c) W.C.s 3	Duration of licence:	12/10/2021
a) Kitchen 1 b) Bathrooms/Showers 4 c) W.C.s 3	Duration of licence:	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  17/08/2017  Maximum number of persons or households perm	Duration of licence:	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  1 1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Duration of licence:	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  17/08/2017  Maximum number of persons or households perm	Duration of licence:	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  17/08/2017  Maximum number of persons or households perm Households 7  Persons 7	Duration of licence:	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  17/08/2017  Maximum number of persons or households perm Households 7  Persons 7  Information referred to a residential property	Duration of licence:	



#### Licence No.

#### 2016/05107/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

88 Shaftesbury Road Brighton BN1 4NG

Ward

St. Peter's And North Laine

Name & Address of Licence Ho	older	
Ms Alison Trinder, 42 Fitzgerald Ave		
	· · · · · · · · · · · · · · · · · · ·	
Name & Address of Person Ma	naging	
Mr David Burt, 49 Station Road Pole	gate BN26 6EA	
Property Description		
Short description of licensed HMC	O (No of storeys, etc)	
Property Type = SHARED HOUSE,	No of Units = 1, Occupancy = 8, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 9	
a) Sleeping	b) Living Rooms	
Number of Solf Contained Eleter	Number of Non Solf Cont. Flate:	0
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	0
Shared Amenities Nur	mber Description	
	1	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Commencement date:	16/11/2016 Duration of licence:	28/06/2021
Maximum number of persons or h	ouseholds permitted to occupy HMO under conditions of li	cence:
Households 8 Pers	sons 8	
Information referred to a reside	ential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence	- Fire Mandatory conds. HMO - Furniture Mandatory conds. HM	IO - Gas



#### Licence No.

#### 2016/05114/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

14 Robertson Road Brighton BN1 5NL

Ward

Withdean

Name & Address of Licer			
Ms Alison Trinder, 14 Fitzgera	ld Avenue Seaford BN25 1	AZ	
Nama <sup>9</sup> Address of Dara	on Monoging		
Name & Address of Person			
Mr David Burt, 49 Station Roa	u Folegale BN20 0EA		
Property Description			
Short description of license	d HMO (No of storeys, et	c)	
Property Type = Not Assigned	I, No of Units = 1, Occupar	icy = 5, No of Storeys = 3	
Number of Rooms	Total Number of F	Rooms 6	
a) Sleeping	b) Livin	g Rooms	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats	s: 1
01	N. alaa Baad		
Shared Amenities a) Kitchen	Number Descrip	otion	
b) Bathrooms/Showers	1		
c) W.C.s	2		
Licence Details			
Commencement date:	06/01/2017	Duration of licence:	14/07/2021
dominencement date.	00/01/2017	Burution of nectice.	14/01/2021
Maximum number of persor	s or households permitte	ed to occupy HMO under conditions o	of licence:
Households 5	Persons 5		
Information referred to a	residential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	cence		



#### Licence No.

#### 2016/05147/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

86 Milner Road Brighton BN2 4BP

Ward

Moulsecoomb And Bevendean

Name & Address of Licence Holder				
Pelham Property Ltd, 7-9 The Avenue Eastbourne East Sussex BN21 3YA				
Name & Address of Person Managing				
Arington Ltd, 15 Station Road Burgess Hill West Sussex RH15 9DE				
Property Description				
Short description of licensed HMO (No of storeys, etc)				
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3				
Number of Rooms Total Number of Rooms 6				
a) Sleeping b) Living Rooms 1				
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats:	1			
Shared Amenities Number Description				
a) Kitchen 1				
b) Bathrooms/Showers 1				
c) W.C.s				
Licence Details				
Literite Details				
Commencement date: 10/11/2016 Duration of licence: 15	5/09/2021			
Maximum number of persons or households permitted to occupy HMO under conditions of licence	ce:			
Households 5 Persons 5				
Information referred to a residential property tribunal or Lands Tribunal:				
None				
Decision of Tribunal Reference number				
Summary of conditions of licence Additional Facilities, Enlargement of Bedroom, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO -	nds,			

Additional Facilities, Enlargement of Bedroom, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs



#### Licence No.

#### 2016/05162/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

8 Shanklin Road Brighton BN2 3LQ

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder			
Mr P & Mrs M Hilliard, 76 The [	Droveway Hove East S	ussex BN3 6PR		
Name & Address of Perso	n Managing			
,				
Property Description				
Short description of licensed	HMO (No of storeys,	etc)		
-	-	Occupancy = 5, No of Storeys = 3		
	, , , , , , , , , , , , , , , , , , , ,			
Number of Rooms	Total Number of	of Rooms 6		
a) Sleeping	b) Li	ving Rooms		
Number of Self Contained Fla	ats: 0	Number of Non Self Cont. Flat	ts: 1	
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description 1 2 2 2 2	cription		
Licence Details				
Commencement date:	30/01/2017	Duration of licence:	26/06/2021	
Maximum number of persons	or households perm	itted to occupy HMO under conditions	of licence:	
Households 5	Persons 5			
Information referred to a r	esidential property	tribunal or Lands Tribunal:		
None				
Decision of Tribunal		Reference number		
Summary of conditions of lic		condo UMO. Eurnituro Mondotory condo	LIMO Coo	



#### Licence No.

#### 2016/05179/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

105 Moulsecoomb Way Brighton BN2 4PE

Ward

Moulsecoomb And Bevendean

Name & Address of Lice				
Mr Mark Barrowcliffe, 7 Wyk	eham Terrace Brighton BN1 3FF			
Name & Address of Pers	son Managing			
	URSA Court 108A Lewes Road Brighton BN2 4AE			
	<b>3</b>			
Property Description				
Short description of licens	ed HMO (No of storeys, etc)			
Property Type = SHARED H	OUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3			
Number of Rooms	Total Number of Rooms 7			
a) Sleeping 6	b) Living Rooms 1			
Normalis and a final of October 1	Flater Name of Name Oalf Coart Flater	0		
Number of Self Contained	Flats: 0 Number of Non Self Cont. Flats:	0		
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description 2 2 2 2			
Licence Details				
		10/00/0001		
Commencement date:	18/01/2017 Duration of licence:	16/09/2021		
Maximum number of perso	ons or households permitted to occupy HMO under conditions of	licence:		
Households 6	Persons 6			
Information referred to a	a residential property tribunal or Lands Tribunal:			
None				
Decision of Tribunal	Reference number			
Summary of conditions of HMO - Elec Mandatory cond	licence s, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, F	IMO - Gas		



#### Licence No.

#### 2016/05180/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 61 Eastbourne Road Brighton BN2 4DL

Ward

Moulsecoomb And Bevendean

Short description of licensed HMO (No of storeys, etc)  Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 8, No of Storeys = 3
Name & Address of Person Managing  Property Description  Short description of licensed HMO (No of storeys, etc)  Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 8, No of Storeys = 3
Property Description  Short description of licensed HMO (No of storeys, etc)  Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 8, No of Storeys = 3
Property Description  Short description of licensed HMO (No of storeys, etc)  Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 8, No of Storeys = 3
Short description of licensed HMO (No of storeys, etc)  Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 8, No of Storeys = 3
Short description of licensed HMO (No of storeys, etc)  Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 8, No of Storeys = 3
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 8, No of Storeys = 3
Number of Rooms Total Number of Rooms 8
a) Sleeping b) Living Rooms
Number of Oalf Contained Flates
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
Shared Amenities Number Description
a) Kitchen
b) Bathrooms/Showers
c) W.C.s
9,
Licence Details
Licence Details  Commencement date: 11/12/2014 Duration of licence: 15/09/2019
Licence Details
Licence Details  Commencement date: 11/12/2014 Duration of licence: 15/09/2019
Licence Details  Commencement date: 11/12/2014 Duration of licence: 15/09/2019  Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households 8 Persons 8
Licence Details  Commencement date: 11/12/2014 Duration of licence: 15/09/2019  Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households 8 Persons 8  Information referred to a residential property tribunal or Lands Tribunal:
Licence Details  Commencement date: 11/12/2014 Duration of licence: 15/09/2019  Maximum number of persons or households permitted to occupy HMO under conditions of licence:



#### Licence No.

#### 2016/05202/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

64 Viaduct Road Brighton BN1 4ND

Ward

St. Peter's And North Laine

Name & Address of Licence Holder
Mr Tom Ghibaldan, 59 Braemore Road Hove East Sussex BN3 4HA
Name & Address of Person Managing
Cambridge Brand Vaughan Ltd, Amelia House Crescent Road Worthing West Sussex BN11 1QR
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3
Number of Rooms Total Number of Rooms 7
a) Sleeping b) Living Rooms 1
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1
Shared Amenities Number Description
a) Kitchen 2 b) Bathrooms/Showers 2
c) W.C.s 2
Licence Details
Commencement date: 21/11/2016 Duration of licence: 19/09/2021
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Households 6 Persons 6
Information referred to a recidential property tribunal or Landa Tribunal
Information referred to a residential property tribunal or Lands Tribunal:
Nana
None  Design of Tribunal  Design of Tribunal
None  Decision of Tribunal Reference number



#### Licence No.

#### 2016/05209/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

19 Park Crescent Road Brighton BN2 3HT

Ward

St. Peter's And North Laine

Name & Address of Licen	ice Holder				
Powis Property Investments L	td, 330 Dyke Road Bright	on BN1 5BB			
Name & Address of Perso	on Managing				
,					
Property Description					
Short description of license	d HMO (No of storeys, e	etc)			
Property Type = SHARED HO	USE. No of Units = 1. Oc	ccupancy = 6, No of Storeys = 3			
	.,				
Number of Rooms	Total Number of	Rooms 7			
a) Sleeping	a) Sleeping b) Living Rooms				
Number of Self Contained F	Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1				
Number of Jen Johnamed I	o o	Number of Non-Sen Sont. Flat	1		
Shared Amenities	Number Descr	ription			
a) Kitchen	1 Descri	iption			
b) Bathrooms/Showers	2				
c) W.C.s	3				
,					
Licence Details					
		1			
Commencement date:	08/02/2017	Duration of licence:	04/10/2021		
Maximum number of person	e or households normit	tted to occupy HMO under conditions	of licence:		
maximum number of person	a or monacholda hellilli	ted to occupy rimo under conditions	of incellee.		
Households 6	Persons 6				
Information referred to a	residential property t	ribunal or Lands Tribunal:			
None					
Decision of Tribunal		Reference number			
Summary of conditions of li	cence				
Jummary of Conditions of It	SELLCE				



#### Licence No.

#### 2016/05233/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 5 Kings Mews Hove BN3 2PA

Ward

Central Hove

Name & Address of Licen	ice Holder		
Mr Ian Parsons, 70 Langdale I	Road Hove East Sเ	ussex BN3 4HP	
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license	d HMO (No of stor	reys, etc)	
Property Type = SHARED HO	USE, No of Units =	= 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Numi	ber of Rooms 5	
a) Sleeping <b>5</b>		b) Living Rooms	
a) Sieeping		b) Living Rooms	
Number of Self Contained F	lats:	0 Number of Non Self Cont. Flats	: 0
• • • • • • • • • • • • • • • • • • • •		<b>-</b>	
Shared Amenities		Description	
a) Kitchen b) Bathrooms/Showers	2		
c) W.C.s	2		
,			
Licence Details			
	4.4/00/004		00/00/0004
Commencement date:	14/08/201	7 Duration of licence:	20/09/2021
Maximum number of person	s or households p	permitted to occupy HMO under conditions o	f licence:
	_		
Households 5	Persons	5	
Information referred to a	residential prop	erty tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li-	conco		
	, HMO - Fire Doors	3, HMO - Fire Locks, HMO - Fire Mandatory corry conds, HMO - Property Chges Mandatory cor	

Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/05236/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

39 Blaker Street Brighton BN2 0JJ

Ward

Queen's Park

Name & Address of Licence	e Holder				
Mrs Linda Harmer-Strange, T/a	Grosvenor Properties T	udor Grange 13 The Upper Drive Hove E	BN3 6GR		
Name & Address of Person	Managing				
Mrs & Mr Linda & Steve Harmer	-Strange, Tudor Grang	e 13 The Upper Drive Hove BN3 6GR			
Property Description					
Short description of licensed	HMO (No of storeys, e	etc)			
Property Type = SHARED HOU	SE, No of Units = 1, Oc	ccupancy = 5, No of Storeys = 3			
Number of Rooms	Total Number of	Rooms 9			
a) Sleeping b) Living Rooms					
Number of Self Contained Flat	ts: 0	Number of Non Self Cont. Flats	: 1		
Shared Amenities		ription			
a) Kitchen b) Bathrooms/Showers					
c) W.C.s	2				
,					
Licence Details					
		1			
Commencement date:	31/01/2018	Duration of licence:	03/10/2021		
Maximum number of persons	or households permit	tted to occupy HMO under conditions o	f licence:		
	_	1			
Households 5	Persons 5				
Information referred to a re	sidential property t	ribunal or Lands Tribunal:			
None	oraciniar property t	Historia of Editation in Suntain			
Decision of Tribunal		Reference number			
Summary of conditions of lice	nce				



#### Licence No.

#### 2016/05238/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

3 Egremont Place Brighton BN2 0GA

			vvard	Queen's	Park
Name & Address of Licen	ce Holder				
Mrs Linda Harmer-Strange, T/a	a Grosvenor Pro	operties Tudor G	Grange 13 The Up	per Drive Hove BN3	6GR
Name & Address of Perso	n Managing				
,					
Property Description					
Short description of licensed	I HMO (No of s	toreys, etc)			
Property Type = SHARED HO	USE, No of Unit	ts = 1, Occupan	cy = 6, No of Store	eys = 3	
Number of Rooms	Total Ni	umber of Room	ns 8		
a) Sleeping 6					
-,		·, J			
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1					1
Shared Amenities	Number	Description			
a) Kitchen	2				
b) Bathrooms/Showers	2				
c) W.C.s	1				
Licence Details					
				_	
Commencement date:	01/02/2	2017	Duration of li	icence:	03/10/2021
Maximum number of persons	s or household	ds permitted to	occupy HMO un	der conditions of li	icence:
Have about	<b>D</b>				
Households 6	Persons	6			
Information referred to a r	residential pr	operty tribuna	al or Lands Trib	unal:	
None					
Decision of Tribunal			Refere	nce number	
Summary of conditions of lic HMO - Elec Mandatory conds.		ors 4, HMO - Fir	re Mandatory cond	ds, HMO - Furniture	

Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/05240/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

19 Elm Grove Brighton BN2 3ET

Ward

Hanover And Flm Grove

		Transfer 7	3,0,0
Name & Address of Licen	ce Holder		
Mrs & Mr Linda & Steve Harm		Properties Tudor Grange 13 The Upp	er Drive Hove
DNIS ECD			
Name & Address of Perso	on Managing		
Property Description			
Short description of license	d HMO (No of storeys, et	c)	
Property Type = SHARED HO	USE, No of Units = 1, Occ	cupancy = 6, No of Storeys = 4	
		_	
Number of Rooms	Total Number of F		
a) Sleeping 6	b) Livin	ng Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	nts: 1
Shared Amenities	Number Descrip	ption	
a) Kitchen	2		
) Bathrooms/Showers	2		
c) W.C.s	3		
icence Details			
	0.1/20/20.47		27/22/222/
Commencement date:	01/02/2017	Duration of licence:	25/09/2021
Maximum number of person	s or households permitte	ed to occupy HMO under conditions	of licence:
_	_		
Households 6	Persons 6		
nformation referred to a	residential property tri	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summany of conditions of li	conco		
Summary of conditions of lied HMO - Flee Mandatory conds		inds HMO - Furniture Mandatory cond	s HMO - Gas

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/05242/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

9 White Street Brighton BN2 0JH

		Ward	Queen's	Park
Name & Address of Licen	ce Holder			
Mrs Linda Harmer-Strange, T/		or Grange 13 The Driv	e Hove BN3 6GR	
	·			
Name & Address of Perso	on Managing			
Mr Steve & Mrs Linda Harmer	-Strange, Tudor Grange 13	The Upper Drive Hove	BN3 6GR	
Property Description				
Short description of license	d HMO (No of storeys, etc)			
Property Type = SHARED HO	-		ve = 3	
Topolty Type - OHAILD HO	- 1, Occup	Janey – 5, No or Glore	<del>,                                    </del>	
Number of Rooms	Total Number of Ro	ooms 7		
a) Sleeping 5	b) Living	Rooms 1		
Number of Self Contained F	lats: 0	Number of Non	Self Cont. Flats:	1
Shared Amenities	Number Descript	ion		
a) Kitchen b) Bathrooms/Showers	2			
c) W.C.s	2			
o,e.c				
Licence Details				
Commencement date:	13/02/2017	Duration of lie	cence:	05/10/2021
Commencement date.	13/02/2017	Duration of in	serice.	03/10/2021
Maximum number of person	s or households permitted	I to occupy HMO und	ler conditions of li	icence:
Households 5	Persons 5			
Information referred to a	residential property trib	unal or Lands Trib	unal:	
None				
Decision of Tribunal		Referer	nce number	
Summary of conditions of lied		· Fire Mandatory cond	s, HMO - Furniture	

Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/05248/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

6 Cobden Road Brighton BN2 9TL

Ward

Hanover And Elm Grove

	Ward	Tidilovei Alid Ellii Giove
Name & Address of Licence H	older	
Mrs Linda Harmer-Strange, T/a Gro	svenor Properties Tudor Grange 13 Th	he Upper Drive Hove BN3 6GR
Name & Address of Person Ma	anaging	
,		
Property Description		
Short description of licensed HM	O (No of storeys, etc)	
Property Type = SHARED HOUSE,	No of Units = 1, Occupancy = 5, No of	f Storeys = 3
Number of Rooms	Total Number of Rooms 7	
a) Sleeping 5	b) Living Rooms	1
November of Oak Oantain ad Flater	Normalis on a	A Non Oak Oant Flater
Number of Self Contained Flats:	0 Number o	of Non Self Cont. Flats: 1
Shared Amenities Nu	mber Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
_		
Commencement date:	08/02/2017 <b>Duratio</b>	on of licence: 05/10/2021
Maximum number of persons or I	nouseholds permitted to occupy HM	O under conditions of licence:
Households 5 Per	sons 5	
Information referred to a resid	ential property tribunal or Lands	s Tribunal:
None		
Decision of Tribunal	R	Reference number
Summary of conditions of licence		v condo UMO Euroituro
mivio - Elec ivialidatory conds, HMC	- Fire Doors 8, HMO - Fire Mandatory	y conus, nivio - rumiture



#### Licence No.

#### 2016/05262/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

141 Ringmer Road Brighton BN1 9JA

Ward

Moulsecoomb And Bevendean

Novo O Addusos of Liconos Holdon	
Name & Address of Licence Holder	
Miss Julia Hearder, 41 Lynchet Close Brighton BN1 7FP	
Name 9 Address of Dayson Managing	
Name & Address of Person Managing	
,	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 7, No of Storeys = 3	
Troperty Type – Orbital Frodon, No or office – 1, Goodparity – 1, No or officeys – 5	
Number of Rooms Total Number of Rooms 7	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont.	Flats: 0
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers	
c) W.C.s	
Licence Details	
Commencement date: 23/05/2017 Duration of licence:	13/09/2021
Maximum number of persons or households permitted to occupy HMO under condition	ons of licence:
Households 7 Persons 7	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	•
Summary of conditions of license	
Summary of conditions of licence	INAC Francistran



#### Licence No.

#### 2016/05265/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

23 Riley Road Brighton BN2 4AG

Ward

Moulsecoomb And Bevendean

Name & Address of Licen	sce Holder		
Mr N Stavrou, 15 Hanover Me			
IVII IN Staviou, 13 Hanovel IVIE	ws brighton bive 9110		
Name & Address of Perso	on Managing		
1141110 47 1441 000 01 1 0101	,aagg		
,			
Property Description			
Short description of license	d HMO (No of storevs. e	etc)	
•		cupancy = 5, No of Storeys = 3	
Floperty Type – SHARED HO	USE, NO OF OTHES - 1, OC	cupancy = 5, No or Storeys = 5	
Number of Rooms	Total Number of	Rooms 6	
a) Sleeping	b) Livi	ing Rooms	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	its: 1
	3		
Shared Amenities	Number Descr	iption	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	18/01/2017	Duration of licence:	05/07/2021
Commencement date.	10/01/2017	buration of ficerice.	03/01/2021
Maximum number of person	s or households permit	ted to occupy HMO under conditions	of licence:
Households 5	Persons 5		
nousellolus 5	Fe130115 5		
Information referred to a	residential property to	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	cence		



#### Licence No.

#### 2016/05266/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

25 White Street Brighton BN2 0JH

Ward

Queen's Park

Name & Address of Licence	ce Holder		
Interuni Ltd, 15 Hanover Mews	Brighton BN2 9HU		
Nama & Address of Baras	n Managing		
Name & Address of Person	5 5		
Mr Niko Stavrou, 15 Hanover M	lews Brighton BN2 9HU		
Property Description			
Short description of licensed	HMO (No of storeys, ε	etc)	
Property Type = SHARED HOL	JSE, No of Units = 1, Oc	ccupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 6	
a) Sleeping	b) Liv	ing Rooms	
Number of Self Contained Fla	ats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number Descr	ription	
a) Kitchen	1		
b) Bathrooms/Showers	3		
c) W.C.s	3		
Licence Details			
Commencement date:	18/01/2017	Duration of licence:	05/07/2021
Maximum number of persons	s or households permit	ted to occupy HMO under conditions of	· licence:
-	•	· •	
Households 5	Persons 5		
Information referred to a re	esidential proper <u>ty t</u>	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic	ence		



#### Licence No.

#### 2016/05271/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

41 Blaker Street Brighton BN2 0JJ

Ward

Queen's Park

Name & Address of Licence Holder	
Interuni Ltd, 15 Hanover Mews Brighton BN2 9HU	
Name & Address of Person Managing	
Mr Niko Stavrou, 15 Hanover Mews Brighton BN2 9HU	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys =	3
Number of Rooms Total Number of Rooms 7	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self	Cont. Flats: 1
Shared Amenities Number Description	
a) Kitchen 1	
b) Bathrooms/Showers 2 c) W.C.s 2	
Licence Details	
Commencement date: 18/01/2017 Duration of licence	ee: 05/07/2021
Commencement date: 18/01/2017 Duration of licence  Maximum number of persons or households permitted to occupy HMO under c	
Maximum number of persons or households permitted to occupy HMO under c  Households 6 Persons 6	onditions of licence:
Maximum number of persons or households permitted to occupy HMO under c	onditions of licence:
Maximum number of persons or households permitted to occupy HMO under c  Households 6 Persons 6  Information referred to a residential property tribunal or Lands Tribuna	onditions of licence:



#### Licence No.

#### 2016/05273/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

42 Montreal Road Brighton BN2 9UY

Ward

Hanover And Elm Grove

		Traile Traile Very	2
Name & Address of Licer	ice Holder		
Mrs Linda Harmer-Strange, Ta	a Grosvenor Properties Tu	dor Grange 13 The Upper Drive Hove	BN3 6GR
Name & Address of Pers			
Mrs & Mr Linda & Steve Harm	er-Strange,		
Property Description			
Short description of license	d HMO (No of storeys, et	c)	
Property Type = SHARED HC	-		
Number of Rooms	Total Number of F	Rooms 9	
a) Sleeping	b) Livin	g Rooms	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flat	ts: 1
Shared Amenities	Number Descri	ntion	
a) Kitchen	1	50011	
b) Bathrooms/Showers	1		
c) W.C.s	2		
Licence Details			
Commencement date:	30/03/2017	Duration of licence:	03/10/2021
Maximum number of persor	ns or households permitte	ed to occupy HMO under conditions	of licence:
-	_		
Households 5	Persons 5		
Information referred to a	residential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	cence		



#### Licence No.

#### 2016/05282/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

21 White Street Brighton BN2 0JH

Ward

Queen's Park

Name & Address of Licen	ce Holder		
Mr Nikos Stavrou, 15 Hanover	Mews Brighton BN2 9HU	J	
Name 0 Address of Dame	. Managara		
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	i HMO (No of storeys, e	etc)	
-	-	cupancy = 6, No of Storeys = 3	
	, , , , , , , , , , , , , , , , , , ,		
Number of Rooms	Total Number of	Rooms 7	
a) Sleeping	b) Livi	ing Rooms	
Number of Self Contained Fla	ats: 0	Number of Non Self Cont. Flats	: 1
Shared Amenities	Number Descr	iption	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commonosment date:	19/01/2017	Duration of licenses	05/07/2024
Commencement date:	18/01/2017	Duration of licence:	05/07/2021
Maximum number of persons	s or households permit	ted to occupy HMO under conditions of	flicence:
Households 6	Persons 6		
3	<u> </u>	1	
Information referred to a r	esidential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic	ence		



#### Licence No.

#### 2016/05286/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

32 St Martins Place Brighton BN2 3LE

Ward

Hanover And Elm Grove

Name & Address of Licence	Holder	
Mr N Stavrou, 15 Hanover Mews	Brighton BN2 9HU	
Name & Address of Person	Managing	
,		
Property Description		
Short description of licensed H	MO (No of storeys, etc)	
Property Type = SHARED HOUS	E, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping	b) Living Rooms	
a, c.ccpg	2)	
Number of Self Contained Flats	: 0 Number of Non Self Cont. Flats	s: 1
Number of Self Contained Flats	Number of Non Sen Cont. Flats	). <u> </u>
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s	Number Description  1 2 2	
Licence Details		
Commencement date:	18/01/2017 <b>Duration of licence:</b>	05/07/2021
Maximum number of persons of	or households permitted to occupy HMO under conditions o	of licence:
Households 5 P	ersons 5	
Information referred to a res	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licen	nce	



#### Licence No.

#### 2016/05288/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

17 Blaker Street Brighton BN2 0JJ

Ward

Queen's Park

Name & Address of Licence			
Interuni Ltd, 15 Hanover Mews B	Brighton BN2 8HU		
Name & Address of Person	Managing		
Mr Niko Stavrou, 15 Hanover Me	ews Brighton BN2 9HU		
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOU	SE, No of Units = 1, Occupancy = 6, No	of Storeys = 3	
Number of Rooms	Total Number of Rooms 7		
a) Sleeping	b) Living Rooms		
Number of Self Contained Flat	s: 0 Number	r of Non Self Cont. Flats:	1
Shared Amenities	Number Description		
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	18/01/2017 <b>Durat</b>	tion of licence: 0	5/07/2021
Maximum number of persons	or households permitted to occupy F	JMO under conditions of licen	00'
maximum number of persons	or nousenoids permitted to occupy i	inio ander conditions of licent	ce.
Households 6	Persons 6		
Information referred to a re	sidential property tribunal or Lan	de Tribunal:	
	sidential property tribulial or Lail	ius mounai.	
None Parising of Talbana		Defenses must	
Decision of Tribunal		Reference number	
Summary of conditions of lice	nce		



#### Licence No.

#### 2016/05289/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

28 Newmarket Road Brighton BN2 3QF

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder			
Mr Anthony Lunt, 64 Queens F	Road Brighton East S	ussex BN1 3XD		
Name & Address of Perso	n Managing			
Home Leasing Ltd, 18 Hyde G	ardens Eastbourne E	N21 4PT		
Property Description				
Short description of licensed	-	•		
Property Type = SHARED HO	USE, No of Units = 1	, Occupancy = 5, No of Storeys =	= 3	
Number of Rooms	Total Numbe	r of Rooms 6		
a) Sleeping 5	b)	Living Rooms 1		
	- ,	<b>J</b>		
Number of Self Contained FI	ats:	Number of Non Sel	If Cont. Flats:	1
		<u>,                                      </u>		·
Shared Amenities	Number De	escription		
a) Kitchen	1	-		
b) Bathrooms/Showers	1			
c) W.C.s	2			
Licence Details				
	1			
Commencement date:	13/02/2017	Duration of licen	ice:	11/10/2021
Maximum number of person	s or households pe	rmitted to occupy HMO under	conditions of li	cence:
Households 5	Persons 5			
Information referred to a <b>i</b>	residential proper	ty tribunal or Lands Tribuna	al:	
None				
Decision of Tribunal		Reference	number	
	HMO - Fire Doors 8,	HMO - Fire Mandatory conds, H		Property



#### Licence No.

#### 2016/05333/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

5 Clyde Road Brighton BN1 4NN

Ward

St. Peter's And North Laine

Nama & Address of Licer	aca Haldar		
Name & Address of Licen		Vest Cureau DNE OV I	
Mr Phil Donovan, Sunset Dow	n Hentiela Ra Hentiela W	rest Sussex BN5 9XJ	
Nama & Address of Bares	on Monoging		
Name & Address of Person	on Managing		
,			
Duanauty Description			
Property Description	d LIMO (No. of atomore, a	4-1	
Short description of license			
Property Type = SHARED HO	USE, No of Units = 1, Oc	cupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 7	
a) Sleeping	D) LIVI	ing Rooms	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number Descr	iption	
<ul><li>a) Kitchen</li><li>b) Bathrooms/Showers</li></ul>	2		
c) W.C.s	2		
c) w.o.s			
Licence Details			
Commencement date:	30/12/2016	Duration of licence:	03/07/2021
Maximum number of person	s or households normit	ted to occupy HMO under conditions	of licence:
maximum number of person	a or nousenoius periilit	ted to occupy rimo under conditions	or notine.
Households 6	Persons 6		
Information referred to a	residential property t	ribunal or Lands Tribunal:	
None			
HOHE			
Decision of Tribunal		Reference number	



#### Licence No.

#### 2016/05336/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

46 Viaduct Road Brighton BN1 4ND

Ward

St. Peter's And North Laine

Nome C Address of License Holder	
Name & Address of Licence Holder	
Mr Phil Donovan, Sunset Down Henfield Rd Henfield West Sussex BN5 9XJ	
Name 9 Address of Davis Managing	
Name & Address of Person Managing	
,	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys =	3
Number of Rooms Total Number of Rooms 6	
a) Sleeping b) Living Rooms	
2) 2.1 mg 1.00 mg	
Number of Self Contained Flats: 0 Number of Non Self	Cont. Flats:
Number of Self Contained Flats:	Cont. Flats:
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s  Number  1  1  c) W.C.s	
Licence Details	
Commencement date: 30/12/2016 Duration of licence	e: 03/07/2021
Maximum number of persons or households permitted to occupy HMO under co	onditions of licence
Households 5 Persons 5	
Información referend to a recidential menerato teibrosal en landa Teibrosal	
Information referred to a residential property tribunal or Lands Tribunal	
None  Posicion of Tribunal  Poferona a	
Decision of Tribunal Reference n	iumper
Summary of conditions of licence	to a second distribution of the



#### Licence No.

#### 2016/05365/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

11 Terminus Road Brighton BN1 3PD

Ward

St. Peter's And North Laine

Name & Address of Licence	Holder	
Mr Tim Clapham, 95 Ditchling Roa	nd Brighton BN1 4ST	
Name & Address of Person N	Managing	
,		
<b>D</b>		
Property Description	10 (No. 5 (10 no. 11))	
Short description of licensed HI		
Property Type = SHARED HOUSE	E, No of Units = 5, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 5	
a) Sleeping	b) Living Rooms	
-,	, J	
Number of Self Contained Flats	0 Number of Non Self Cont. Flats	s: 1
	Training of their control of their contr	
Shared Amenities N	umber Description	
a) Kitchen	1	
b) Bathrooms/Showers	1	
c) W.C.s	2	
Licence Details		
Commencement date:	03/01/2017 Duration of licence:	06/07/2021
Maximum number of nersons of	householde nermitted to economy UNIO under conditions of	of licenses
maximum number of persons of	households permitted to occupy HMO under conditions o	or incence:
Households 5 Pe	ersons 5	
	dential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
	20	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - General 1, HMO - General 6, HMO - General 7, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Kitchen, Stairs, WHBs



#### Licence No.

#### 2016/05393/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

171 Queens Park Road Brighton BN2 0GH

Ward

Hanover And Elm Grove

Name & Address of Licenc	e Holder	
Mr & Mrs Phillip & Maria Samou	el, Ladyland Farm Meath Green Lane Horley Surrey RH6 85A	
Name & Address of Person	Managing	
,		
Property Description		
Short description of licensed	HMO (No of storevs. etc)	
·	SE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Topolly Type Olivities	52, the di dillice II, descapancy of the di dicitate	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flat	s: 0 Number of Non Self Cont. Flats:	1
Shared Amenities a) Kitchen	Number Description	
b) Bathrooms/Showers	1	
c) W.C.s	2	
Licence Details		
Commencement date:	22/12/2016 Duration of licence:	30/10/2021
Maximum number of persons	or households permitted to occupy HMO under conditions of lic	conco:
maximum number of persons		ence.
Households 5	Persons 5	
Information referred to a re	sidential property tribunal or Lands Tribunal:	
None	placement property tribunal of Euras Tribunal.	
Decision of Tribunal	Reference number	
Summary of conditions of lice	nce MO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HM	O - Gas



#### Licence No.

#### 2016/05398/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

141 Queens Park Road Brighton BN2 0GH

Ward

Hanover And Elm Grove

Name & Address of Licence Holder	
Mrs Maria Samouel, Ladyland Farm Meath Green Lane Horley RH6 8JA	
Name & Address of Person Managing	
Lloyds Bank,	
Proceeds Describées	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 6, Occupancy = 6, No of Storeys = 3	
Number of Rooms Total Number of Rooms 8	
a) Sleeping b) Living Rooms	
a) diceping b) Living Rooms	
Number of Oalf Contained Flater	Flate: 4
Number of Self Contained Flats: 0 Number of Non Self Cont.	. Flats: 1
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s  Number Description  2 2	
Licence Details	
Commencement date: 22/12/2016 Duration of licence:	30/10/2021
Maximum number of persons or households permitted to occupy HMO under conditi	ons of licence:
Households 6 Persons 6	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	er
Summary of conditions of licence	anda HMO Caa



#### Licence No.

#### 2016/05425/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 39 Old Shoreham Road Brighton BN1 5DQ

Ward

**Preston Park** 

Name & Address of Licence Ho	older	
Mr Tim Clapham, 95 Ditchling Road	Brighton BN1 4ST	
Name & Address of Person Ma	anaging	
,		
Property Description		
Short description of licensed HMC	O (No of storeys, etc)	
Property Type = SHARED HOUSE,	No of Units = 10, Occupancy = 15, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 10	
a) Sleeping	b) Living Rooms	
Number of Oak Oastein at Flate.	North an of New Oalf Oant Flater	0
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	0
Shared Amenities Nur	mber Description	
a) Kitchen		
b) Bathrooms/Showers		
b) battilooms/showers		
c) W.C.s		
•		
c) W.C.s  Licence Details		
c) W.C.s	15/03/2017 Duration of licence:	13/09/2021
c) W.C.s  Licence Details  Commencement date:	15/03/2017 Duration of licence:	
c) W.C.s  Licence Details  Commencement date:  Maximum number of persons or h		
c) W.C.s  Licence Details  Commencement date:  Maximum number of persons or h  Households  15  Pers	nouseholds permitted to occupy HMO under conditions of I	
c) W.C.s  Licence Details  Commencement date:  Maximum number of persons or h  Households  15  Pers	nouseholds permitted to occupy HMO under conditions of I	
c) W.C.s  Licence Details  Commencement date:  Maximum number of persons or h  Households  15  Pers  Information referred to a reside	nouseholds permitted to occupy HMO under conditions of I	

Fiore locks, Fire Blanket, Fire doors, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO -Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - General 1, HMO - General 6, HMO -Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Ventilation, WHB, Windows



#### Licence No.

#### 2016/05441/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

77 Queens Park Road Brighton BN2 0GJ

Ward

Queen's Park

Name & Address of Licenc	a Holder	
	arm Meath Green Lane Horley RH6 8JA	
Wild Maria Garrioudi, Ladylaria 1 c	in Weath Green Earle Honey Kine 60/K	
Name & Address of Persor	Managing	
,		
Property Description		
Short description of licensed	HMO (No of storeys, etc)	
Property Type = SHARED HOU	SE, No of Units = 5, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping	b) Living Rooms	
Number of Self Contained Fla	ts: 0 Number of Non Self Cont. Flats	s: 1
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description  1 1 2	
Licence Details		
Commencement date:	05/01/2017 <b>Duration of licence:</b>	30/10/2021
Maximum number of persons	or households permitted to occupy HMO under conditions o	of licence:
Households 5	Persons 5	
Information referred to a re	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lice	ence	



#### Licence No.

#### 2016/05442/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

86 Roundhill Crescent Brighton BN2 3FR

Ward

St. Peter's And North Laine

Name & Address of Licence	e Holder	
Mr Indra Kumar, 33 Portland Ave	enue New Malden KT3 6AY	
Name & Address of Person	Managing	
1		
Property Description		
Short description of licensed h	HMO (No of storevs. etc)	
-	SE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flat	s: 0 Number of Non Self Cont. Fla	ats: 0
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	1	
c) W.C.s	1	
Licence Details		
Commencement date:	13/01/2017 Duration of licence:	17/10/2021
Maximum number of persons	or households permitted to occupy HMO under conditions	s of licence:
Households 5 F	Persons 5	
Information referred to a re-	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lice		



#### Licence No.

#### 2016/05454/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

206 Elm Grove Brighton BN2 3DA

Ward

Hanover And Elm Grove

Name & Address of Licence Holder	
Seaside Capital Ltd, 48 Hill Brow Hove East Sussex BN3 6QH	
Name & Address of Person Managing	
Mr Eric Wilkinson, T/a Wilkinson Property Services 26 Elm Grove Brighton BN2 3DA	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 4, No of Storeys = 3	
Number of Rooms Total Number of Rooms 4	
a) Sleeping 4 b) Living Rooms 1	
a) Olecphig 5) Living Rooms 1	
Number of Self Contained Flats: 0 Number of Non Self Cont. Fla	ats: 0
Number of Self Contained Flats.	ats. U
Shared Amenities Number Description	
a) Kitchen 1	
b) Bathrooms/Showers 1	
c) W.C.s	
Licence Details	
Commencement date: 18/01/2017 Duration of licence:	13/09/2021
Maximum number of persons or households permitted to occupy HMO under conditions	s of licence:
Households 4 Persons 4	
Households 4 Persons 4	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of licence HMO - Flec Mandatory conds HMO - Fire Mandatory conds HMO - Furniture Mandatory cond	ls HMO - Gas



#### Licence No.

#### 2016/05472/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

60 Newmarket Road Brighton BN2 3QF

Ward

Hanover And Elm Grove

Name & Address of Licence	e Holder		
Mrs J Simmons, 64 Queens Roa	ad Brighton BN1 3XD		
Name & Address of Person	Managing		
Home Leasing Ltd, 18 Hyde Gar	dens Eastbourne BN21	4PT	
December December the se			
Property Description	UMO (No of atomore of	٥١	
Short description of licensed	-		
Property Type = SHARED HOU	SE, NO OF UNITS = 1, OCC	supancy = 6, No of Storeys = 4	
Number of Rooms	Total Number of F	Rooms 6	
a) Sleeping	b) Livir	ng Rooms	
Number of Self Contained Flat	s: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Descri	ption	
Licence Details			
Commencement date:	06/12/2017	Duration of licence:	20/10/2021
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
Households 6	Persons 6		
Information referred to a re	sidential property tri	ibunal or Lands Tribunal:	
Information referred to a re	sidential property tri	ibunal or Lands Tribunal:	
	sidential property tri	ibunal or Lands Tribunal:  Reference number	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - General 1, HMO - General 6, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, HMO Management, Management, Management, Not Assigned, management



#### Licence No.

#### 2016/05474/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

12 Rushlake Road Brighton BN1 9AD

Hollingdean And Stanmer

		vvaru	Hollinguean Al	iu Stariniei
Name & Address of Licen	co Holder			
		0 " 11 1 5	# DI 4 0DA	
Brighton Student Developmen	ts Ltd, C/O North Quay Ho	use Sutton Harbour Ply	mouth PL4 0RA	
VI 0.4.1. (D				
Name & Address of Perso				
M Harrington Trading As Harri	ngtons Lettings, 109 Weste	ern Road Hove East S	Sussex BN3 1FA	
Property Description				
Short description of license	d HMO (No of storeys, etc	<b>;</b> )		
Property Type = SHARED HO	USE, No of Units = 1, Occi	upancy = 6, No of Store	eys = 3	
Number of Rooms	Total Number of R	Rooms 6		
<u> </u>				
a) Sleeping 6	b) Livin	g Rooms 1		
Number of Self Contained F	lats: 0	Number of Non	Self Cont. Flats:	0
Shared Amenities	Number Descrip	otion		
a) Kitchen	2			
b) Bathrooms/Showers c) W.C.s	2 2			
5) W.O.3				
Licence Details				
				7
Commencement date:	02/11/2016	Duration of li	cence:	04/10/2021
Maximum number of person	s or households permitte	ed to occupy HMO und	der conditions of li	cence:
		ra to occupy imic and	20. 00.101.010 0	
Households 6	Persons 6			
Information referred to a	residential property tri	bunal or Lands Trib	unal:	
None				
Decision of Tribunal		Referei	nce number	
Summary of conditions of lie  Additional Facilities, HMO - Ele  Mandatory conds, HMO - Gas	ec Mandatory conds, HMO	•		Property

Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs



#### Licence No.

#### 2016/05500/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

3 Totland Road Brighton BN2 3EP

Ward

Hanover And Elm Grove

Name & Address of Licence	Holder		
Mr Mark Rayward, Blackstone G	ange Blackstone Nr Henfi	eld West Sussex BN5 9TB	
Name & Address of Person	Managing		
G4 Lets, 2 Hythe Road Brighton	BN1 6JS		
Property Description			
Short description of licensed H	IMO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Occup	ancy = 6, No of Storeys = 3	
Number of Decision	Total Name of S	<b>7</b>	
Number of Rooms	Total Number of Ro		
a) Sleeping	b) Living	Rooms	
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Flats:	0
Shared Amenities	Number Descripti	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Licence Details			
Commencement date:	27/01/2017	Duration of licence:	03/10/2021
Maximum number of persons of	or households permitted	to occupy HMO under conditions of	licence:
Households 6 P	ersons 6		
Information referred to a res	sidential property tribu	ınal or Lands Tribunal	
None	nachtial property tribt	mai or Lands Tribunai.	
Decision of Tribunal		Reference number	
Decision of Tribunal		Kelefelice Hullibel	
Summary of conditions of licer	100		



#### Licence No.

#### 2016/05502/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

3 Elm Grove Brighton BN2 3ET

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder		
Mr Ian Cunningham, Mill Farm	Downs Lane Yetminster	Sherborne Dorset DT9 6NJ	
Name & Address of Perso			
G4 Lets, 2 Hythe Road Brighto	n BN1 6JS		
Property Description			
Short description of licensed	I HMO (No of storeys, et	tc)	
Property Type = SHARED HOU	JSE, No of Units = 7, Occ	cupancy = 7, No of Storeys = 4	
Number of Deems	Total Number of	Daama 0	
Number of Rooms	Total Number of		
a) Sleeping 7	b) Livir	ng Rooms 1	
Number of Calf Contained Flo	-ta:	Number of New Colf Cont. Fla	
Number of Self Contained Fla	ats: 0	Number of Non Self Cont. Fla	its: 0
Shared Amenities	Number Descri	ption	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	3		
Licence Details			
Commencement date:	21/07/2017	Duration of licence:	18/09/2021
Maximum number of persons	s or households permitt	ted to occupy HMO under conditions	of licence:
Households 7	Persons 7		
	,		
Information referred to a r	esidential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic		- Fire Mandatory conds HMO - Furnit	ure Mandatory



#### Licence No.

#### 2016/05519/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

17 New England Road Brighton BN1 3TU

Ward

Preston Park

Name & Address of Licer			
Mr Christopher Townsend, 3 [	Dancers Way Greenwich Lo	ondon SE8 3FG	
Nama <sup>9</sup> Address of Dara	on Monoging		
Name & Address of Personal Shallow Hollis D&L Proporty S		d Brighton BN1 6LJ 01273 600160	
Shelley Hollis, D&L Property C	Services Liu. 2 Asiliolu Roa	d Brighton Bivi OL3 01273 000 100	
Property Description			
Short description of license	d HMO (No of storeys, etc	:)	
Property Type = SHARED HC	USE, No of Units = 1, Occu	upancy = 5, No of Storeys = 3	
		· · ·	
Number of Rooms	Total Number of R	ooms 6	
a) Sleeping	b) Living	g Rooms	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number Descrip	tion	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
_			
Commencement date:	06/01/2017	Duration of licence:	05/10/2021
Maximum number of persor	s or households permitte	d to occupy HMO under conditions	of licence:
Households 5	Persons 5		
	. 5.00110		
Information referred to a	residential property trik	ounal or Lands Tribunal:	
None			
HOLIC			
Decision of Tribunal		Reference number	



#### Licence No.

#### 2016/05520/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

16 Bath Street Brighton BN1 3TB

Ward

St. Peter's And North Laine

Name & Address of Licence Holder	
Mr Stephen Hardwick, 204 Church Road Hove BN3 2DJ	
Name & Address of Person Managing	
Ms Georgia Hardwick, 204 Church Road Hove BN3 2DJ	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 4	
Number of Basses 5	
Number of Rooms Total Number of Rooms 5	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Co	ont. Flats: 1
Observed Association and Association and Association	
Shared Amenities Number Description	
a) Kitchen 1 b) Bathrooms/Showers 3	
c) W.C.s	
U W.O.S	
Licence Details	
	101101001
Commencement date: 05/10/2017 Duration of licence:	16/10/2021
Commencement date: 05/10/2017 Duration of licence:  Maximum number of persons or households permitted to occupy HMO under cond	
Maximum number of persons or households permitted to occupy HMO under cond	
Maximum number of persons or households permitted to occupy HMO under cond	
Maximum number of persons or households permitted to occupy HMO under cond Households 5 Persons 5	
Maximum number of persons or households permitted to occupy HMO under cond Households 5 Persons 5  Information referred to a residential property tribunal or Lands Tribunal:	ditions of licence:

HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management Repairs, Management/Repairs, Structural Fire Works



#### Licence No.

#### 2016/05551/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

22 Bonchurch Road Brighton BN2 3PH

Ward

Hanover And Elm Grove

Name & Address of Licence	e Holder		
Ms Joy Simmons, 64 Queens R			
Name & Address of Persor	n Managing		
Home Leasing Brighton Ltd, 18	Hyde Gardens Eastbourne	BN21 4PT	
Dranaghy Dagazintian			
Property Description Short description of licensed	HMO (No of storous, atc)		
-	-	any - 6. No of Staroya - 4	
Property Type = SHARED HOU	SE, NO OI OIIIS = 1, Occupai	icy = 6, No of Storeys = 4	
Number of Rooms	Total Number of Rooi	ms 6	
a) Sleeping	b) Living Ro	ooms	
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Flats:	0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description	1	
Licence Details			
Commencement date:	06/12/2017	Duration of licence:	20/10/2021
Maximum number of persons	or households permitted to	o occupy HMO under conditions of	licence:
Households 6	Persons 6		
Information referred to a re	esidential property tribur	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Cooking appliance, Fire Doors, Fire doors, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - General 1, HMO - General 6, HMO - General 7, HMO - General Electrical 1, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Shower Room, Smoke alarm, Stairs, Ventilation



#### Licence No.

#### 2016/05562/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

232 Queens Park Road Brighton BN2 9ZB

Ward

Queen's Park

Name & Address of Licenc	e Holder
Mr Nigel Parsons, Court Farm V	Vest Chiltington Lane Billingshurst RH14 9DL
Name & Address of Persor	n Managing
,	
Property Description	
Short description of licensed	HMO (No of storeys, etc)
Property Type = SHARED HOU	JSE, No of Units = 1, Occupancy = 6, No of Storeys = 3
Number of Rooms	Total Number of Rooms 7
a) Sleeping	b) Living Rooms
-, <u> </u>	3 11 1
Number of Self Contained Fla	ts: 0 Number of Non Self Cont. Flats: 0
rumber of ben bontained i la	Number of Non-Cent Cont. Flats.
Shared Amenities	Number Description
a) Kitchen	1
b) Bathrooms/Showers	2
c) W.C.s	2
License Deteile	
Licence Details	
Commencement date:	18/01/2017 <b>Duration of licence</b> : 07/11/2021
Maximum number of persons	or households permitted to occupy HMO under conditions of licence:
Households 6	Persons 6
Information referred to a re	esidential property tribunal or Lands Tribunal:
None	
Decision of Tribunal	Reference number
Summary of conditions of lice	ence



#### Licence No.

#### 2016/05581/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

86 Widdicombe Way Brighton BN2 4TJ

Ward

Moulsecoomb And Bevendean

Name & Address of Lice	nce Holder		
Mrs Palvi Patel, 1 Bernard Pl	ace Springfield Road Ewell Eas	t Epsom KT17 3DX	
Name & Address of Pers	on Managing		
John Hilton Ltd, 127 Lewes F	Road Brighton BN2 3LG		
Property Description			
Short description of license	ed HMO (No of storeys, etc)		
Property Type = SHARED He	OUSE, No of Units = 1, Occupar	ncy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Roor	ms 6	
a) Sleeping 5	b) Living Ro	ooms 1	
, , , ,	, 0		
Number of Self Contained	Flats: 0	Number of Non Self Cont. Fl	ats: 1
Shared Amenities	Number Description	1	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	04/01/2017	Duration of licence:	28/09/2021
Maximum number of perso	ns or households permitted to	o occupy HMO under conditions	s of licence:
Households 5	Persons 5		
Information referred to a	residential property tribur	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of HMO - Elec Mandatory cond		HMO - Fire Test Certificates, HM	O - Furniture



#### Licence No.

#### 2016/05606/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

11 Caledonian Road Brighton BN2 3HX

Ward

St. Peter's And North Laine

Name & Address of Licence Holder		
Mr Chris Osmond, 274 Cooden Drive Bexhill	On Sea East Sussex TN39 3AB	
Name & Address of Person Managing		
S J Lettings Ltd, 52 Lewes Road Brighton BN	2 3HW	
Property Description		
Short description of licensed HMO (No of s	storeys, etc)	
Property Type = SHARED HOUSE, No of Uni	its = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms Total N	umber of Rooms 5	
a) Sleeping <b>5</b>	b) Living Rooms	
Number of Self Contained Flats:	0 Number of Non Self Cont. Fla	ts: 1
Shared Amenities Number	Description	
a) Kitchen 1		
b) Bathrooms/Showers 1		
c) W.C.s		
Lisanas Pataila		
Licence Details		
Commencement date: 22/11/2	2016 Duration of licence:	12/10/2021
Maximum number of persons or household	ds permitted to occupy HMO under conditions	of licence:
Households 5 Persons	5	
Information referred to a residential pr	roperty tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence		
	andatory conds, HMO - Furniture Mandatory conds	s, HMO - Gas



#### Licence No.

#### 2016/05614/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

38 Hartington Road Brighton BN2 3LS

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder		
Mr N Neemuchwala, 16 Kidbro	ooke Park Road Blackheath Lo	ndon SE3 0LW	
Name & Address of Perso	n Managing		
S J Lettings Ltd, 52 Lewes Ro	ad Brighton BN2 3HW		
<b>.</b>			
Property Description			
Short description of license			
Property Type = SHARED HO	USE, No of Units = 1, Occupar	ncy = 5, No of Storeys = 4	
Number of Rooms	Total Number of Roor	ns 6	
a) Sleeping 5	b) Living Ro	ooms 1	
, , , , , , , , , , , , , , , , , , , ,	,		
Number of Self Contained Fi	lats: 0	Number of Non Self Cont. Fla	nts: 1
Shared Amenities	Number Description	1	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	25/11/2016	Duration of licence:	05/06/2021
Maximum number of person	s or households permitted to	o occupy HMO under conditions	of licence:
	_		
Households 5	Persons 5		
Information referred to a	residential property tribun	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
conds, HMO - Gas Mandatory	Mandatory conds, HMO - Fire I conds, HMO - Property Chges	Mandatory conds, HMO - Furniture Mandatory conds, HMO - Proper oofs/Chimneys 9, HMO - Rubbish	ty Maint

Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Other Fire Works, Other Fire works



#### Licence No.

#### 2016/05690/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

40 Jersey Street Brighton BN2 9NU

Ward

Hanover And Elm Grove

Name & Address of Licence Holder	
Mr Hossein Yeganeh-Toussi, 152 Old Fort Road Shoreham By Sea West Sussex BN43 5HL	
Name & Address of Person Managing	
Pavilion Properties Ltd, 128-129 Lewes Road Brighton BN2 3LG	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Booms	
Number of Rooms Total Number of Rooms 5	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats:	0
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s	
Licence Details	
Commencement date: 17/01/2017 Duration of licence:	02/07/2021
Maximum number of persons or households permitted to occupy HMO under conditions of	licence:
Households 5 Persons 5	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of licence	

Boiler, Floor, Gas Certs, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - General 1, HMO - General 6, HMO - General Gas 1, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Halls stairs and landing, Halls stairs landings, Kitchen vent, Self closers



#### Licence No.

#### 2016/05691/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

45 Viaduct Road Brighton BN1 4ND

Ward

St. Peter's And North Laine

Name & Address of Licence	Holder		
Mr Hossein Yeganeh-Toussi, 152		by Sea BN/3 5HI	
ivii Hosseiii regalieli-Toussi, 152	Old Fort Road Shorenam-	Dy-Sea BN43 SHL	
Name & Address of Person I	Managing		
Pavilion Properties Ltd, 128-129 L		31 G	
Tavillotti Toperties Eta, 120 120 E	tewes read Brighton Bive	000	
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Occupa	ncy = 6. No of Storeys = 3	
	, , , , , ,		
Number of Rooms	Total Number of Room	ms 6	
a) Sleeping	b) Living R	ooms	
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flats	s: 0
		_	
Shared Amenities N	lumber Description	n	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Licence Details			
Commencement date:	24/03/2017	Duration of licence:	02/07/2021
Maximum number of persons o	r households permitted to	o occupy HMO under conditions of	of licence:
Households 6 Pe	ersons 6		
Information referred to a res	idential property tribur	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - General 1, HMO - General 6, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, IS, Not Assigned, SC, WHB



Licence No.

2016/05694/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 55 Warleigh Road Brighton BN1 4NS

Ward

St. Peter's And North Laine

Name & Address of Licence Ho	lder		
Mr Alfred Haagman, Meadowbrook H	ouse Brook Street Cuckt	ield RH17 5JJ	
Name & Address of Person Mar	aging		
Pavilion Properties Ltd, 128-129 Lewe		ll G	
- Tarmorr roportion Ltd, 120 120 Lore	70 Troda Brighton Briz 6		
Property Description			
Short description of licensed HMO	(No of storeys, etc)		
Property Type = SHARED HOUSE, N	o of Units = 1, Occupan	cy = 7, No of Storeys = 3	
Number of Rooms	Total Number of Room	ns 7	
a) Sleeping 7	b) Living Ro	oms I	
Number of Self Contained Flats:	0	Number of Non Self Cont. Flats:	0
Number of Sen Contained Flats.	U	Number of Non Sen Cont. Flats.	U
Shared Amenities Num	ber Description		
a) Kitchen 1	<del></del>		
b) Bathrooms/Showers 2			
c) W.C.s			
Licence Details			
Licence Details			
Commencement date:	20/06/2017	Duration of licence:	04/07/2021
Maximum number of persons or ho	useholds permitted to	occupy HMO under conditions of li	cence:
Haveahalda 7 Davas			
Households 7 Perso	ons 7		
Information referred to a reside	ntial property tribuna	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licence Electrical Works, HMO - Elec Mandat Furniture Mandatory conds, HMO - G Property Maint Mandatory conds, HM	as Mandatory conds, HN	MO - Property Chges Mandatory conds	s, HMO -

Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Structural Fire Works, structural Fire Works



#### Licence No.

#### 2016/05697/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

77 Upper Lewes Road Brighton BN2 3FF

Ward

St. Peter's And North Laine

Name & Address of Licen	ice Holder			
Mr Alfred Haagman, Meadowb	orook House Broo	k Street Cuckf	ield RH17 5JJ	
Name & Address of Perso	on Managing			
Pavilion Properties Ltd, 39 Sag	ckville Road Hove	BN3 3WA		
Dunantu Danasistias				
Property Description	d HMO (No of ota	rovo oto)		
Short description of license	-	-	nu - E. No. of Ctorous - 2	
Property Type = SHARED HO	USE, NO OF UNITS	= 1, Occupano	cy = 5, No of Storeys = 3	
Number of Rooms	Total Nun	nber of Room	s 6	
a) Sleeping 5		b) Living Ro	oms 1	
Number of Self Contained F	lats:	0	Number of Non Self Cont. Flats:	0
Shared Amenities	Number	Description		
<ul><li>a) Kitchen</li><li>b) Bathrooms/Showers</li></ul>	1			
c) W.C.s	2			
Licence Details				
Commencement date:	26/06/20	17	Duration of licence:	04/07/2021
Maximum number of person	s or households	permitted to	occupy HMO under conditions of I	icence:
Households 5	Persons	5		
Information referred to a	residential prop	perty tribuna	al or Lands Tribunal:	
None			Defense	
Decision of Tribunal			Reference number	
Summary of conditions of lie HMO - Elec Mandatory conds,		ket, HMO - Fire	e Mandatory conds, HMO - Furniture	

HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Ventilation 2, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs



#### Licence No.

#### 2016/05700/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

56 Viaduct Road Brighton BN1 4ND

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder			
Mr Alfred Haagman, Meadowb	rook House Brook	Street Cuckf	ield RH17 5JJ	
Name & Address of Perso	on Managing			
Pavilion Properties Ltd, 39 Sac	ckville Road Hove	BN3 3WA		
Property Description				
Short description of licensed	d HMO (No of sto	reys, etc)		
Property Type = SHARED HO	USE, No of Units =	= 1, Occupano	cy = 6, No of Storeys = 3	
		,	<u>, , , , , , , , , , , , , , , , , , , </u>	
Number of Rooms	Total Num	ber of Room	s 7	
a) Sleeping 6		b) Living Roo	oms 1	
Number of Self Contained Fl	ats:	0	Number of Non Self Cont. Flats:	0
				-
Shared Amenities	Number	Description		
a) Kitchen	1			
b) Bathrooms/Showers	2			
c) W.C.s	3			
Licence Details				
Licence Details				
Commencement date:	20/06/201	7	Duration of licence:	04/07/2021
Maximum number of person	s or households	permitted to	occupy HMO under conditions of li	cence:
Households 6	Persons	6		
Information referred to a	residential prop	erty tribuna	ıl or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of lie HMO - Elec Mandatory conds,		et, HMO - Fire	e Doors 8, HMO - Fire Mandatory con	ds, HMO

HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Doors 8, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Rapairs, Management/Repairs



#### Licence No.

#### 2016/05702/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

175 Elm Grove Brighton BN2 3ES

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder		
Mr Alfred Haagman, Meadowb	prook House Brook Street	t Cuckfield RH17 5JJ	
Name & Address of Perso	n Managing		
Pavilion Properties Ltd, 39 Sac	ckville Road Hove BN3 3	WA	
Property Description			
Short description of license	d HMO (No of storeys, e	etc)	
Property Type = SHARED HO	USE, No of Units = 1, Oc	ccupancy = 5, No of Storeys = 3	
November of Decome	Tatal Namela an at		
Number of Rooms	Total Number of		
a) Sleeping 5	b) Liv	ring Rooms	
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Flats:	0
Shared Amenities		ription	
a) Kitchen	1		
b) Bathrooms/Showers c) W.C.s	2		
c) w.o.s			
Licence Details			
Commencement date:	26/06/2017	Duration of licence:	04/07/2021
Maximum number of person	s or households permit	tted to occupy HMO under conditions of I	licence:
Harrack alde	D	7	
Households 5	Persons 5	]	
Information referred to a	residential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	, HMO - Fire Mandatory o	conds, HMO - Furniture Mandatory conds, H	



#### Licence No.

#### 2016/05707/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

5 Argyle Road Brighton BN1 4QA

Ward

Preston Park

Name & Address of Licen	ce Holder		
Mr Alfred Haagman, Meadowb	rook House Brook Stre	et Cuckfield RH17 5JJ	
Name & Address of Perso	n Managing		
Pavilion Properties Ltd, 39 Sac	kville Road Hove BN3	3WA	
Property Description			
Short description of licensed	I HMO (No of storeys,	etc)	
Property Type = SHARED HO	JSE, No of Units = 1, C	Occupancy = 6, No of Storeys = 4	
Number of Rooms	Total Number of	of Rooms 7	
a) Sleeping 6	b) Li	iving Rooms 1	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities	Number Desc	cription	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
License Betails			
Commencement date:	31/08/2017	Duration of licence:	04/07/2021
Massimassum ussumbass of scarces			of lines and
maximum number of persons	s or nousenoids perm	itted to occupy HMO under conditions	of licence:
Households 6	Persons 6		
Information referred to a r	esidential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic HMO - Elec Mandatory conds,		MO - Fire Mandatory conds, HMO - Furniti	ure

HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Structural Fire Works



#### Licence No.

#### 2016/05709/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

6 Surrey Street Brighton BN1 3PA

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder			
Mr A Haagman, Meadowbrook	House Brook Stre	et Cuckfield I	RH17 5JJ	
Name & Address of Perso	n Managing			
Pavilion Properties Ltd, 39 Sac	ckville Road Hove	BN3 3WA		
Property Description				
Short description of licensed	d HMO (No of stor	reys, etc)		
Property Type = SHARED HO	USE, No of Units =	1, Occupano	cy = 5, No of Storeys = 3	
Number of Rooms	Total Num	ber of Room	s 6	
a) Sleeping 5		b) Living Roo	oms 1	
Number of Self Contained FI	ats:	0	Number of Non Self Cont. Flats:	0
Shared Amenities	Number	Description		
a) Kitchen	6			
b) Bathrooms/Showers	2			
c) W.C.s	3			
Licence Details				
Commencement date:	26/06/201	7	Duration of licence:	04/07/2021
Maximum number of person	e or households :	normitted to	occupy HMO under conditions of I	iconco:
maximum number of person	s or nousenoius p	permitted to	occupy Himo under conditions of i	icerice.
Households 5	Persons	5		
Information referred to a	residential prop	erty tribuna	al or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of lic HMO - Elec Mandatory conds,		atory conds, I	HMO - Furniture Mandatory conds, HI	MO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Bathroom 4, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Structural Fire Works



#### Licence No.

#### 2016/05713/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

5 Baden Road Brighton BN2 4DP

Ward

Moulsecoomb And Bevendean

Name & Address of Licen		
Mr Nilhan Jayasinghe, 48 Tord	onto Terrace Brighton BN2 9UW	
Name & Address of Dane	an Managina	
Name & Address of Person		
MTM Property Services Ltd, 1	08A Lewes Road Brighton BN2 4AE	
Property Description		
Short description of license	d HMO (No of storous atc)	
•	• • •	
Property Type = SHARED HO	USE, No of Units = 5, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 5	b) Living Rooms	
,	, , , , , , , , , , , , , , , , , , , ,	
Number of Self Contained F	lats: 0 Number of Non Self Cont. Flats:	. 1
	Training of their control of the factor	
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Licence Details		
Commencement date:	03/05/2017 Duration of licence:	20/11/2021
Maximum number of person	s or households permitted to occupy HMO under conditions of	licence:
Households 5	Persons 5	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lie		
HMO - Elec Mandatory conds,	, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, I	HMO - Gas



#### Licence No.

#### 2016/05723/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

11 White Street Brighton BN2 0JH

Ward

Queen's Park

Name & Address of Licen	ce Holder		
Dr R Paun, 4 Clarendon Mans	ions 80 East Street Brigh	nton BN1 1NF	
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, e	etc)	
Property Type = SHARED HO	USE, No of Units = 1, Oc	ccupancy = 6, No of Storeys = 4	
Number of Rooms	Total Number of	f Rooms 7	
a) Sleeping 6	b) Liv	ving Rooms 1	
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Fla	ats: 1
Shared Amenities	Number Descri	ription	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Detaile			
Licence Details			
Commencement date:	25/11/2016	Duration of licence:	06/07/2021
Maximum number of person	s or households permi	tted to occupy HMO under conditions	of licence:
Households 6	Persons 6		
Information referred to a	residential property t	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie	cence		
Fire Alarm, HMO - Elec Manda	atory conds, HMO - Fire I	Blanket, HMO - Fire Mandatory conds, F	
Furniture Mandatory conds, H	MO - Gas Mandatory cor	nds, HMO - Property Chges Mandatory o	conds, HMO -

Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/05778/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

127 Upper Lewes Road Brighton BN2 3FD

Ward

St. Peter's And North Laine

Nama O Addus a stati	va Haldan	<u></u>
Name & Address of Licer		
Mrs Laura Dwyer-Smith, 51 D	yke Road Avenue Hove BN3 6QD	
Name & Address of Person	on Managing	
,		
Property Description		
Short description of license	d HMO (No of storeys, etc)	
Property Type = SHARED HC	OUSE, No of Units = 1, Occupancy = 7, No of Storeys = 4	
N	T (IN a loss of Days of D	
Number of Rooms	Total Number of Rooms 8	
a) Sleeping 7	b) Living Rooms 1	
Number of Self Contained F	lats: 0 Number of Non Self Cont. Flat	ts: 0
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Licence Details		
Commencement date:	13/04/2017 Duration of licence:	10/10/2021
Maximum number of persor	ns or households permitted to occupy HMO under conditions	of licence:
Households 7	Persons 7	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Cummony of conditions of !!		
Summary of conditions of li HMO - Elec Mandatory conds	<b>cence</b> , HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds	s, HMO - Gas



#### Licence No.

#### 2016/05800/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

43 Borough Street Brighton BN1 3BG

Ward

Regency

			vvai u	regency	
Name & Address of Licer	nce Holder				
Mr Derek And Mrs Sally Henry	y, 1 Sussex Me	ws Brighton BN	2 1GZ		
Name & Address of Person					
Mr Trevor Cook, 6 Burlington	Street Brighton	BN2 1AU			
Property Description					
Short description of license	d HMO (No of	storeys, etc)			
Property Type = SHARED HC	USE, No of Un	its = 1, Occupar	ncy = 5, No of Storeys = 3		
Number of Rooms	Total N	lumber of Roon	ns 6		
	rotar iv				
a) Sleeping		b) Living Ro	ooms		
Number of Self Contained F	lats:	0	Number of Non Self Cont.	Flats:	1
Shared Amenities	Number	Description	1		
a) Kitchen	1				
b) Bathrooms/Showers	2				
c) W.C.s	2				
Licence Details					
Commencement date:	17/01/	2017	Duration of licence:	26	5/06/2021
Maximum number of persor	ne or househol	ds parmitted to	o occupy HMO under condition	ons of licenc	•
	-	us permitted to	occupy rimo under condition		<b>.</b>
Households 5	Persons	5			
Information referred to a	residential p	roperty tribun	al or Lands Tribunal:		
None					
Decision of Tribunal			Reference numbe	r	
Summary of conditions of li		andaton, condo	HMO Eurnitura Mandatory or	ands HMO	Cas



#### Licence No.

#### 2016/05805/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 31 Bristol Gardens Brighton BN2 5JR

Ward

**East Brighton** 

Name & Address of Licen	ice Holder	
Derek & Sally Henry, 1 Susse:	x Mews Brighton BN2 1GZ	
Name & Address of Perso	on Managing	
Mr Trevor Cook, 6 Burlington	Street Brighton BN2 1AU	
Property Description		
Short description of license	d HMO (No of storeys, etc)	
Property Type = SHARED HO	OUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping	b) Living Rooms	
Number of Self Contained F	lats: 0 Number of Non Self Con	t. Flats: 1
Shared Amenities	Number Description	
a) Kitchen	Number Description	
b) Bathrooms/Showers	3	
c) W.C.s	3	
o) w.o.s	<u> </u>	
Licence Details		
•	47/04/0047	00/00/0004
Commencement date:	17/01/2017 Duration of licence:	26/06/2021
Maximum number of person	s or households permitted to occupy HMO under condi	tions of licence:
Households 5	Persons 5	
i iouseiioius 0	Persons 5	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference numb	per
Summary of conditions of li	cence	and IIMO Oa



#### Licence No.

#### 2016/05820/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

13 St Georges Terrace Brighton BN2 1JH

Ward

Queen's Park

Name & Address of Licen	ce Holder		
VIr & Mrs Phillip & Maria Samo	ouel, Ladyland Farm Mea	ath Green Lane Horley RH6 8JA	
Name & Address of Perso	n Managing		
Property Description			
Short description of licensed	l HMO (No of storeys, e	etc)	
Property Type = SHARED HO	USE, No of Units = 1, Oc	ccupancy = 10, No of Storeys = 5	
Number of Rooms	Total Number of	Rooms 15	
a) Sleeping	b) Liv	ing Rooms	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Flat	s: 1
Shared Amenities	Number Desci	ription	
a) Kitchen	1		
o) Bathrooms/Showers	2		
c) W.C.s	3		
_icence Details			
Licence Details			
Commencement date:	05/01/2017	Duration of licence:	24/11/2021
Maximum number of person	s or households permi	tted to occupy HMO under conditions o	of licence:
10	<b>D</b>	٦	
Households 10	Persons 10		
nformation referred to a i	residential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic		conds HMO - Furniture Mandatory conds	HMO - Gas

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire precautions



#### Licence No.

#### 2016/05822/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

147 Lewes Road Brighton BN2 3LG

Ward

Hanover And Elm Grove

Name & Address of Licenc	e Holder		
Lindene GB Promotions Ltd, C/o	Kevin Keehan 12 F	ranklin Road Portslade BN41 1AF	
Nama <sup>9</sup> Address of Darser	Managing		
Name & Address of Persor	i Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys	s, etc)	
Property Type = SHARED HOU	SE, No of Units = 1,	Occupancy = 5, No of Storeys = 4	
Number of Rooms	Total Number	of Rooms 5	
a) Sleeping 5		Living Rooms 1	
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s	Number Des	scription	
Licence Details			
Commencement date:	09/02/2017	Duration of licence:	16/10/2021
Maximum number of persons	or households peri	mitted to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Information referred to a re	sidential property	y tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice		HMO Fire Deers 9 HMO Fire Mandator.	veende LIMO

HMO - Elec Mandatory conds, HMO - Fire Doors 6, HMO - Fire Doors 8, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Bathroom 4, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/05829/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

37 Viaduct Road Brighton BN1 4ND

Ward

St. Peter's And North Laine

Name & Address of Licence Holder		
Mr Norman Whitehurst, 23 Copse Hill Brigh	nton BN1 5GA	
Name & Address of Person Managir	ng	
Property Description		
Short description of licensed HMO (No o	of storeys, etc)	
	Units = 1, Occupancy = 5, No of Storeys = 3	
report, type enumber to end end	one i, company c, no or exercise	
Number of Rooms Total	I Number of Rooms 9	
a) Sleeping 5	b) Living Rooms 1	
_		
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	1
Shared Amenities Number a) Kitchen 1	Description	
b) Bathrooms/Showers 1		
2 2		
Licence Details		
Commencement date: 22/0	D2/2017 Duration of licence:	26/11/2021
Maximum number of persons or househ	nolds permitted to occupy HMO under conditions of I	icence:
		icenice.
Households 5 Persons	5	
Information referred to a residential	property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence HMO - Elec Mandatory conds. HMO - Fire	Mandatory conds. HMO - Furniture Mandatory conds. HI	MO - Gas



#### Licence No.

#### 2016/05859/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

33 Hornby Road Brighton BN2 4JL

Ward

Moulsecoomb And Bevendean

Name & Address of Licence	ce Holder	
Mrs Sharon Thatcher, 57 Park	Road Smallfield Horley Surrey RH6 9RZ	
Name & Address of Perso	n Managing	
COAPT Ltd, 108A Lewes Road	I Brighton BN2 4AE	
Property Description		
Short description of licensed	I HMO (No of storeys, etc)	
Property Type = SHARED HOL	USE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping	b) Living Rooms	
Number of Self Contained Fla	ats: 0 Number of Non Self Cont. Fla	ats: 1
<b>a.</b>		
Shared Amenities	Number Description	
a) Kitchen b) Bathrooms/Showers	2	
c) W.C.s	2	
c) vv.o.s		
Licence Details		
		1-11110001
Commencement date:	31/01/2018 Duration of licence:	15/11/2021
Maximum number of persons	s or households permitted to occupy HMO under conditions	s of licence:
Hausahalda E	Porsona E	
Households 5	Persons 5	
Information referred to a re	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lic	ence	



#### Licence No.

#### 2016/05878/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

37 Cheltenham Place Brighton BN1 4AB

Ward

St. Peter's And North Laine

Name & Address of Licence	ce Holder	
Mrs Patricia Camping, 69 Dyke		
Name & Address of Person	n Managing	
,		
Property Description		
Short description of licensed	• • •	
Property Type = SHARED HOU	JSE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping	b) Living Rooms	
Number of Self Contained Fla	nts: 0 Number of Non Self Cont. Flat	s: 1
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
-,		
b) Bathrooms/Showers	2	
b) Bathrooms/Showers c) W.C.s	2	
b) Bathrooms/Showers c) W.C.s	2	06/07/2021
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:	2 2	
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons	2 2 2 Duration of licence: s or households permitted to occupy HMO under conditions	
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons	2 2 12/01/2017 Duration of licence:	
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons  Households 6	2 2 2 Duration of licence: s or households permitted to occupy HMO under conditions	
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons  Households 6	2 2 2 Duration of licence: s or households permitted to occupy HMO under conditions Persons 6	
b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons Households 6  Information referred to a refered to a reference	2 2 2 Duration of licence: s or households permitted to occupy HMO under conditions Persons 6	



#### Licence No.

#### 2016/05950/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

30 Caledonian Road Brighton BN2 3HX

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
Mr Tom Ghibaldan, 59 Braemo	ore Road Hove East Su	ussex BN3 4HA	
Name & Address of Perso	n Managing		
Cambridge Brand Vaughan Ltd	d, T/as Brand Vaughan	n Amelia House Crescent Road Worthing \	West Sussex
28177 7710			
Property Description			
Short description of licensed	HMO (No of storeys	s, etc)	
Property Type = SHARED HO	USE, No of Units = 1, (	Occupancy = 6, No of Storeys = 4	
Number of Deems	Total Niveshau	of Doomo 7	
Number of Rooms	Total Number		
a) Sleeping 6	b) L	Living Rooms 1	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Fla	nts: 1
Shared Amenities	Number Des	scription	
a) Kitchen	2		
b) Bathrooms/Showers c) W.C.s	2		
J) W.O.S			
Licence Details			
Commencement date:	16/12/2016	Duration of licence:	31/10/2021
Maximum number of persons	s or households pern	mitted to occupy HMO under conditions	of licence:
Households 6	Persons 6		
Information referred to a r	esidential property	/ tribunal or Lands Tribunal:	
None	, ,		
Decision of Tribunal		Reference number	
Summary of conditions of lice HMO - Elec Mandatory conds,		y conds, HMO - Furniture Mandatory cond	s, HMO - Gas

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Work



#### Licence No.

#### 2016/05964/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

11 Upper Lewes Road Brighton BN2 3FJ

Ward

St. Peter's And North Laine

Name & Address of Licence Holder
Mr Daniel Darwish, 121 Woodville Road Barnet EN5 5NS
···· ····· - ··· · · · · · · · · ·
Name & Address of Person Managing
Pavilion Properties Ltd, 128 - 129 Lewes Road Brighton BN2 3LG
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 4
Number of Rooms Total Number of Rooms 7
a) Sleeping 6 b) Living Rooms 1
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1
Shared Amenities Number Description
a) Kitchen 2
b) Bathrooms/Showers 2 c) W.C.s 2
5, 11.6.6
Licence Details
Commencement date: 12/01/2017 Duration of licence: 20/06/2021
Duration of ficence. 20/00/2021
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Households 6 Persons 6
Information referred to a residential property tribunal or Lands Tribunal:
None
Decision of Tribunal Reference number
Summary of conditions of licence Fire Alarm HMO - Flec Mandatory conds HMO - Fire Doors 8 HMO - Fire Mandatory conds HMO - Fire

Fire Alarm, HMO - Elec Mandatory conds, HMO - Fire Doors 8, HMO - Fire Mandatory conds, HMO - Fire Test Certificates, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Steps etc 10, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs



#### Licence No.

#### 2016/05965/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

29 Brading Road Brighton BN2 3PE

Ward

Hanover And Elm Grove

Name & Address of Licence Holder					
Mr Daniel Darwish, 121 Woodville Road Barnet EN5 5NS					
Name & Address of Person Managing					
3 3					
Pavilion Properties Ltd, 128 - 129 Lewes Road Brighton BN2 3LG					
Property Description					
Short description of licensed HMO (No of storeys, etc)					
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3					
Number of Rooms Total Number of Rooms 6					
a) Sleeping b) Living Rooms 1					
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats:	1				
Shared Amenities Number Description					
a) Kitchen 1					
b) Bathrooms/Showers 1					
c) W.C.s					
Licence Details					
Commencement date: 23/12/2016 Duration of licence:	30/06/2021				
Maximum number of persons or households permitted to occupy HMO under conditions of lice	ence:				
Households 5 Persons 5					
Information referred to a residential property tribunal or Lands Tribunal:					
None					
Decision of Tribunal Reference number					
Summary of conditions of licence HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Fire Test Certificates, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Floors 3, HMO - RubbishRecyc					

Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Other Fire Works, Structural Fire Works



## Licence No.

#### 2016/05966/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 31 Brading Road Brighton BN2 3PE

Ward

Hanover And Elm Grove

Name & Address of Licence	e Holder				
The Albert Darwish Will Trust, C	c/o Mr Daniel Da	rwish 121 Wo	odville Road Barnet EN5 5NS		
Name & Address of Persor					
Pavilion Properties Ltd, 128 - 12	29 Lewes Road E	Brighton BN2	BLG		
Property Description					
Short description of licensed	HMO (No of sto	revs. etc)			
Property Type = SHARED HOU	•	-	ev = 5. No of Storevs = 3		
Troporty Type Critical Troo	02,110 01 011110	i, occupan	5, 110 01 01010y0 0		
Number of Rooms	Total Num	ber of Room	s 6		
a) Sleeping 5		b) Living Roo	oms 1		
Number of Self Contained Fla	ts:	0	Number of Non Self Cont. Flats:	1	
Shared Amenities	Number	Description			
a) Kitchen	1				
b) Bathrooms/Showers c) W.C.s	2				
0) ************************************					
Licence Details					
	00/10/00	10	<b>.</b>	00/00/0004	
Commencement date:	23/12/201	16	Duration of licence:	30/06/2021	
Maximum number of persons	or households	permitted to	occupy HMO under conditions of li	cence:	
Households 5	Persons	5			
110useriolus 5	reisons	3			
Information referred to a residential property tribunal or Lands Tribunal:					
None					
Decision of Tribunal Reference number					
Summary of conditions of licence HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Fire Test Certificates, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Repairs Doorst, HMO - Repairs Draught					

Proofing Doors, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs



#### Licence No.

#### 2016/05984/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

15 Baden Road Brighton BN2 4DP

Ward

Moulsecoomb And Bevendean

Name & Address of Licence	e Holder	
Mr & Mrs S & D Ovett, 81 Dean	Court Road Rottingdean Brighton BN2 7DL	
Name & Address of Person	Managing	
Pavilion Properties Ltd, 128-129	Lewes Road Brighton BN2 3LG	
Property Description		
Short description of licensed h	HMO (No of storeys, etc)	
Property Type = SHARED HOUS	SE, No of Units = 5, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flat	s: 0 Number of Non Self Cont.	. Flats: 1
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	1	
c) W.C.s	2	
Licence Details		
Licence Details		
Commencement date:	27/01/2017 <b>Duration of licence</b> :	29/06/2021
Maximum number of persons	or households permitted to occupy HMO under conditi	ions of licence:
-	or households permitted to occupy HMO under conditions  Persons 5	ions of licence:
Households 5 F	Persons 5	ions of licence:
Households 5 F		ions of licence:
Households 5 F	Persons 5	ions of licence:
Households 5 F	Persons 5	



#### Licence No.

#### 2016/06003/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

34 Wilbury Gardens Hove BN3 6HY

Ward

Goldsmid

Name & Address of Licence Holder		
Investsave Limited, 176 Church Road Hove BN3	2DJ	
Name & Address of Person Managing		
My Lets Ltd, Amelia House Crescent Road Worth	ing West Sussex BN11 1QR	
Property Description		
Short description of licensed HMO (No of store	eys, etc)	
Property Type = Not Assigned, No of Units = 6, O	ccupancy = 6, No of Storeys = 3	
Number of Rooms Total Numb	per of Rooms 6	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	0
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s  Number  2  4  4	Description	
Licence Details		
Commencement date: 07/06/2017	7 Duration of licence:	03/11/2021
Maximum number of persons or households p	permitted to occupy HMO under conditions of l	icence:
Ususahalda C Barrarra	0	
Households 6 Persons	6	
Information referred to a residential prope	erty tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence Additional facilities. Fire alarm works. HMO - Flec	Mandatory conds HMO - Fire Mandatory conds	HMO -

Additional facilities, Fire alarm works, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works, Ventilation



#### Licence No.

#### 2016/06108/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 23 Grafton Street Brighton BN2 1AQ

Ward

Queen's Park

Name & Address of Licer	ice Holder		
Mr Ian Boyd, Flat 3 32 Sussex	Square Brighton East Su	issex BN2 5AB	
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, e	tc)	
Property Type = BEDSIT, No	of Units = 2, Occupancy =	2, No of Storeys = 2	
Number of Rooms	Total Number of	Rooms 2	
a) Sleeping 2	b) Livi	ng Rooms	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ats: 1
Shared Amenities	Number Descri	iption	
a) Kitchen	2		
b) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
Licence Details			
Commencement date:	07/12/2016	Duration of licence:	10/11/2021
Maximum number of person	s or households permit	ted to occupy HMO under conditions	s of licence:
Households 2	Persons 2		
nformation referred to a	residential property tr	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	, HMO - Fire Blanket, HMO	O - Fire Doors 10, HMO - Fire Mandato	

HMO - Fire Test Certificates, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Bathroom 17, HMO - Repairs Bathroom 8, HMO -

RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/06139/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

34A Boundary Road	
Hove	
BN3 4EF	

Ward

Wish

Name & Address of Licence	Holder		
Mr Daniel Barker, 34 Boundary F	Road Hove East Sussex	BN3 4EF	
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed F	IMO (No of storeys, etc	<del>;</del> )	
Property Type = Not Assigned, N	o of Units = 5, Occupan	cy = 5, No of Storeys = 3	
Number of Rooms	Total Number of R	Rooms 6	
a) Sleeping	D) LIVIN	g Rooms	
Number of Self Contained Flat	s: 0	Number of Non Self Cont. Fla	ts: 1
Oh and Amanistica	Namakan Basasin	41	
	Number Descrip	otion	
a) Kitchen b) Bathrooms/Showers	2		
c) W.C.s	2		
0) 11.0.3			
Licence Details			
Commencement date:	21/03/2017	Duration of licence:	13/11/2021
Maximum number of persons of	or households permitte	ed to occupy HMO under conditions	of licence:
_			
Households 5 F	Persons 5		
Information referred to a res	sidential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice		ade HMO Euroiture Mandatory conde	LIMO Coo



#### Licence No.

#### 2016/06174/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

24 Gladstone Place Brighton BN2 3QD

Ward

Hanover And Elm Grove

Name & Address of Licen			
Mr Craig Dwyer-Smith, 26 Hov	e Park Way Hove BN3 6	6PT	
Name & Address of Perso	n Managing		
Name & Address of Ferse	in Managing		
,			
Property Description			
Short description of licensed	d HMO (No of storeys, e	etc)	
Property Type = SHARED HO	USE, No of Units = 1, Oc	ccupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of	f Rooms 5	
a) Sleeping 5	b) Liv	ving Rooms 1	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Fl	ats: 0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description 1 2 2 2	ription	
Licence Details			
_		] <u> </u>	20/20/202
Commencement date:	24/08/2015	Duration of licence:	26/06/2020
Maximum number of person	s or households permi	tted to occupy HMO under condition	s of licence:
Households 5	Persons 5		
Information referred to a <b>i</b>	residential property t	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lid		conds. HMO - Furniture Mandatory con	ds. HMO - Gas



#### Licence No.

#### 2016/06178/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

95 Roundhill Crescent Brighton BN2 3GP

Ward

St. Peter's And North Laine

Name & Address of Licence	Holder	
Mrs Laura Dwyer-Smith, 26 Hove	Park Way Hove BN3 6PT	
Name & Address of Person N	lanaging	
1		
Property Description		
Short description of licensed H	IO (No of storevs. etc)	
-	E, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Topolty Type Of MINES TIOOOL	, no or onitio 1, occupancy o, no or otoroyo o	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 6	b) Living Rooms 1	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	0
Shared Amenities N a) Kitchen	umber Description	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Deteile		
Licence Details		
Commencement date:	23/12/2015 Duration of licence:	27/08/2020
Maximum number of persons or	households permitted to occupy HMO under conditions of lic	Sence:
	——————————————————————————————————————	ence.
Households 6 Pe	rsons 6	
Information referred to a resi	dential property tribunal or Lands Tribunal:	
None	aontai proporty tribunal of Lands Tribunal.	
Decision of Tribunal	Reference number	
Summary of conditions of licend HMO - Elec Mandatory conds. HM	ce O - Fire Mandatory conds. HMO - Furniture Mandatory conds. HM	O - Gas



#### Licence No.

#### 2016/06181/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 51 Medmerry Hill Brighton BN2 4TP

Ward

Moulsecoomb And Bevendean

Name O Address of Lance Helder
Name & Address of Licence Holder
Mr Craig Dwyer-Smith, 26 Hove Park Way Hove BN3 6PT
No. 10 Address of Decree Managers
Name & Address of Person Managing
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 7, No of Storeys = 3
Number of Rooms Total Number of Rooms 7
a) Sleeping 7 b) Living Rooms 1
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
Shared Amenities Number Description
a) Kitchen 2 b) Bathrooms/Showers 2
c) W.C.s 2
Licence Details
Commencement date: 20/02/2014 Duration of licence: 08/04/2018
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Households 7 Persons 7
Information referred to a residential property tribunal or Lands Tribunal:
None
Decision of Tribunal Reference number
Summary of conditions of licence HMO - Flec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2016/06189/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

189A Church Road Hove BN3 2AB

Ward

Central Hove

Name & Address of Licen	ao Haldar		
		Jove PN2 FL I	
Ms Pamela Mamane, The Lod	ge 2 Mornington Crescent r	HOVE BING SEJ	
Name & Address of Perso	on Managing		
Mrs Jackie Phillips, New Hall (	<u> </u>	ull Dole, Henfield BN5 9Y.I	
This cache i impo, item i and	Johago Hom Hair Lario Office	20.0 1.00.0 2.10	
Property Description			
Short description of license	d HMO (No of storeys, etc	)	
Property Type = SHARED HO	USE, No of Units = 1, Occu	pancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of R	ooms 6	
a) Sleeping 5	b) Living	Rooms 1	
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Flats:	0
Shared Amenities	Number Descrip	tion	
a) Kitchen	1		
b) Bathrooms/Showers c) W.C.s	2		
0) **.0.3			
Licence Details			
Commencement date:	26/06/2017	Duration of licence:	18/06/2021
Maximum number of person	s or households permitte	d to occupy HMO under conditions of	licence:
	_		
Households 5	Persons 5		
Information referred to a	residential property trib	ounal or Lands Tribunal:	
None	, , ,		
Decision of Tribunal		Reference number	
Summary of conditions of lie	ranca		
HMO - Elec Mandatory conds,	, HMO - Fire Mandatory con	ds, HMO - Furniture Mandatory conds, I	
	perty Chges Mandatory cond	ds, HMO - Property Maint Mandatory co	nds, HMO -

RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Maintenance/Repairs, Structural Fire Works



#### Licence No.

#### 2016/06205/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

81 Sackville Road Hove BN3 3WE

Ward

Goldsmid

		77414	
Name & Address of Licer	ice Holder		
	er-Strange, T/a Grosvenc	or Properties Tudor Grange 13 T	The Upper Drive Hove
DN3 CCD			
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, e	tc)	
Property Type = BEDSIT, No	of Units = 6, Occupancy =	= 6, No of Storeys = 3	
Number of Decree	Tatal November of	D	
Number of Rooms	Total Number of	Rooms 6	
a) Sleeping 6	b) Livi	ing Rooms 6	
Number of Self Contained F	lats: 0	Number of Non Self C	cont. Flats: 1
Ohamad Amamitica	Noveles Bases	.t.,.4t	
Shared Amenities	Number Descr	iption	
a) Kitchen	6		
b) Bathrooms/Showers	3		
c) W.C.s	3		
Licence Details			
		1	
Commencement date:	09/01/2017	Duration of licence:	08/12/2021
Maximum number of person	ıs or households permit	ted to occupy HMO under cor	nditions of licence:
•		1	
Households 6	Persons 6		
Information referred to a	residential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference nu	mber
Summary of conditions of li HMO - Flec Mandatory conds		O - Fire Mandatory conds. HMC	) - Furniture



#### Licence No.

#### 2016/06230/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

6 Temple Street	
Brighton	
BN1 3BH	

Ward

Regency

Name & Address of Licent	e Holder		
Mr Gregory Ford, 2 Bazehill Ro	ad Rottingdean BN2 7DB		
Name & Address of Perso	, ,		
Home Leasing Brighton Ltd, 18	Hyde Gardens Eastbourne	BN21 4PT	
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOL	JSE, No of Units = 1, Occup	pancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Ro	ooms 6	
a) Sleeping 6	b) Living	ROOMS	
Number of Self Contained Fla	ats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number Descript	ion	
a) Kitchen b) Bathrooms/Showers	2 2		
c) W.C.s	2		
,			
Licence Details			
		_	
Commencement date:	09/01/2017	Duration of licence:	02/07/2021
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
Households 6	Persons 6		
Information referred to a r	esidential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
- Fire Emergency Lighting 2, HI	ec Mandatory conds, HMO MO - Fire Mandatory conds	- Fire Alarm Systems 5, HMO - Fire Doo , HMO - Furniture Mandatory conds, HM	10 - Gas

Fire - Under Stairs 3, HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 5, HMO - Fire Doors 8, HMO - Fire Emergency Lighting 2, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Loft Insulation, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs



#### Licence No.

#### 2016/06423/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

Flat 1 West Court 230 Portland Road Hove BN3 50T

Ward

Westbourne

Name & Address of Licence	Holdor		
	Meads Brighton East Sussex BN1 5LR		
wis soarine i milips, s mazeidene	Meads Digitori Last Sussex Divi SLIX		
Name & Address of Person	Managing		
Property Description			
Short description of licensed H	IMO (No of storeys, etc)		
Property Type = SHARED HOUS	SE, No of Units = 6, Occupancy = 6, No of Storeys = 3		
Nharraf Danier	Total Number of Decree 7		
Number of Rooms	Total Number of Rooms 7		
a) Sleeping 6	b) Living Rooms		
Number of Self Contained Flats	S: 0 Number of Non Self Cont. Fla	ts: 1	
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s	Number Description 2 2 2 2		
Licence Details			
Commencement date:	25/07/2017 Duration of licence:	28/11/2021	
Maximum number of persons o	or households permitted to occupy HMO under conditions	of licence:	
Households 6 P	Persons 6		
Information referred to a res	sidential property tribunal or Lands Tribunal:		
None			
Decision of Tribunal	Reference number		
Summary of conditions of licer	nce Mandatory conds, HMO - Fire Mandatory conds, HMO - Furnity	uro Mandatory	



#### Licence No.

#### 2016/06502/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

53 Brunswick Road Hove BN3 1DH

Ward

Brunswick And Adelaide

Name & Address of Licence	e Holder	
	Binsted Lane Arundel BN18 0LQ	
Name & Address of Person	Managing	
,		
Duamanti Daganintian		
Property Description  Short description of licensed I	HMO (No of storous atc)	
-	SE, No of Units = 8, Occupancy = 8, No of Storeys = 3	
Floperty Type - SHARED 1100	3E, No or office – 6, Occupancy – 6, No or Storeys – 3	
Number of Rooms	Total Number of Rooms 8	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flat	ts: 0 Number of Non Self Cont. Fla	ats: 1
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s	Number Description  5 5	
Licence Details		
Commencement date:	21/12/2016 Duration of licence:	02/12/2021
Maximum number of persons	or households permitted to occupy HMO under conditions	s of licence:
Households 8	Persons 8	
Information referred to a re	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lice	ence	2

HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 2, HMO - Fire Blanket, HMO - Fire Doors 3, HMO - Fire Doors 5, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Drainage 1, HMO - Repairs Heating 5, HMO - Repairs Walls 5, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Repairs/maintenance



## Licence No.

#### 2016/06614/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

50 Widdicombe Way Brighton BN2 4TJ

Ward

Moulsecoomb And Bevendean

Nama O Addusas of Linear	aa Haldau		
Name & Address of Licen			
Mr Ahmed Khalil, 124 Lewes F	Road Brighton BN2 3LG		
N			
Name & Address of Person	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, etc)		
Property Type = SHARED HO	USE, No of Units = 1, Occup	pancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Ro	ooms 7	
a) Sleeping	b) Living	Rooms	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number Descript	ion	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Election Betails			
Commencement date:	09/03/2017	Duration of licence:	11/12/2021
Maximum number of person	s or households permitted	I to occupy HMO under conditions	of licence:
Households 7	Persons 6		
Information referred to a	residential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

#### Summary of conditions of licence



## Licence No.

#### 2016/06669/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

19A Castle Street	
Brighton	
BN1 2HD	

Ward

Regency

Name & Address of Lice	nce Holder		
Mr Dean Golding, Clifton Mev	vs Clifton Hill Brighton E	East Sussex BN1 3HR	
Name & Address of Pers	on Managing		
•			
Property Description			
Short description of license	d HMO (No of storeys,	etc)	
Property Type = SHARED HO	OUSE, No of Units = 1, C	Occupancy = , No of Storeys = 3	
Number of Rooms	Total Number	of Rooms 14	
a) Sleeping		iving Rooms	
a) Sieeping	b) L	IVIIIg Nooms	
Number of Calf Contained I	Tlata:	Number of New Colf Cont. Flats	. 4
Number of Self Contained F	Flats: 0	Number of Non Self Cont. Flats	::1
Shared Amenities	Number Des	cription	
a) Kitchen	1		
b) Bathrooms/Showers	14		
c) W.C.s	14		
Licence Details			
Commencement date:	15/08/2017	Duration of licence:	12/12/2021
Commoncomont dato.	10/00/2011		12/12/2021
Maximum number of perso	ns or households perm	nitted to occupy HMO under conditions o	f licence:
Households 0	Persons		
	1 0100110		
Information referred to a	residential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of I	icence		

Additional Facilities, Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Loft Insulation, Management/Repairs



## Licence No.

#### 2016/06672/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Dale Croft 100 Stanmer Park Road Brighton BN1 7JH

Ward

Hollingdean And Stanmer

Name & Address of Licence Holder	
Mr Charlie Turner, 2 Park Farm Cottages Henfield Road Poynings West Sussex BN45 7BA	
Name & Address of Person Managing	
MTM Property Services Ltd, 108A Lewes Road Brighton BN2 4AE	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 4	
Number of Rooms Total Number of Rooms 11	
a) Sleeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Fla	its: 1
Shared Amenities Number Description	
a) Kitchen 1	
b) Bathrooms/Showers 2	
c) W.C.s	
Licence Details	
Commencement date: 09/05/2017 Duration of licence:	29/06/2021
Solution of its	20/00/2021
Maximum number of persons or households permitted to occupy HMO under conditions	of licence:
Households 6 Persons 6	
nousellolus 0 Felsolis 0	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of licence	turo



## Licence No.

#### 2016/06677/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

101 Stanmer Villas Brighton BN1 7HN

Ward

Hollingdean And Stanmer

Name & Address of Licence	ce Holder	
	ages Henfield Road Poynings BN45 7BA	
Will Charlie Turrier, 2 Park Colla	iges Hermeid Road Foyrings DN45 / DA	
Name & Address of Perso	n Managing	
	18A Lewes Road Brighton BN2 4AE	
Within Toperty Convices Eta, To	on Lewes Road Brighton Briz 4/12	
Property Description		
Short description of licensed	HMO (No of storeys, etc)	
Property Type = SHARED HOL	JSE, No of Units = 1, Occupancy = 6, No of Storeys = 4	
	, company (, no c. c.c.e.)	
Number of Rooms	Total Number of Rooms 10	
a) Sleeping	b) Living Rooms	
Number of Self Contained Fla	ats: 0 Number of Non Self Cont. Fla	nts: 1
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	2	
c) W.C.s	2	
License Deteile		
Licence Details		
Commencement date:	27/04/2017 Duration of licence:	29/06/2021
Maximum number of persons	or households normitted to ecoupy HMO under conditions	of licenses
waxiiiuiii iiuiiibei oi persons	s or households permitted to occupy HMO under conditions	of incence.
Households 6	Persons 6	
Information referred to a re	esidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lic	ence	



## Licence No.

#### 2016/06684/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

141 Upper Lewes Road Brighton BN2 3FD

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder	
	Road Hove East Sussex BN3 4GA	
Name & Address of Perso	n Managing	
D & L Properties Ltd/Target Five	ve, 2 Ashford Road Brighton BN1 6LJ	
Property Description		
Short description of licensed	• • •	
Property Type = SHARED HO	JSE, No of Units = 1, Occupancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping 7	b) Living Rooms 1	
,	, ,	
Number of Self Contained Fl	ats: 0 Number of Non Self Cont. Flats	s: 0
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Commencement date:	14/12/2016 Duration of licence:	09/05/2021
Commencement date.	Duration of ficence.	09/03/2021
Maximum number of persons	s or households permitted to occupy HMO under conditions o	of licence:
Households 7	Persons 7	
Information referred to a r	esidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lic HMO - Elec Mandatory conds,	ence HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds,	HMO - Gas



## Licence No.

#### 2016/06743/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

59 Wilbury Crescent	
Hove	
BN3 6FJ	

Ward

Goldsmid

		vvaid	Joius	iiiu
Nama & Address of Lice	noo Holdor			
Name & Address of Licer				
The Albert Darwish Will Trust	, C/o Mr Daniel Darv	vish 121 Woodville Roa	ad Barnet EN5 5NS	
Name & Address of Pers	on Managing			
Pavilion Properties Ltd, Groun	nd Floor 128-129 Le	wes Road Brighton BN	2 3LG	
Property Description				
Short description of license	d HMO (No of store	eys, etc)		
Property Type = SHARED HC	OUSE, No of Units =	1, Occupancy = 7, No	of Storeys = 3	
Number of Rooms	Total Numb	per of Rooms 8		
a) Sleeping 7		b) Living Rooms	1	
Number of Self Contained F	flats:	0 Number	of Non Self Cont. Flats:	1
Shared Amenities	Number I	Description		
a) Kitchen	2	•		
b) Bathrooms/Showers	2			
c) W.C.s	2			
Licence Details				
Common compant data:	02/02/204:	7	ion of linears.	04/07/2024
Commencement date:	03/02/2017	Durat	ion of licence:	04/07/2021
Maximum number of persor	ns or households p	ermitted to occupy H	MO under conditions of I	icence:
-	_			
Households 7	Persons	7		
Information referred to a	vanidantial aver	autar tuilarraal au l-au-	do Tribunol	
Information referred to a	residential prope	erty tribunal or Land	ds Tribunai:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of li HMO - Elec Mandatory conds		t, HMO - Fire Mandato	ry conds, HMO - Furniture	



## Licence No.

#### 2016/06759/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

16A Preston Street Brighton BN1 2HN

Ward

Regency

Name & Address of Licence	e Holder	
Arci-Build Ltd, 15-17 Middle Str	eet Brighton East Sussex BN1 1AL	
Name & Address of Person	n Managing	
Leo Horsfield / Rowena Horton,	Arci-Build Ltd	
Property Description		
Short description of licensed	HMO (No of storeys, etc)	
Property Type = SHARED HOU	SE, No of Units = 1, Occupancy = 5, No of Storeys = 4	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping	b) Living Rooms	
Number of Self Contained Fla	ts: 0 Number of Non Self Cont. Flats:	1
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Licence Details		
Commencement date:	03/05/2017 Duration of licence:	19/12/2021
Maximum number of persons	or households permitted to occupy HMO under conditions of I	icence:
•	,	
Households 5	Persons 5	
Information referred to a re	esidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lice	ence	110

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Kitchen 2, HMO - Licensing Kitchen 4, HMO - Licensing Kitchen 6, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs



## Licence No.

#### 2016/06772/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

109 Hollingbury Road Brighton BN1 7JN

Ward

Hollingdean And Stanmer

Name & Address of Licen	ce Holder	
Mr Ben Hart, 10 Colman Way		
Name & Address of Perso	n Managing	
Mr Dan Lyons Trading As Brig	hton Accommodation Agency, 21 Bramber Road	d Seaford BN25 1AG
Property Description		
Short description of license	I HMO (No of storeys, etc)	
Property Type = SHARED HO	USE, No of Units = 1, Occupancy = 6, No of Sto	reys = 3
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 6	b) Living Rooms 1	
, , , ,	, ,	
Number of Self Contained F	ats: 0 Number of No	on Self Cont. Flats: 0
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers c) W.C.s	2	
C) W.C.S		
Licence Details		
Common common data:	42/02/2047 Pureties of	Harris 44/40/2004
Commencement date:	13/02/2017 <b>Duration of</b>	licence: 14/12/2021
Maximum number of person	s or households permitted to occupy HMO u	nder conditions of licence:
Households 6	Persons 6	
Information referred to a	residential property tribunal or Lands Tri	bunal:
None		
Decision of Tribunal	Refer	ence number
Summary of conditions of li Additional Facilities, HMO - El	cence ec Mandatory conds, HMO - Fire Mandatory con	ds, HMO - Furniture



## Licence No.

#### 2017/00014/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

3 Bristol Street Brighton BN2 5JT

Ward

East Brighton

Name & Address of Licenc	e Holder		
Dr Caroline Shulman, 64 Old Pa		Green London N13 4RE	
Name & Address of Person	Managing		
D&L Property Services, 2 Ashfo	rd Road Brighton E	ast Sussex BN1 6LJ	
Property Description			
Short description of licensed	HMO (No of storey	/s, etc)	
Property Type = SHARED HOU	SE, No of Units = 1	, Occupancy = 7, No of Storeys = 3	
Number of Rooms	Total Numbe	er of Rooms 8	
		Living Rooms	
a) Sleeping	0)	Living Rooms	
Normalis and Colf Countries of Flori		Normalis and Alban Collin Count Flori	4
Number of Self Contained Flat	:s: (	Number of Non Self Cont. Flat	s: 1
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number De 1 2 2 2 2	escription	
Licence Details			
0	00/00/0047	Donation of linears	0.4/0.4/0.000
Commencement date:	09/03/2017	Duration of licence:	04/01/2022
Maximum number of persons	or households pe	rmitted to occupy HMO under conditions	of licence:
Households 7	Persons 7		
Information referred to a re	sidential proper	ty tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice		Fire Mandatory conds. HMO . Furniture Man	datory conda



## Licence No.

#### 2017/00046/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

13 St Martins Place Brighton BN2 3LE

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder		
Ms Zena Trow, 2 Roedean Te	rrace Brighton BN2 5	RN	
Name & Address of Perso	n Managing		
,			
Duamanti: Daganintian			
Property Description  Short description of licenses	d UMO (No of store)	vo eta)	
•		•	
Ргорепу Туре = SHARED НО	USE, NO OF UNITS = 1	, Occupancy = 5, No of Storeys = 4	
Number of Rooms	Total Numbe	r of Rooms 6	
a) Sleeping 5	b)	Living Rooms 1	
Number of Self Contained Fl	ats:	Number of Non Self Cont. Flats:	1
Shared Amenities	Number De	escription	
a) Kitchen     b) Bathrooms/Showers	2		
c) W.C.s	2		
,			
Licence Details			
Commencement date:	30/03/2017	Duration of licence:	01/09/2021
Commencement date.	30/03/2017	buration of incence.	01/03/2021
Maximum number of person	s or households pe	rmitted to occupy HMO under conditions of	licence:
Households 5	Persons 5		
Information referred to a	residential proper	ty tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie Electrical Works, Fire El / Gl /	c <b>ence</b> Cupboards 1, HMO -	Elec Mandatory conds, HMO - Fire Locks, HM0	O - Fire

Electrical Works, Fire El / Gl / Cupboards 1, HMO - Elec Mandatory conds, HMO - Fire Locks, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Kitchen 6, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



## Licence No.

#### 2017/00056/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

7 Edinburgh Road Brighton BN2 3HY

Ward

St. Peter's And North Laine

Name & Address of Liceno	e Holder		
Ms Josephine Churchman, Cha	adwell House Chadwell I	Hill Chadwell St Mary's Grays Essex RM	16 4DJ
Name & Address of Perso	n Managing		
John Hilton Estate Agents, 127	5 5	N12 21 C	
John Fillion Estate Agents, 127	Lewes Road Brighton B	SNZ JLG	
Property Description			
Short description of licensed	HMO (No of storeys, e	etc)	
Property Type = SHARED HOL	JSE, No of Units = 5, Oc	ccupancy = 5, No of Storeys = 4	
Number of Rooms	Total Number of	Rooms 6	
a) Sleeping	b) Liv	ing Rooms	
Number of Self Contained Fla	oto: 0	Number of Non Self Cont. Flat	1
Number of Self Contained Fig	ats: 0	Number of Non Self Cont. Flat	s: 1
Shared Amenities	Number Descr	ription	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Licence Details			
Commencement date:	24/04/2017	Duration of licence:	27/06/2021
Maximum number of persons	s or households permit	tted to occupy HMO under conditions	of licence:
Have about	<b>D</b>	1	
Households 5	Persons 5		
Information referred to a r	esidential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic	ence		



## Licence No.

## 2017/00071/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

7 Rugby Place Brighton BN2 5JB

Ward

East Brighton

Name & Address of Licence	e Holder	
Mr Neil Myers, 46 Hove Park Wa	ay Hove BN3 6PW	
Name & Address of Person	Managing	
Dan Lyons, 74 Lewes Road Brig	yhton BN2 3HZ	
Property Description		
Short description of licensed	HMO (No of storeys, etc)	
Property Type = SHARED HOU	SE, No of Units = 1, Occupancy = 7, No of Storeys = 4	
	,··· -· -· ·· · · · · · · · · · · · ·	
Number of Rooms	Total Number of Rooms 8	
a) Sleeping 7	b) Living Rooms 1	
Number of Self Contained Flat	ts: 0 Number of Non Self Cont. Flats	s: 0
		<u> </u>
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
<b>0</b>	04/00/0047	40/04/0000
Commencement date:	24/02/2017 Duration of licence:	10/01/2022
Maximum number of persons	or households permitted to occupy HMO under conditions of	of licence:
Households 7	Persons 7	
Information veferal to a ve	cidoutial was noutry tuib was out and a Tuib was	
	esidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lice		
HMO - Elec Mandatory conds, F	HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds,	, HMO - Gas



## Licence No.

#### 2017/00109/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

17 Agnes Street Brighton BN2 3AS

Ward

Hanover And Elm Grove

Name & Address of Licence	Holdor	
ivii Simon Chaimak, 74 Lewes R	oad Brighton East Sussex BN2 3HZ	
Name & Address of Person	Managing	
	nodation Agency 74 Lewes Road Brighton BN2 3H	7
Wil Dan Lyons, Brighton Accorni	lodation Agency 74 Lewes Road Brighton Biv2 311	
Property Description		
Short description of licensed H	IMO (No of storeys, etc)	
Property Type = SHARED HOUS	SE, No of Units = 1, Occupancy = 7, No of Storeys	= 3
Number of Rooms	Total Number of Rooms 8	
a) Sleeping	b) Living Rooms	
		<del>-</del>
Number of Self Contained Flat	s: 0 Number of Non Se	elf Cont. Flats: 1
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s	Number Description  2 2	
Licence Details		
Commencement date:	04/04/2017 Duration of lice	nce: 11/01/2022
Maximum number of persons of	or households permitted to occupy HMO under	conditions of licence:
Households 7 F	Persons 7	
Information referred to a res	sidential property tribunal or Lands Tribun	al:
None		
Decision of Tribunal	Reference	number
Summary of conditions of licer	ıce	



## Licence No.

#### 2017/00181/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) Second And Third Floor Flat 31 York Place Brighton BN1 4GU

Ward

St. Peter's And North Laine

Name & Address of Licence Holder		
Indigo Leisure Ltd, The Wick 63 Western Road Hove BN3 1JD		
Name & Address of Person Managing		
Mr Dan Lyons, Brighton Accommodation Agency 74 Lewes Road	I Brighton BN2 3HZ	
Property Description		
Short description of licensed HMO (No of storeys, etc)		
Property Type = SHARED HOUSE, No of Units = 1, Occupancy	= 9, No of Storeys =	
Number of Rooms Total Number of Rooms		
	•	
a) Sleeping b) Living Room	S	
Number of Oalf Contained Flate.	loomban af Nan Oalf Oant Flater	0
Number of Self Contained Flats: 0	lumber of Non Self Cont. Flats:	0
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s		
Licence Details		
Commencement date: 14/08/2017	Duration of licence:	25/08/2020
Maximum number of persons or households permitted to oc	cupy HMO under conditions of li	cence:
Households Persons 9		
Information referred to a residential property tribunal	or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of license		



#### Licence No.

#### 2017/00212/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

133A London Road Brighton BN1 4JH

Ward

St. Peter's And North Laine

Name & Address of Licence Holder	
Mr Alfred Haagman, Meadowbrook House Brook Street Cuckfield RH17 5JJ	
<u> </u>	
Name & Address of Person Managing	
Hove Lets, 204 Church Road Hove BN3 2DJ	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms Total Number of Rooms 6	
a) Sleeping b) Living Rooms	
a) Steeping b) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	»: 0
Number of Sen Contained Flats.	0
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s	
Licence Details	
Commencement date: 25/04/2014 Duration of licence:	11/03/2018
Maximum number of persons or households permitted to occupy HMO under conditions of	f licence:
Maximum number of persons or households permitted to occupy HMO under conditions of Households 6 Persons 6	f licence:
	f licence:
Households 6 Persons 6	of licence:
Households 6 Persons 6  Information referred to a residential property tribunal or Lands Tribunal:	of licence:

Fire EI / GI / Cupboards 1, Fire EI / GI / Cupboards 6, Fire Seperation, HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 3, HMO - Fire Blanket, HMO - Fire Emergency Lighting 1, HMO - Fire Mandatory conds, HMO - Fire Notices 1, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Bedrooms, HMO - Licensing Loft Insulation, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, management/repairs





## Licence No.

#### 2017/00236/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

75 Riley Road Brighton BN2 4AG

Ward

Moulsecoomb And Bevendean

Name & Address of Licence	Holder		
Ms Ellen Gray, 4 Portand Terrace			
Enon Gray, Fr Grand Torrado	The strings into Tiles		
Name & Address of Person	Managing		
		n Hand Heathfield East Sussex, TN21	0TZ
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = Not Assigned, N	o of Units = 5, Occupanc	y = 5, No of Storeys = 3	
	<b>-</b>	_	
Number of Rooms	Total Number of Ro	ooms 5	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Fla	ts: 0
	Number Descript	ion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Common common to data:	22/02/2017	Duration of linears	42/02/2022
Commencement date:	22/03/2017	Duration of licence:	13/02/2022
Maximum number of persons of	r households permitted	d to occupy HMO under conditions	of licence:
Households 5 P	ersons 5		
Information referred to a res	idential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
O			

Summary of conditions of licence



## Licence No.

#### 2017/00238/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

33 Hillside Brighton BN2 4TF

Ward

Moulsecoomb And Bevendean

Name & Address of Licence Holder	
Rivers Birtwell Ltd, 8 Bramble Rise Brighton BN1 5GF	
Name & Address of Person Managing	
Home James Residential Lets Ltd T/as Home James Lets, Kingsway 134-140 Church Road F	Hove East Sussex
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 9, No of Storeys = 3	
T. (11)	
Number of Rooms Total Number of Rooms 9	
a) Sleeping b) Living Rooms 1	
Number of Self Contained Flats: 0 Number of Non Self Cont. F	Flats: 0
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s  Number  Description  2  3	
Licence Details	
Commencement date: 10/02/2017 Duration of licence:	08/03/2021
	33.33.23.2
Maximum number of persons or households permitted to occupy HMO under condition	ns of licence:
Households 9 Persons 9	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of licence	andatan, aanda



## Licence No.

#### 2017/00239/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

122 The Avenue Brighton BN2 4FD

Ward

Moulsecoomb And Bevendean

Name & Address of Licen	ce Holder		
Rivers Birtwell Ltd, 8 Bramble	Rise Brighton BN1 5GF		
Name & Address of Perso	n Managing		
Home James Residential Lets	Ltd T/as Home James Le	ets, Kingsway 134-140 Church Road Ho	ove East Sussex
Property Description			
Short description of licensed	d HMO (No of storeys, e	tc)	
Property Type = SHARED HO	USE, No of Units = 1, Oc	cupancy = 9, No of Storeys = 3	
N	T. (.   N	D	
Number of Rooms	Total Number of	Rooms 10	
a) Sleeping 9	b) Livi	ing Rooms 1	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Fla	ats: 0
Shared Amenities	Number Descr	iption	
a) Kitchen b) Bathrooms/Showers	3		
c) W.C.s	3		
Licence Details			
Commencement date:	10/02/2017	Duration of licence:	29/03/2021
Sommencement date.	10/02/2017	Duration of licence.	29/03/2021
Maximum number of person	s or households permit	ted to occupy HMO under conditions	s of licence:
Households 9	Persons 9		
nousenoids 9	reisons 9		
Information referred to a	residential property ti	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice Fire Alarm, HMO - Elec Manda		Mandatory conds, HMO - Furniture Man	datory conds,



## Licence No.

## 2017/00304/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

23 Brewer Street Brighton BN2 3HH

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
Mr Philip Donovan, Sunset Do	wn Henfield Road Sr	mall Dole Henfield BN5 9XJ	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	d HMO (No of store)	ys, etc)	
Property Type = SHARED HO	USE, No of Units = 5	5, Occupancy = 5, No of Storeys = 3	
N	<b>T</b> (   N		
Number of Rooms	Total Numbe		
a) Sleeping 5	b)	) Living Rooms 1	
Number of Self Contained Fl	ats:	0 Number of Non Self Cont. Flats:	1
Shared Amenities	Number De	escription	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
Licence Details			
Commencement date:	23/08/2017	Duration of licence:	28/01/2022
Maximum number of person	s or households pe	ermitted to occupy HMO under conditions of I	licence:
Households 5	Persons 5		
Information referred to a	residential proper	rty tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic	cence		
HMO - Elec Mandatory conds,	HMO - Fire Mandato	ory conds, HMO - Furniture Mandatory conds, Hory conds, HMO - Property Maint Mandatory cond	



## Licence No.

#### 2017/00354/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Second And Third Floor Flat 52 Lansdowne Place Hove BN3 1FG

Ward

Brunswick And Adelaide

Name & Address of Licen	ice Holder			
Mr Emad Herandi, Ground Flo	or Office 46 Lansd	owne Place	Hove BN3 1HH	
Name & Address of Perso	on Managing			
,				
Property Description		1 .		
Short description of license	•	•		
Property Type = SHARED HO	USE, No of Units =	= 1, Occupan	cy = 6, No of Storeys = 2	
Number of Rooms	Total Num	ber of Room	ns 7	
a) Sleeping 6		b) Living Ro	oms 1	
, . <del>.</del>		, ,		
Number of Self Contained F	lats:	0	Number of Non Self Cont. Flats:	0
			1	
Shared Amenities	Number	Description		
a) Kitchen	2			
b) Bathrooms/Showers	2			
c) W.C.s	2			
Licence Details				
Commencement date:	01/11/201	7	Duration of licence:	30/10/2021
Maximum number of person	s or households p	permitted to	occupy HMO under conditions of I	icence:
	_			
Households 6	Persons	6		
Information referred to a	residential prop	erty tribun	al or Lands Tribunal:	
None		,		
Decision of Tribunal			Reference number	
Summary of conditions of li HMO - Elec Mandatory conds		i 4, HMO - Fi	re Mandatory conds, HMO - Furniture	



## Licence No.

#### 2017/00382/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

162 Upper Lewes Road Brighton BN2 3FB

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder			
Mr Daniel Darwish, 121 Wood	ville Road Barnet E	EN5 5NS		
Name & Address of Perso	n Managing			
Pavillion Properties Ltd, Groun	nd Floor 128-129 Lo	ewes Road B	righton BN2 3LG	
Property Description				
Short description of license	d HMO (No of stor	reys, etc)		
Property Type = SHARED HO	USE, No of Units =	= 1, Occupano	cy = 6, No of Storeys = 4	
Number of Rooms	Total Num	ber of Room	s 7	
	i Otal Nulli			
a) Sleeping 6		b) Living Roo	oms 1	
Number of Self Contained Fl	ats:	0	Number of Non Self Cont. Flats:	0
Shared Amenities		Description		
a) Kitchen b) Bathrooms/Showers	2			
c) W.C.s	3			
,				
Licence Details				
	2.122.122.1			
Commencement date:	24/02/201	7	Duration of licence:	27/01/2022
Maximum number of person	s or households <sub>l</sub>	permitted to	occupy HMO under conditions of li	icence:
Households 6	Persons	6		
Tiouseriolus	reisons	0		
Information referred to a	residential prop	erty tribuna	nl or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of lie HMO - Elec Mandatory conds,		atory conds, I	HMO - Furniture Mandatory conds, HM	MO - Gas



## Licence No.

#### 2017/00383/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

161 Upper Lewes Road Brighton BN2 3FB

Ward

St. Peter's And North Laine

Name & Address of Licen	ice Holder			
Mr Daniel Darwish, 121 Wood		EN5 5NS		
Name & Address of Perso	on Managing			
Pavilion Properties Ltd, 39 Sa	ckville Road Hove	BN3 3WD		
Property Description				
Short description of license	•			
Property Type = SHARED HO	USE, No of Units	= 1, Occupano	cy = 6, No of Storeys = 4	
Number of Rooms	Total Nur	nber of Room	s 7	
a) Sleeping 6		b) Living Roo	oms 1	
, . <b>.</b>		, •		
Number of Self Contained F	lats:	0	Number of Non Self Cont. Flats:	0
Shared Amenities	Number	Description		
a) Kitchen	2			
b) Bathrooms/Showers c) W.C.s	3			
C) VV.O.3	3			
Licence Details				
Commencement date:	24/02/20	117	Duration of licence:	27/01/2022
Commencement date.	24/02/20	117	Duration of licence.	2770172022
Maximum number of person	s or households	permitted to	occupy HMO under conditions of I	icence:
Households 6	Persons	6		
Information referred to a	residential pro	perty tribuna	al or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of lie HMO - Elec Mandatory conds,		datory conds, I	HMO - Furniture Mandatory conds, H	MO - Gas



## Licence No.

#### 2017/00385/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

13 Ditchling Rise Brighton BN1 4QL

Ward

Preston Park

Name & Address of Licence	Holder				
Mr Michael Warburton, Rudel Lie	Mr Michael Warburton, Rudel Lieu Dit Rudel Alos Tarn France 81140				
Name & Address of Person	Managing				
Wilkinsons Estate Agents, 24 Elm	ı Grove Brighton East S	ussex BN2 3DD			
Property Description					
Short description of licensed H	MO (No of storeys, etc	e)			
Property Type = SHARED HOUS	E, No of Units = 1, Occi	upancy = 5, No of Storeys = 4			
Number of Rooms	Total Number of R	Rooms 6			
a) Sleeping 5	b) Livin	g Rooms 1			
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Flats:	0		
Shared Amenities 1	Number Descrip	otion			
a) Kitchen	1				
b) Bathrooms/Showers	1				
c) W.C.s	2				
Licence Details					
Commencement date:	16/03/2017	Duration of licence:	26/01/2022		
Maximum number of persons of	ur hausahalds narmitte	ed to occupy HMO under conditions of	iconco:		
maximum number of persons o	i nousenolus permitte	to occupy rimo under conditions or	ilcerice.		
Households 5 P	ersons 5				
Information referred to a res	idential property tri	bunal or Lands Tribunal:			
None					
Decision of Tribunal		Reference number			
Summary of conditions of licen HMO - Elec Mandatory conds, HM		nds, HMO - Furniture Mandatory conds, H	MO - Gas		



## Licence No.

#### 2017/00406/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

26 - 27 Bedford Square Brighton BN1 2PL

Ward

Regency

Name & Address of Licer	nce Holder		
Mr David Delicata, 14-19 Norf	olk Terrace Brighton BN	11 3AD	
Name & Address of Pers	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys,	, etc)	
Property Type = Not Assigned	I, No of Units = 29, Occi	upancy = 30, No of Storeys = 5	
Number of Rooms	Total Number of	of Rooms 29	
a) Sleeping 29	D) L	iving Rooms	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats:	0
Ole and d. A	Namelan Bas	- utanti - u	
Shared Amenities a) Kitchen	Number Desc	cription	
b) Bathrooms/Showers	7		
c) W.C.s	9		
Licence Details			
Commencement date:	14/09/2017	Duration of licence:	30/01/2022
Commencement date.	14/03/2017	Duration of ficerice.	30/01/2022
Maximum number of persor	ıs or households perm	nitted to occupy HMO under conditions of	licence:
Households 29	Persons 30		
Tiouseriolus 25	1 6130113		
Information referred to a	residential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li		conds, HMO - Furniture Mandatory conds, H	IMO -

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Heating 5, HMO - Repairs Water 1, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Maangement/Repairs, Management/Repairs, management/Repairs



## Licence No.

#### 2017/00414/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

19 Linton Road Hove BN3 5HF

Ward

Wish

Nama O Adduses of License Held	la u	
Name & Address of Licence Hold Mr Mark Dyer, 76 Old Shoreham Road		
ivii Mark Dyer, 76 Old Shorenam Road	HOVE EAST SUSSEX DING OFF	
Name & Address of Person Mana	aging	
ramo a mandos on croom mana	.gg	
,		
Property Description		
Short description of licensed HMO (N	No of storeys, etc)	
Property Type = SHARED HOUSE, No	of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms To	otal Number of Rooms 7	
a) Sleeping <b>5</b>	b) Living Rooms 1	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	0
Shared Amenities Number	er Description	
a) Kitchen 1		
b) Bathrooms/Showers 3 c) W.C.s 4		
c) W.C.s 4		
Licence Details		
Commencement date:	28/03/2017 Duration of licence:	30/01/2022
commencement date.	Duration of licence.	30/01/2022
Maximum number of persons or hou	seholds permitted to occupy HMO under conditions of li	cence:
Households 5 Person	<b>s</b> 5	
Information referred to a resident	tial property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence	Fire Mandatory conds HMO - Furniture Mandatory conds HM	10. 000



## Licence No.

## 2017/00425/HMO/PS

## **REGISTER ENTRY FOR** (Address of licensed HMO)

30 Ladysmith Road Brighton BN2 4EJ

Ward

Moulsecoomb And Bevendean

Name & Address of Licer	nce Holder		
Mr Brett Vallier, 182 Balfour R			
Name & Address of Licer	nce Holder		
Mr Gary Vallier, 47 Langdale	Road Hove BN3 4HR		
Name & Address of Person	on Managing		
,			
Branarty Description			
Property Description	d LIMO (No. of atomore	ata)	
Short description of license	-		
Property Type = SHARED HC	JUSE, No of Units = 1, O	Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number o	of Rooms 7	
a) Sleeping 6	b) Li	ving Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fl	ats: 0
Shared Amenities	Number Desc	cription	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	19/04/2017	Duration of licence:	28/02/2022
Maximum number of persor	ns or households perm	itted to occupy HMO under condition	s of licence:
Households 6	Persons 6		
Information referred to a	residential property	tribunal or Lands Tribunal:	
	residential property	tribuliar of Lanus Tribulial.	
None HMQ: ElectMandatery conds	HMO - Fire Mandatory	conds, HMO - Furniture Mandatory വേ	ds HMO - Gas
Mandatory conds, HMO - Pro	perty Chges Mandatory	conds, HMO - Property Maint Mandatory	conds, HMO -
BuhhhaResye Mandalasy and	<b>്ട്രേ</b> ⊬്ല്MO - Гenant Agrm	int Mandatory conds	



## Licence No.

#### 2017/00433/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

48 Ewhurst Road Brighton BN2 4AJ

Ward

Moulsecoomb And Bevendean

Name & Address of Lice	nce Holder		
Mr Philip Hilliard, 76 The Dro		R	
, , , , , , ,			
Name & Address of Pers	on Managing		
,			
Property Description			
Short description of license	ed HMO (No of store	eys, etc)	
Property Type = SHARED HO	OUSE, No of Units =	1, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Numb	er of Rooms 8	
a) Sleeping 6	b	b) Living Rooms 1	
N	-	N	
Number of Self Contained I	lats:	0 Number of Non Self Cont. FI	ats: 0
Shared Amenities	Number D	Description	
a) Kitchen	2	vescription	
b) Bathrooms/Showers	2		
c) W.C.s	2		
License Deteile			
Licence Details			
Commencement date:	10/05/2017	Duration of licence:	01/02/2022
Maximum number of perso	ns or households pe	ermitted to occupy HMO under condition	s of licence:
	_	.,	
Households 6	Persons 6	5	
Information referred to a	residential prope	rty tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of I		Systems 3 HMO - Fire Mandatory conds. HI	MO - Furniture

HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 3, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Bedrooms, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Works



## Licence No.

#### 2017/00468/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 83 Hangleton Road Hove BN3 7GH

Ward

Hangleton And Knoll

Name & Address of Licer	ce Holder		
Mr Nick Pannett, 81 Hangletor	n Road Hove BN3 7GH		
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, e	etc)	
Property Type = SHARED HC	USE, No of Units = 5, Oc	ccupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 5	
a) Sleeping 5	b) Livi	ing Rooms	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flat	s: 0
Shared Amenities	Number Descr	ription	
a) Kitchen	1	•	
b) Bathrooms/Showers	2		
c) W.C.s	3		
Licence Details			
Commencement date:	07/04/2017	Duration of licence:	01/02/2022
Commencement date:	07/04/2017	Duration of licence:	01/02/2022
Maximum number of person	s or households permit	ted to occupy HMO under conditions	of licence:
	_	1	
Households 5	Persons 5		
Information referred to a	residential property t	ribunal or Lands Tribunal:	
None	residential property ti	Hibariai of Earlas Illibariai.	
Decision of Tribunal		Reference number	
Decision of Hibanal		Reference number	
Summary of conditions of li	cence	Mandatan and IIMO Funda and	data



## Licence No.

#### 2017/00487/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

Maisonette 143 Queens Park Road Brighton BN2 0GH

Ward

Hanover And Elm Grove

Name & Address of Licen			
Pelham Property Ltd, C/o Aring	gton 15 Station Road Bu	urgess Hill West Sussex RH15 9DE	
Name & Address of Perso			
Arington Ltd, 15 Station Road	Burgess Hill West Susse	ex RH15 9DE	
Property Description			
Short description of license	d HMO (No of storeys,	etc)	
Property Type = SHARED HO	USE, No of Units = 1, O	ccupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number o	f Rooms 6	
a) Sleeping 5	b) Liv	ving Rooms 1	
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities		ription	
a) Kitchen b) Bathrooms/Showers	1		
c) W.C.s	2		
-,			
Licence Details			
	00/00/0047	J	07/00/0000
Commencement date:	20/02/2017	Duration of licence:	07/02/2022
Maximum number of person	s or households permi	itted to occupy HMO under conditions of I	icence:
Households 5	Persons 5		
nouseriolus 5	Persons 5		
Information referred to a	residential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie HMO - Elec Mandatory conds,		conds, HMO - Furniture Mandatory conds, HI	MO - Gas



## Licence No.

## 2017/00509/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

96 Roundhill Crescent Brighton BN2 3FR

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
Mrs Diane Turner, 23 Stanford	Avenue Brighton BN1 6	6GA	
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys,	etc)	
Property Type = SHARED HO	USE, No of Units = 1, O	ccupancy = 5, No of Storeys = 4	
Number of Rooms	Total Number of	f Rooms 6	
a) Sleeping 5	b) Liv	ving Rooms 1	
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities	Number Desc	ription	
a) Kitchen	1		
o) Bathrooms/Showers	1		
c) W.C.s	2		
Licence Details			
Commencement date:	28/03/2017	Duration of licence:	22/10/2021
	20,00,2017		22/10/2021
Maximum number of person	s or households permi	itted to occupy HMO under conditions	of licence:
Households 5	Persons 5	٦	
iousenoius 5	0		
nformation referred to a	residential prope <u>rty</u> t	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie HMO - Flec Mandatory conds.		conds, HMO - Furniture Mandatory conds	s. HMO - Gas
		conds. HMO - Property Maint Mandatory	



## Licence No.

#### 2017/00512/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

73 Park Crescent Road Brighton BN2 3HS

Ward

St. Peter's And North Laine

lame & Address of Licer	nce Holder		
/r Peter John Salt, 3 Rue De	la Cle Des Champs 8651	0 Champayne Le Sec FRANCE	
lame & Address of Perso	on Managing		
Property Description			
Short description of license	d HMO (No of storeys, e	etc)	
roperty Type = SHARED HC	OUSE, No of Units = 1, Oc	ccupancy = 5, No of Storeys = 3	
lumber of Rooms	Total Number of	f Rooms 7	
) Sleeping 5	D) LIV	ring Rooms 1	
lumber of Self Contained F	lats: 0	Number of Non Self Cont. Flat	s: 0
iumber of Self Contained F	iais.	Number of Non Self Cont. Flat	<b>s.</b> 0
hared Amenities	Number Desc	ription	
) Kitchen	1		
) Bathrooms/Showers	1		
) W.C.s	1		
icence Details			
Commencement date:	11/03/2015	Duration of licence:	23/07/2019
laximum number of persor	is or households permi	tted to occupy HMO under conditions	of licence:
louseholds 5	Persons 5		
		_	
nformation referred to a	residential property t	ribunal or Lands Tribunal:	
lone			
ecision of Tribunal		Reference number	
	m, HMO - Elec Mandatory	y conds, HMO - Fire Mandatory conds, HI	



## Licence No.

#### 2017/00518/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

11 Islingword Place Brighton BN2 9XG

Ward

Hanover And Elm Grove

Name & Address of Licence	Holder Holder	
Mr Christopher Ward, 5 Swaby F	Road London SW18 3PX	
Name & Address of Person	Managing	
John Hilton Ltd, 127 Lewes Roa	d Brighton BN2 3LG	
Duna anta di Dana animti an		
Property Description  Short description of licensed I	JMO (No of storous sto)	
•	• • •	
Ргорепу Туре = SHARED HOUS	SE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 5	b) Living Rooms 1	
Number of Self Contained Flat	s: 0 Number of Non Self Cont. Flats:	1
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers c) W.C.s	2	
C) W.C.S		
Licence Details		
Commencement date:	02/05/2017 Duration of licence:	07/02/2022
Maximum number of persons	or households permitted to occupy HMO under conditions of li	cence:
Uavaahalda 5	Down and 5	
Households 5	Persons 5	
Information referred to a re	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lice HMO - Elec Mandatory conds, H	nce MO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HN	MO - Gas



## Licence No.

#### 2017/00555/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

37 Blaker Street Brighton BN2 0JJ

Ward

Queen's Park

Name & Address of Licence	Holder		
Mrs E Raptaki, Sklavounon 4 Pir	eus 13985 Greece		
Name & Address of Person			
G K White Company Ltd, 165 Le	wes Road Brighton BN2	3LD	
<b>5</b>			
Property Description			
Short description of licensed H	-		
Property Type = SHARED HOUS	SE, No of Units = 5, Occu	ipancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of R	ooms 6	
a) Sleeping 5	D) LIVIII(	g Rooms 1	
Number of Self Contained Flat	s: 0	Number of Non Self Cont. Flat	s: 1
Shared Amenities a) Kitchen	Number Descrip	tion	
b) Bathrooms/Showers	1		
c) W.C.s	2		
Licence Details			
<b>2</b>	00/44/0047	B	07/04/0000
Commencement date:	08/11/2017	Duration of licence:	27/01/2022
Maximum number of persons of	or households permitte	d to occupy HMO under conditions	of licence:
Households 5 F	Persons 5		
Information referred to a res	sidential property tril	ounal or Lands Tribunal:	
None	property till		
Decision of Tribunal		Reference number	
Summary of conditions of lice	nce		



## Licence No.

#### 2017/00583/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

38 Carlyle Street Brighton BN2 9XW

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder		
McGo Properties Ltd, Hollyme	ade Clydesdale Road B	raintree Essex CM7 2NX	
Name & Address of Perso	on Managing		
My Lets Ltd, Amelia House Cro	<u> </u>	N11 10P	
iviy Lets Ltd, Afficia House Cit	sscent Road Worthing B	INTERNATION	
Property Description			
Short description of licensed	d HMO (No of storeys,	etc)	
Property Type = SHARED HO	USE, No of Units = 1, O	ccupancy = 5, No of Storeys = 4	
Number of Rooms	Total Number o	f Rooms 5	
a) Sleeping	b) Liv	ving Rooms	
N		N l (N 0 . (0 ( 5)	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Flat	s: 1
Shared Amenities	Number Desc	ription	
a) Kitchen	1	•	
b) Bathrooms/Showers	2		
c) W.C.s	3		
Licence Details			
Licence Details			
Commencement date:	05/02/2018	Duration of licence:	10/02/2022
Maximum number of person	s or households permi	itted to occupy HMO under conditions	of licence:
		¬	
Households 5	Persons 5		
Information referred to a <b>i</b>	residential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic		conde HMO Eurnituro Mandatory conde	HMO Goo



## Licence No.

#### 2017/00651/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

27 Waterloo Street Hove BN3 1AN

Ward

Brunswick And Adelaide

Name & Address of Licence	e Holder		
Ms V Jaffe, 44 Lansdowne Plac	e Hove BN3 1HH		
Name & Address of Perso	n Managing		
,			
Property Description			
	LIMO (No of stances of	4-1	
Short description of licensed	HMO (No of storeys, e	etc)	
Property Type = SHARED HOL	JSE, No of Units = 1, Oc	ccupancy = 6, No of Storeys = 5	
	_ , ,		
Number of Rooms Total Number of Rooms 8			
a) Sleeping b) Living Rooms			
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1			
Shared Amenities	Number Desc	sintian	
a) Kitchen	Number Descri	ription	
b) Bathrooms/Showers	7		
c) W.C.s	8		
<i>c)</i> <b>w</b> .o.o			
Licence Details			
Elocitor Botano			
Commencement date:	18/05/2017	Duration of licence:	11/03/2022
Maximum number of persons	or households permit	tted to occupy HMO under conditions	of licence:
	_	1	
Households 6	Persons 6		
Information referred to a re	esidential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic	onco		
Jummary of Comultions of He	5116 <b>6</b>		



#### Licence No.

#### 2017/00665/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

36 Ewhurst Road Brighton BN2 4AJ

Ward

Moulsecoomb And Bevendean

Name & Address of Licence	Holder	
Ms Laura Dwyer-Smith, 51 Dyke R	Road Avenue Hove BN3 6QD	
Name of Address of Brown a	•	
Name & Address of Person N	lanaging	
,		
Property Description		
Short description of licensed HM	/IO (No of storeys, etc)	
Property Type = SHARED HOUSE	E, No of Units = 6, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping 5	b) Living Rooms 1	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	1
Shared Amenities N	umber Description	
a) Kitchen	1	
b) Bathrooms/Showers c) W.C.s	2 2	
0) 11.0.3		
Licence Details		
Commencement date:	27/10/2017 Duration of licence:	26/03/2022
Maximum number of persons or	households permitted to occupy HMO under conditions of li	conco:
maximum number of persons of		cence.
Households 6 Pe	rsons 6	
Information referred to a resi	dential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licente HMO - Elec Mandatory conds, HM	ce O - Fire Mandatory conds. HMO - Furniture Mandatory conds. HM	ЛО - Gas



#### Licence No.

#### 2017/00758/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

3 Old Shoreham Road Brighton BN1 5DQ

Ward

Preston Park

Name & Address of Licence			
Haydan Ltd, The Old Casino 28 I	Fourth Avenue Hove BN	3 2PJ	
Name of Address of Barrers	Managhan		
Name & Address of Person			
D L Property Services Ltd, 2 Ash	iford Road Brighton BN1	6LJ	
Durante Description			
Property Description	INO (No. of a town on the	<b>.</b>	
Short description of licensed F	-		
Property Type = SHARED HOUS	SE, No of Units = 1, Occu	ipancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of R	ooms 7	
a) Sleeping	h) Living	Rooms	
a) Siceping	ט) בויווונ	, rooms	
Noveles and Oalf Oantains of Flat		Normalis or of Norm Calls Court Flori	
Number of Self Contained Flat	s: 0	Number of Non Self Cont. Flat	s: 0
Shared Amenities	Number Decerin	tion	
a) Kitchen	Number Descrip	uon	
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	21/04/2017	Duration of licence:	21/02/2022
Maximum number of persons of	or households permitte	d to occupy HMO under conditions	of licence:
	-		
Households 6 F	Persons 6		
Information referred to a res	sidential property tril	ounal or Lands Tribunal:	_
None	property tris	Janar Or Earlas Tribuliai.	·
Decision of Tribunal		Reference number	
		Neierence number	
Summary of conditions of licer	nce	L 1840 F W M	LIMO



#### Licence No.

#### 2017/00773/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

1 Campbell Road Brighton BN1 4QD

Ward

Preston Park

Name & Address of Licence Holder	
Mr Anwar Osman, 4 Victoria Street Brighton BN1 3FP	
IVII Aliwai Oshlari, 4 Victoria Street Diighton Divi Si i	
Name & Address of Person Managing	
Mr Dan Lyons, 74 Lewes Road Brighton BN2 3HZ	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 7, No of Storeys = 4	
Number of Rooms Total Number of Rooms 8	
a) Sleeping b) Living Rooms 1	
N -1 (0 K0 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
Number of Self Contained Flats: 0 Number of Non Self Cont	t. Flats: 0
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s  Number  2  2  2  3	
Licence Details	
Commencement date: 09/06/2017 Duration of licence:	21/02/2022
Commencement date.	21/02/2022
Maximum number of persons or households permitted to occupy HMO under condit	ions of licence:
Households 7 Persons 7	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference numb	er
Summary of conditions of licence  HMO - Flee Mandatory conds HMO - Fire Mandatory conds HMO - Furniture Mandatory conds	conds HMO - Gas



#### Licence No.

#### 2017/00820/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

6 Hollingdean Road Brighton BN2 4AA

Ward

Hollingdean And Stanmer

			-
Name & Address of Licenc	e Holder		
Mr Lawrence Boon, 21 Commer	ce Way Lancing West	Sussex BN15 8TA	
Name & Address of Persor	Managing		
Mr Dan Lyons, 74 Lewes Road	Brighton BN2 3HZ		
Property Description			
Short description of licensed	HMO (No of storeys, e	etc)	
Property Type = SHARED HOU	SE, No of Units = 1, Oc	ccupancy = 6, No of Storeys = 4	
Number of Decree	Total Number of	S Doome 7	
Number of Rooms	Total Number of	f Rooms 7	
a) Sleeping	b) Liv	ring Rooms	
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Fla	ats: 0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number  1 2 2	ription	
Licence Details			
Commencement date:	21/04/2017	Duration of licence:	23/02/2022
Commencement date.	21/04/2017	Buration of incence.	25/02/2022
Maximum number of persons	or households permi	tted to occupy HMO under conditions	of licence:
Households 6	Persons 6		
Information referred to a re	esidential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice HMO - Elec Mandatory conds. H		conds. HMO - Furniture Mandatory cond	s. HMO - Gas



#### Licence No.

#### 2017/00865/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

28 St Martins Place Brighton BN2 3LE

Ward

Hanover And Elm Grove

Name & Address of Licer	ce Holder	
DB Sussex Investments Ltd, 2	Ashford Road Brighton BN1 6LJ	
Name & Address of Person	on Managing	
Mr Dan Lyons, Brighton Accor	mmodation Agency 74 Lewes Road Brighton BN2 3HZ	
Property Description		
Short description of license		
Property Type = SHARED HC	USE, No of Units = 1, Occupancy = 6, No of Storeys = 4	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping 6	b) Living Rooms 1	
a) oloopiilg	5) Itmig reconc	
Number of Self Contained F	lats: 0 Number of Non Self Cont. Fla	nts: 1
Number of Jen Johnameu i	ats. Valider of Non Sen Sont. The	1
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	6	
c) W.C.s	7	
Licence Details		
Licence Details		
Commencement date:	01/11/2017 <b>Duration of licence</b> :	27/02/2022
M		of linears
Maximum number of person	s or households permitted to occupy HMO under conditions	of licence:
Households 6	Persons 6	
	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of li HMO - Elec Mandatory conds	cence HMO - Fire Doors 8, HMO - Fire Mandatory conds, HMO - Furni	iture



#### Licence No.

#### 2017/00868/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

17 Beaconsfield Road Brighton BN1 4QH

Ward

Preston Park

Name & Address of Licen	ce Holder		
DB Sussex Investments Ltd, 2	Ashford Road Brighton E	BN1 6LJ	
Name & Address of Perso	on Managing		
Mr Dan Lyons, Brighton Accor	nmodation Agency 74 Le	wes Road Brighton BN2 3HZ	
Dronouty Description			
Property Description  Short description of license	d HMO (No of storevs. ε	etc)	
-		ccupancy = 6, No of Storeys = 3	
		· · · · · · · · · · · · · · · · · · ·	
Number of Rooms	Total Number of	Rooms 7	
a) Sleeping	b) Livi	ing Rooms	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities		ription	
a) Kitchen	1		
b) Bathrooms/Showers	5		
c) W.C.s	6		
Licence Details			
Commencement date:	18/05/2017	Duration of licence:	27/02/2022
Maximum number of person	s or households normit	tted to occupy HMO under conditions of	licence:
maximum number of person	3 of flousefloids permit	tica to occupy rimo under conditions or	nochoc.
Households 6	Persons 6		
Information referred to a	residential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie	cence		



#### Licence No.

#### 2017/00905/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

45 Coombe Road Brighton BN2 4ED

Ward

Moulsecoomb And Bevendean

Name & Address of Licer	nce Holder
Mr Jianzhi Ni, 16 Stone Street	t Brighton BN1 2HB
Name & Address of Person	on Managing
,	
Property Description	
Short description of license	ed HMO (No of storevs. etc)
·	DUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3
1 Toperty Type - STIAINED TIC	7, Occupancy – 0, No of Storeys – 3
Number of Rooms	Total Number of Rooms 7
a) Sleeping 6	b) Living Rooms 1
,pg	2) =g
Number of Calf Contained F	Number of Non Calif Cont. Flate:
Number of Self Contained F	Flats: 0 Number of Non Self Cont. Flats: 0
<b>0.</b>	
Shared Amenities	Number Description
<ul><li>a) Kitchen</li><li>b) Bathrooms/Showers</li></ul>	2 2
c) W.C.s	2
<i>c) w.o.</i> 3	
Licence Details	
Commencement date:	23/06/2017 <b>Duration of licence:</b> 01/03/2022
maximum number of persor	ns or households permitted to occupy HMO under conditions of licence:
Households 6	Persons 6
Information referred to a	residential property tribunal or Lands Tribunal:
None	
Decision of Tribunal	Reference number
Summary of conditions of li	
Summary of conditions of li	icence



#### Licence No.

#### 2017/00954/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

7 Upper Hollingdean Road Brighton BN1 7GA

Ward

Hollingdean And Stanmer

Name & Address of Licen	ce Holder		
Mr Terry Hermon, 2 Sandringh	am Avenue London	n SW20 8JY	
Name & Address of Perso	n Managing		
Mr Dan Lyons, Brighton Accon	nmodation Agency 2	21 Bramber Road Seaford BN25 1AG	
Property Description			
Short description of licensed	HMO (No of store	eys, etc)	
Property Type = SHARED HO	USE, No of Units =	1, Occupancy = 6, No of Storeys = 3	
Number of Rooms		per of Rooms 6	
a) Sleeping 6	k	b) Living Rooms 1	
Number of Self Contained FI	ats:	0 Number of Non Self Cont. Flats:	0
Shared Amenities	Number D	Description	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	3		
Licence Details			
Commencement date:	04/04/2017	Duration of licence:	15/05/2020
Maximum number of person	s or households p	ermitted to occupy HMO under conditions of	licence:
Households 6	Persons 6	6	
Information referred to a	residential prope	erty tribunal or Lands Tribunal:	
None	esidential prope	rty tribunar or Earnas Tribunar.	
Decision of Tribunal		Reference number	
0			
	atory conds, HMO -	Fire Mandatory conds, HMO - Fire Test Certifica y conds, HMO - Property Chges Mandatory cond	

Fire Alarm, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Fire Test Certificates, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs



#### Licence No.

#### 2017/00998/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

22 York Villas Brighton BN1 3TS

W	ard

Preston Park

Name & Address of Licer	nce Holder		
Mr Desmond James Russell, 2	22 York Villas Brighton BN	N1 3TS	
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, e	tc)	
Property Type = BEDSIT, No	of Units = 4, Occupancy =	4, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 4	
a) Sleeping	b) Livi	ng Rooms	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flat	s: 1
01			
Shared Amenities	Number Descr	iption	
a) Kitchen	Number Descr	iption	
a) Kitchen b) Bathrooms/Showers		iption	
a) Kitchen	4	iption	
a) Kitchen b) Bathrooms/Showers c) W.C.s	4 2	iption	
a) Kitchen b) Bathrooms/Showers c) W.C.s	4 2	iption	
a) Kitchen b) Bathrooms/Showers c) W.C.s	4 2	Duration of licence:	03/03/2020
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:	15/08/2017	Duration of licence:	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:	15/08/2017		
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:	15/08/2017	Duration of licence:	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of person	15/08/2017 as or households permit	Duration of licence:	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of person Households  4	4 2 2 2 15/08/2017  as or households permit  Persons 4	Duration of licence:	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of person Households  4	4 2 2 2 15/08/2017  as or households permit  Persons 4	Duration of licence: ted to occupy HMO under conditions	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of person Households 4  Information referred to a	4 2 2 2 15/08/2017  as or households permit  Persons 4	Duration of licence: ted to occupy HMO under conditions	



#### Licence No.

#### 2017/01000/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

9 Sudeley Street Brighton BN2 1HE

			ward	East Bri	gnton
Name & Address of Licer	nce Holder				
Mr Stuart Horwood, Old Bram	bles House Fletch	ing Common (	Chailey East Su	ssex BN8 4JH	
Name & Address of Person					
01 Property Letting Limited, 5	3 St James's Stree	et Brighton BN	2 1QG		
Property Description					
Short description of license	d HMO (No of sto	oreys, etc)			
Property Type = SHARED HC	USE, No of Units	= 1, Occupano	cy = 7, No of Sto	oreys = 4	
Number of Booms	Total Norm	when of Deem	- 0		
Number of Rooms	i otai Nun	nber of Room			
a) Sleeping 7		b) Living Roo	oms 1		
Number of Self Contained F	lats:	0	Number of N	on Self Cont. Flats:	0
Shared Amenities	Number	Description			
a) Kitchen	2				
b) Bathrooms/Showers	2				
c) W.C.s	3				
Licence Details					
Commencement date:	15/05/20	17	Duration of	flicence:	14/03/2022
Maximum number of persor	o or households	normitted to	occupy UMO u	ndor conditions of l	ioonoo
waxiiiuiii iiuiiibei oi persoi	is or nousenous	permitted to	occupy nivio u	inder conditions of i	icerice.
Households 7	Persons	7			
Information referred to a	residential prop	perty tribuna	ıl or Lands Tr	ibunal:	
None					
Decision of Tribunal			Refe	rence number	
Summary of conditions of li HMO - Elec Mandatory conds		datory conds. F	HMO - Furniture	Mandatory conds. HI	MO - Gas

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/01003/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

135 Westbourne Street Hove BN3 5FB

Ward

Westbourne

Name & Address of Licenc	e Holder	
Investsave Ltd, 176 Church Roa	d Hove BN3 2DJ	
Name & Address of Person	Managing	
My Lets Ltd, Amelia House Cres	cent Road Worthing BN11 1QR	
Property Description		
Short description of licensed	HMO (No of storeys, etc)	
Property Type = BEDSIT, No of	Units = 6, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping	b) Living Rooms	
		_
Number of Self Contained Flat	Number of Non Self Cont. Flats:	0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description  1 2 2	
Licence Details		
Commencement date:	19/06/2017 Duration of licence:	06/11/2021
Maximum number of persons	or households permitted to occupy HMO under conditions of I	iconco:
Maximum number of persons	or nouseholds permitted to occupy Himo under conditions or i	icerice.
Households 6	Persons 6	
Information referred to a re	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lice		MO Coo



#### Licence No.

#### 2017/01005/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

17 Madehurst Close Brighton BN2 0YR

		ward	East Brig	gnton
Name & Address of Licence	Holder			
Mr Neil Baker, Sewells Farm Gate	House Birdhole Lane	Barcombe East Susse:	x BN8 5FH	
Name & Address of Person				
01 Property Letting Limited, 50 St	James's Street Brighto	on BN2 1QG		
Property Description				
Short description of licensed H	MO (No of storeys, et	c)		
Property Type = Not Assigned, No	o of Units = 1, Occupar	ncy = 5, No of Storeys =	= 3	
Number of Rooms	Total Number of F	Rooms 6		
a) Sleeping 5	b) Livir	g Rooms 1		
Number of Self Contained Flats	: 0	Number of Nor	n Self Cont. Flats:	0
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description 1 2 2 2	ption		
Licence Details				
Commencement date:	13/06/2017	Duration of I	icence:	30/08/2020
Maximum number of persons o	r households permitt	ed to occupy HMO un	der conditions of li	cence:
Households 5 P	ersons 5			
Information referred to a res	idential property tri	bunal or Lands Trib	ounal:	
None				
Decision of Tribunal		Refere	nce number	
Summary of conditions of licen HMO - Elec Mandatory conds, HM		nds, HMO - Furniture N	∕landatory conds, HN	ЛО - Gas

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/01009/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

14 Caledonian Road Brighton BN2 3HX

Ward

St. Peter's And North Laine

Name & Address of Licence	Holder		
		d DNE OTD	
Mr Mark Rayward, Blackstone Gr	апуе віаскуюте пеппеі	ם פו אינס טום ט אום ט	
Name & Address of Person	Managing		
G4 Lets, 2 Hythe Road Brighton B			
G4 Lets, 2 Hythe Road Brighton t	DIN 1 033		
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS			
Troporty Typo Structor Tropo	_, 110 01 01 mc	, , , , , , , , , , , , , , , , , , , ,	
Number of Rooms	Total Number of Ro	ooms 7	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Flats	<b>:</b> 0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities	Number Descript	ion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Linna Batalla			
Licence Details			
Commencement date:	16/05/2017	Duration of licence:	03/10/2020
Maximum number of persons of	r households permitted	to occupy HMO under conditions	of licence:
Households 7 P	ersons 7		
Information referred to a res	idential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

#### Summary of conditions of licence

Basement Hallway and Front Bedroom, Fire locks, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - General 1, HMO - General 6, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Kitchen, Self closers



#### Licence No.

#### 2017/01058/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

42 Lower Bevendean Avenue Brighton BN2 4FE

Ward

Moulsecoomb And Bevendean

Name & Address of Licence		
Mr Colin Woodcock, 3 Woodland	Drive Hove BN3 6DH	
Name & Address of Person	Managing	
,		
Property Description		
Short description of licensed I	IMO (No of storous etc)	
•	• • •	
Property Type = SHARED HOUS	SE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping 6	b) Living Rooms 1	
	, <b>3</b>	
Number of Self Contained Flat	s: 0 Number of Non Self Cont.	Flats: 1
rumbor or oon contamour lat		1
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Commencement date:	05/05/2017 Duration of licence:	03/07/2021
Maximum number of persons	or households permitted to occupy HMO under condition	ons of licence:
Households 6 F	Persons 6	
Information referred to a re	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	·
Summary of conditions of lice	nce	
	MO - Fire Mandatory conds, HMO - Furniture Mandatory co	nds, HMO - Gas



#### Licence No.

#### 2017/01062/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

3 Norfolk Square Brighton BN1 2PB

Ward

Brunswick And Adelaide

ame & Address of Licen	ce Holder		
r Bill Robertson, Flat 14 65 T	he Drive Hove BN3 3PF		
ame & Address of Perso	n Managing		
roperty Description			
ort description of licensed	I HMO (No of storeys, etc	:)	
operty Type = BEDSIT, No o	of Units = 8, Occupancy = 1	13, No of Storeys = 5	
umber of Rooms	Total Number of R	ooms 10	
Sleeping ###		g Rooms ###	
olecping """	ט) בויווין	g Rooms	
ımber of Self Contained Fl	ats: 2	Number of Non Self Cont. Fl	ats: 6
imber of Self Contained Fi	ats. Z	Number of Non Sen Cont. Fi	ais.
nared Amenities	Number Descrip	tion	
Kitchen	8		
Bathrooms/Showers	4		
W.C.s	5		
cence Details			
cence Details			
ommencement date:	04/09/2017	Duration of licence:	09/02/2022
	h h - l - l	d 4	f li
aximum number of person	s or nousenoids permitte	d to occupy HMO under condition	s of licence:
ouseholds 13	Persons 13		
	esidential property tril	bunal or Lands Tribunal:	
one			
ecision of Tribunal		Reference number	
ummary of conditions of lid MO - Elec Mandatory conds,		nds, HMO - Furniture Mandatory con	ds, HMO -



#### Licence No.

#### 2017/01071/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

71 Riley Road Brighton BN2 4AG

Ward

Moulsecoomb And Bevendean

Name & Address of Licen	ce Holder	
Ms Michelle Woodman, 44 Po	rtland Road Hove BN3 5DL	
Name & Address of Perso	on Managing	
John Hiltons Ltd, 100 Church	Street Brighton BN1 1UJ	
Property Description		
Short description of license	d HMO (No of storeys, etc)	
Property Type = SHARED HO	USE, No of Units = 1, Occupancy = 6, No of Storeys = 4	
Name to the second	Total Number of Booms 7	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping 6	b) Living Rooms 1	
		1
Number of Self Contained F	lats: 0 Number of Non Self Cont. F	lats: 0
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers c) W.C.s	3	
0) **.0.3		
Licence Details		
0	47/05/0047 Punting of lines and	44/04/0000
Commencement date:	17/05/2017 Duration of licence:	11/04/2022
Maximum number of person	s or households permitted to occupy HMO under condition	ns of licence:
Households 6	Persons 6	
Tiouscrioius 0	0	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of li	cence	
	, HMO - Fire Mandatory conds, HMO - Furniture Mandatory con	ids, HMO - Gas



#### Licence No.

#### 2017/01082/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

28 Medmerry Hill Brighton BN2 4TQ

Ward

Moulsecoomb And Bevendean

Name & Address of Lice	nce Holder	
Mr Paul Cousins, Flat 2 8 Chi	chester Terrace Brighton BN2 1FG	
Name & Address of Pers	on Managing	
MTM Property Services Ltd, U	Jrsa Court 108 Lewes Road Brighton BN2 4AE	
Property Description		
Short description of license	d HMO (No of storeys, etc)	
Property Type = SHARED HC	DUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 5	b) Living Rooms 1	
a) Sieeping	b) Living Rooms	
Normalian of Oalf Oantains of E	Newshar of New Oals Coast Flate.	4
Number of Self Contained F	Number of Non Self Cont. Flats:	1
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description  1 2 2	
Licence Details		
Commencement date:	18/04/2017 Duration of licence:	01/04/2022
Maximum number of person	ns or households permitted to occupy HMO under conditions of li	icence:
Households 5	Persons 5	
Households 5	Persons 5	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of li Fire Alarm, HMO - Elec Mand	icence atory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandator	ry conds,



#### Licence No.

#### 2017/01084/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

8A Western Road Hove BN3 1AE

Ward

Brunswick And Adelaide

Information referred to a re None Decision of Tribunal	Reference number	
	esidential property tribunal or Lands Tribunal:	
Households 6	Persons 6	
Maximum number of persons	or households permitted to occupy HMO under conditions o	f licence:
Commencement date:	21/06/2017 Duration of licence:	20/11/2021
Licence Details		
c) W.C.s	2	
b) Bathrooms/Showers	2	
a) Kitchen	2	
Shared Amenities	Number Description	
Number of Self Contained Fla	Number of Non Self Cont. Flats	: 0
a, clooping	b) Living Rooms	
Number of Rooms a) Sleeping  6	Total Number of Rooms 6  b) Living Rooms 1	
Number of Dooms	Total Number of Booms C	
Property Type = SHARED HOU	JSE, No of Units = 1, Occupancy = 6, No of Storeys = 5	
Short description of licensed	HMO (No of storeys, etc)	
Property Description		
,		
Name & Address of Person	n wanaging	
Nama & Addraga of Bares	n Managing	
Steven Green, Intolet UK Ltd 26	6B Station Parade Cockfosters Road Barnet EN4 0DW	
Name & Address of Licence	ce Holder	

General 1, HMO - General 6, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Heating, Heating to lounge, Intumescent strip, Kitchen



#### Licence No.

#### 2017/01117/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 5 Isfield Road Brighton BN1 7FE

Ward

Hollingdean And Stanmer

Name & Address of Licence	Holder		
Ms P Jangra, Cookham P O Lowe	r Road Cookham S	L6 9EH	
Name & Address of Person I	Managing		
,			
Property Description			
Property Description  Short description of licensed HI	MO (No of storays	etc)	
Property Type = SHARED HOUSI		·	
Floperty Type - SHARED HOUSE	_, NO 01 01111S = 1, C	occupancy – 3, No or Storeys – 3	
Number of Rooms	Total Number of	of Rooms 6	
a) Sleeping 5	b) Li	iving Rooms 1	
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flats	s: 1
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s	Description of the control of the co	cription	
Licence Details			
Commencement date:	08/05/2017	Duration of licence:	21/03/2022
Maximum number of persons o	r households perm	nitted to occupy HMO under conditions o	of licence:
Households 5 Pe	ersons 5		
Information referred to a res	idential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licen		conde HMO Eurniture Mandatory conde	HMO Gas



#### Licence No.

#### 2017/01179/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 67A North Road Brighton BN1 1YD

Ward

St. Peter's And North Laine

Name & Address of Licenc	e Holder		
Mr Gary Marshall, 10 Longhill R	oad Brighton BN2 7BE		
Name & Address of Persor	Managing		
Kim Faulkner, 67A North Road I	3righton BN1 1YD		
Property Description			
Short description of licensed	HMO (No of storeys, e	tc)	
Property Type = SHARED HOU	SE, No of Units = 1, Oc	cupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 6	
a) Sleeping 5	b) Livi	ng Rooms 1	
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number Descr	iption	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	2		
Licence Details			
0	20/05/0047	Duration of Kanana	40/00/0000
Commencement date:	30/05/2017	Duration of licence:	16/03/2022
Maximum number of persons	or households permit	ted to occupy HMO under conditions of	licence:
Households 5	Persons 5		
nousellolus	Persons 5		
Information referred to a re	sidential property to	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	HMO - Fire Mandatory co	onds, HMO - Furniture Mandatory conds, H	

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -Repairs Electrics 4, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/01189/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

23 Egremont Place Brighton BN2 0GA

Ward

Queen's Park

Name & Address of Licen	ce Holder		
01 Property Investment Ltd, 30	0-31 Devonshire Place Brighton	n BN2 1QB	
Name & Address of Perso	on Managing		
Ms Ronnette Lucraft, 33 Orien	tal Place Brighton BN1 2LL		
<b>5</b>			
Property Description			
Short description of license	,		
Property Type = BEDSIT, No o	of Units = 8, Occupancy = 8, N	o of Storeys = 4	
Number of Rooms	Total Number of Roor	ms 8	
a) Sleeping 8	b) Living Ro	ooms 8	
,	,		
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number Description	1	
a) Kitchen	8		
b) Bathrooms/Showers	4		
c) W.C.s	5		
Licence Details			
Commencement date:	13/07/2017	<b>Duration of licence:</b>	02/04/2022
Maximum number of person	s or households permitted to	o occupy HMO under conditions	of licence:
Hawa ah alda 0	Dorono 0		
Households 8	Persons 8		
Information referred to a	residential property tribur	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	m, HMO - Elec Mandatory con HMO - Fire Mandatory conds, I	ds, HMO - Fire Alarm Systems 4, HMO - Furniture Mandatory conds,	

Fire - Under Stairs 1, Fire Alarm, HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 4, HMO - Fire Blanket, HMO - Fire Doors 8, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Licensing Loft Insulation, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Management/Repairs



#### Licence No.

#### 2017/01209/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

99 Brading Road Brighton BN2 3PE

Ward

Hanover And Elm Grove

Name & Address of Licence Holder
Mr & Mrs Jeremy & Emma Barrett, Rushett House Rushett Lane Norton Faversham Kent ME13 0SG
Name & Address of Person Managing
G4 Lets, 2 Hythe Road Brighton BN1 6JS
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 7, No of Storeys = 3
Number of Rooms Total Number of Rooms 8
a) Sleeping b) Living Rooms 1
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
Shared Amenities Number Description
a) Kitchen 2
b) Bathrooms/Showers 2
c) W.C.s
Licence Details
Commencement date: 09/06/2017 Duration of licence: 21/02/2022
Datation of notice.
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Households 7 Persons 7
rersons /
Information referred to a residential property tribunal or Lands Tribunal:
None
Decision of Tribunal Reference number
Summary of conditions of licence



#### Licence No.

#### 2017/01216/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

20 Argyle Road Brighton BN1 4QA

Ward

Preston Park

Name & Address of Licence	Holder	
Mr Dino Morra, 1 Western Esplan	ade Portslade BN41 1WE	
Name & Address of Person	Managing	
Ms Shelley Hollis, The Old Wareh	nouse 2 Ashford Road Brighton BN1 6LJ	
Property Description		
Short description of licensed H	MO (No of storeys, etc)	
Property Type = SHARED HOUS	E, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping 6	b) Living Rooms 1	
Number of Self Contained Flats	Number of Non Self Cont. Flats	: 0
	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	6	
c) W.C.s	0	
Licence Details		
Commencement date:	13/06/2017 Duration of licence:	20/03/2022
Maximum number of persons of	or households permitted to occupy HMO under conditions o	f licence:
Households 6 P	ersons 6	
Information referred to a res	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licer		HMO Gas



#### Licence No.

#### 2017/01251/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 2 Inverness Road Brighton BN2 3JB

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
Mrs Jo Bunday, 15 - 17 Middle	Street Brighton BN1 1AL		
Name & Address of Perso	n Managing		
Mr Dan Lyons, T/a Brighton Ad	ccommodation Agency 74 Lewe	es Road Brighton BN2 3HZ	
Property Description			
Short description of license	d HMO (No of storeys, etc)		
Property Type = SHARED HO	USE, No of Units = 1, Occupar	ncy = 6, No of Storeys = 4	
Number of Rooms	Total Number of Roon	ns 6	
a) Sleeping 6	b) Living Ro	ooms 1	
		7	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number Description	1	
a) Kitchen	2 2		
b) Bathrooms/Showers c) W.C.s	2		
,			
Licence Details			
Commencement date:	04/09/2017	Duration of licence:	06/10/2021
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
Households 6 Persons 6			
Information referred to a residential property tribunal or Lands Tribunal:			
None	residential property tribuil	ar or Earlas Tribanai.	
Decision of Tribunal		Reference number	
Summary of conditions of licence Doors, FI notice, Fire doors, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture			
		perty Chges Mandatory conds, HM	

Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, IS, Kitchen facilities, Management, management



#### Licence No.

#### 2017/01270/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

17 Islingword Place Brighton BN2 9XG

Ward

Hanover And Elm Grove

Nama 9 Adduses of Linear He	Idou	
Name & Address of Licence Ho		
Mr Peppy Conrad, 82 Manor Road Ha	astings 1N34 3LP	
Name & Address of Person Mar	naging	
Name & Address of Ferson Mar	iaging	
Property Description		
Short description of licensed HMO	(No of storevs, etc)	
•	No of Units = 1, Occupancy = 6, No of Storeys = 4	
Toporty Type – Office Edition 1	to or onits – 1, occupancy – 6, no or otoreys – 4	
Number of Rooms	Total Number of Rooms 3	
a) Sleeping <b>6</b>	b) Living Rooms 1	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	1
Shared Amenities Num	nber Description	
a) Kitchen 1		
b) Bathrooms/Showers 2		
c) W.C.s	2	
Licence Details		
Electrice Betails		
Commencement date:	18/10/2017 Duration of licence:	29/04/2022
waximum number of persons or no	ouseholds permitted to occupy HMO under conditions of li	icence:
Households 6 Perso	ons 6	
Information referred to a reside	ential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence		
	- Fire Mandatory conds HMO - Furniture Mandatory conds HM	MO - Gas



#### Licence No.

#### 2017/01273/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

162 Queens Park Road Brighton BN2 0GG

Ward

Queen's Park

Name & Address of Licen	ce Holder		
Mr Peppy Conrad, 82 Manor F	Road Hastings TN34 3LP		
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of licensed	d HMO (No of storeys, et	c)	
Property Type = SHARED HO	USE. No of Units = 9. Occ	cupancy = 9, No of Storeys = 4	
Number of Rooms	Total Number of I	Rooms 9	
a) Sleeping 9	b) Livir	ng Rooms 1	
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Flats	s: 1
Number of Jen Johnamed 11	dis.	Number of Non-Sen Sont. Flats	1
Charad Amonitics	Number Deseri	ntion	
Shared Amenities a) Kitchen	Number Descri	ption	
b) Bathrooms/Showers	3		
c) W.C.s	2		
,			
Licence Details			
Commencement date:	07/09/2017	Duration of licence:	29/04/2022
Marris		- d 4	- f !!
Maximum number of person	s or nousenoids permitt	ed to occupy HMO under conditions of	of licence:
Households 9	Persons 9		
Information referred to a	residential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	, HMO - Fire Mandatory co	onds, HMO - Furniture Mandatory conds,	



#### Licence No.

#### 2017/01279/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

164 Queens Park Road Brighton BN2 0GG

Ward

Queen's Park

Name & Address of Licence	Holder	
Mr Peppy Conrad, 82 Manor Roa		
,		
Name & Address of Person	Managing	
,		
Property Description		
Short description of licensed F		
Property Type = SHARED HOUS	SE, No of Units = 1, Occupancy = 8, No of Storeys = 4	
Number of Rooms	Total Number of Rooms 8	
a) Sleeping 8	b) Living Rooms 1	
, , ,	, 6	
Number of Self Contained Flats	S: 0 Number of Non Self Cont. Flats:	1
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Commencement date:	18/10/2017 Duration of licence:	29/04/2022
Maximum number of persons of	or households permitted to occupy HMO under conditions of li	cence:
Households 8 P	ersons 8	
Information referred to a res	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licer	nce MO - Fire Mandatory conds HMO - Furniture Mandatory conds HM	10 - Gas



#### Licence No.

#### 2017/01334/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

163 Upper Lewes Road Brighton BN2 3FB

Ward

St. Peter's And North Laine

Name & Address of Licence Holder			
The Albert Darwish Will Trust, C/o Mr Daniel Darwish 121 Woodville Road Barnet EN5 5NS			
Name & Address of Person Managing			
Pavilion Properties Limited, 128-129 Lewes Road Brighton BN2 3LG			
Property Description			
Short description of licensed HMO (No of storeys, etc)			
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3			
Number of Rooms Total Number of Rooms 6			
a) Sleeping b) Living Rooms 1			
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1			
Shared Amenities Number Description			
a) Kitchen 1			
b) Bathrooms/Showers 1 2			
Z			
Licence Details			
00/05/0047			
Commencement date: 09/05/2017 Duration of licence: 04/06/2021			
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
Households 5 Persons 5			
Information referred to a residential property tribunal or Lands Tribunal:			
None			
Decision of Tribunal Reference number			
Summary of conditions of licence HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas			



#### Licence No.

#### 2017/01337/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

1 St Martins Place Brighton BN2 3LE

Ward

Hanover And Elm Grove

Name & Address of Licen	oco Holdor		
Mr Alfred Haagman, Meadowb		treet Cuckfield RH17.5 LI	
This range is a second of the	JOOK Floude Brook Of	neet oudmied 11117 500	
Name & Address of Perso	on Managing		
Pavilion Properties Ltd, 128-12	29 Lewes Road Brigh	ton BN1 3LG	
Property Description			
Short description of license	d HMO (No of storey	vs, etc)	
Property Type = SHARED HO	USE, No of Units = 1	, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Numbe	r of Rooms 6	
a) Sleeping 5		Living Rooms	
a) Sieeping	0)	Living Rooms	
Number of Self Contained Fl	late	Number of Non Self Cont. Flat	s: 1
Number of Sen Contained Fi	iats.	Number of Non Sen Cont. Flat	s
Shared Amenities	Number De	escription	
a) Kitchen	1	·	
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	31/08/2017	Duration of licence:	28/02/2022
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
Households 5	Persons 5		
Information referred to a	residential proper	ty tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie HMO - Elec Mandatory conds,		ory conds, HMO - Furniture Mandatory conds	, HMO - Gas



#### Licence No.

#### 2017/01340/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

13 Newmarket Road Brighton BN2 3QG

Ward

Hanover And Elm Grove

Name & Address of Licence Holder				
Mr Alfred Haagman, Meadowb	orook House Brook S	Street Cuckfield RH17 5JJ		
Name & Address of Perso	on Managing			
Pavilion Properties Ltd, 128-12	29 Lewes Road Brigh	nton BN2 3LG		
Property Description				
Short description of license	d HMO (No of store	ys, etc)		
Property Type = SHARED HO	USE, No of Units = 1	1, Occupancy = 5, No of Storeys = 3		
Number of Rooms	Total Number	er of Rooms 6		
a) Sleeping 5	b	) Living Rooms 1		
Number of Self Contained F	lats:	0 Number of Non Self Cont. Flats:	1	
Shared Amenities	Number D	escription		
a) Kitchen	1			
b) Bathrooms/Showers	2			
c) W.C.s				
Licence Details				
Commencement date:	31/08/2017	Duration of licence:	05/09/2021	
Maximum number of person	e or households ne	ermitted to occupy HMO under conditions of I	icence:	
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
Households 5	Persons 5	5		
	residential propei	rty tribunal or Lands Tribunal:		
None				
Decision of Tribunal		Reference number		
Summary of conditions of licence Fire Safety, Fire safety, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture				

Fire Safety, Fire safety, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Disrepair, Management/Repairs, Management/repairs, management/repairs



### Licence No.

#### 2017/01384/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

7 Dyke Road	
Brighton	
BN1 3JA	

Ward

Regency

Name & Address of Licence Holder				
HAI Ltd, PO Box 910555 Al Webdih Amman Jordan				
Name O Address of Danson Managine.				
Name & Address of Person Managing				
Spark Sons, 45 Western Road Hove BN3 1JD				
Property Description				
Short description of licensed HMO (No of storeys, etc)				
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 8, No of Storeys = 5				
Number of Rooms Total Number of Rooms 10				
a) Sleeping b) Living Rooms 1				
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1				
Shared Amenities Number Description				
a) Kitchen 2				
b) Bathrooms/Showers 3				
c) W.C.s				
Licence Details				
Commencement date: 31/05/2017 Duration of licence: 29/03/2022				
25/30/2322				
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
Households 8 Persons 8				
Information referred to a regidential property tribunal or Landa Tribunal				
Information referred to a residential property tribunal or Lands Tribunal:  None				
Decision of Tribunal Reference number				
Summary of conditions of licence Fire Alarm, HMO - Elec Mandatory conds, HMO - Fire Doors 10, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Bathroom 17, HMO - Repairs Electrics 4, HMO - Repairs Floors 1, HMO - Repairs Kitchen 5, HMO - Repairs Stairs 5, HMO - Repairs Ventilation 3, HMO - Repairs Windows 3, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds,				

Management / Repairs, Other fire works





#### Licence No.

#### 2017/01394/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

68 Hartington Road Brighton BN2 3PB

Ward

Hanover And Elm Grove

Name & Address of Licence Holder				
Ms Sarah Teasdale, 206 New C	hurch Road Hove BN3 4EA			
Name & Address of Person	Managing			
Pavilion Properties Ltd, 39 Sack	ville Road Hove BN3 3WD			
Property Description				
Short description of licensed	HMO (No of storeys, etc)			
Property Type = SHARED HOUS	SE, No of Units = 1, Occupancy = 6, No of Storeys = 3			
Nb	Total Number of Danies 7			
Number of Rooms	Total Number of Rooms 7			
a) Sleeping 6	b) Living Rooms 2			
Number of Self Contained Flat	S: 0 Number of Non Self Cont. Flats:	1		
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s	Number Description  1 2 2			
Licence Details				
Commencement date:	07/09/2017 Duration of licence:	07/03/2022		
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
Harrachalda Damarra D				
Households 6	Persons 6			
Information referred to a re	sidential property tribunal or Lands Tribunal:			
None				
Decision of Tribunal	Reference number			
Summary of conditions of lice HMO - Elec Mandatory conds, H	nce IMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HM	1O - Gas		



#### Licence No.

#### 2017/01420/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 202 Preston Road Brighton BN1 6RA

Ward

Withdean

ame & Address of Licen	ce Holder		
enwell Properties Ltd, PO B	ox 2328 Hove BN3 6RT		
me & Address of Perso	on Managing		
operty Description			
ort description of license	d HMO (No of storeys, etc	<b>;</b> )	
perty Type = SHARED HO	USE, No of Units = 12, Oc	cupancy = 12, No of Storeys = 3	3
mber of Rooms	Total Number of R	Rooms 12	
Sleeping 12	b) Livin	g Rooms	
mber of Self Contained F	lats: 0	Number of Non Self Co	nt. Flats: 0
ared Amenities	Number Descrip	otion	
Kitchen	12		
Bathrooms/Showers	11		
V.C.s	11		
ence Details			
mmencement date:	01/11/2017	Duration of licence:	01/08/2020
ximum number of person	s or households permitte	ed to occupy HMO under cond	litions of licence:
useholds 12	Persons 12		
12	12		
ormation referred to a	residential property tri	bunal or Lands Tribunal:	
ne			
cision of Tribunal		Reference num	iber
mmary of conditions of lide 10 - Elec Mandatory conds,		nds, HMO - Furniture Mandatory	/ conds, HMO - Gas

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/01441/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

57 West Street Brighton BN1 2RA

Ward

Regency

	Walu	regency	
Name & Address of Licence F	lolder		
The Indigo Pub Company Limited,	Tower House Lucy Tower Street Lincoln	LN1 1XW	
Name & Address of Person M			
Dan Lyons Trading As Brighton Acc	commodation Agency, 74 Lewes Road E	3righton East Sussex BN2 3HZ	
Property Description			
Short description of licensed HM	O (No of storeys, etc)		
Property Type = SHARED HOUSE	, No of Units = 1, Occupancy = 9, No of	Storeys = 4	
Number of Rooms	Total Number of Rooms 10		
a) Sleeping 9	b) Living Rooms 1	_	
Number of Self Contained Flats:	0 Number of	Non Self Cont. Flats: 1	
Shared Amenities Nu	umber Description		
b) Bathrooms/Showers	3		
c) W.C.s	3		
·			
Licence Details			
Commencement date:	18/12/2017 <b>Duration</b>	of licence: 05/04/2022	
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
Households 9 Per	rsons 9		
Information referred to a resid	dential property tribunal or Lands	Tribunal:	
None	ionnal proporty tribunal of Eurido		
Decision of Tribunal	Re	eference number	
<b>Summary of conditions of licence</b> Fire Alarms, HMO - Elec Mandatory	<b>e</b> y conds, HMO - Fire Mandatory conds, F	HMO - Furniture Mandatory conds,	



#### Licence No.

#### 2017/01525/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

1 Argyle Villas Brighton BN1 4QT

Ward

Preston Park

Name & Address of Licence Holder
Miss Danielle Harmer-Strange, Tudor Grange 13 The Upper Drive Hove East Sussex BN3 6GR
Name & Address of Person Managing
Mr & Mrs Linda & Steve Harmer-Strange, Tudor Grange 13 The Upper Drive Hove East Sussex BN3 6GR
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 6, Occupancy = 6, No of Storeys = 4
Number of Rooms Total Number of Rooms 7
a) Sleeping b) Living Rooms 1
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1
Shared Amenities Number Description
a) Kitchen 2
b) Bathrooms/Showers 2
c) W.C.s
Licence Details
Commencement date: 05/07/2017 Duration of licence: 06/04/2022
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Households 6 Persons 6
Information referred to a residential property tribunal or Lands Tribunal:
None Defended to the second of
Decision of Tribunal Reference number
Summary of conditions of licence Electrical works, HMO - Elec Mandatory conds, HMO - Furniture Mandatory



#### Licence No.

#### 2017/01528/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

1 East Court 222 Portland Road Hove BN3 5QT

Ward

Westbourne

Name & Address of Licen	ce Holder		
Mr Ashley Bennett, 30 Windmi	II Drive Brighton BN1 5H	G	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	d HMO (No of storeys, e	etc)	
Property Type = SHARED HO	USE, No of Units = 1, Oc	ccupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 6	
a) Sleeping 5	b) Liv	ing Rooms 1	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Flat	s: 0
Shared Amenities	Number Descr	ription	
a) Kitchen	1		
b) Bathrooms/Showers	5		
c) W.C.s	6		
Licence Details			
Commencement date:	18/07/2017	Duration of licence:	10/04/2022
Commencement date.	10/01/2011	Buration of licence.	10/04/2022
Maximum number of person	s or households permit	tted to occupy HMO under conditions	of licence:
Households 5	Persons 5	7	
Households 5	Persons 5	J	
Information referred to a	residential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie	cence	undatani anda IINAO Filmitus Mandat	

General, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/01551/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

41 Tidy Street Brighton BN1 4EL

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
Mr & Mrs M & C M Horsfield, 9	Clifton Hill Brighton BN	1 3HQ	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys,	etc)	
Property Type = SHARED HO	USE, No of Units = 1, O	ccupancy = 5, No of Storeys = 4	
Number of Rooms	Total Number o		
a) Sleeping 5	b) Liv	ving Rooms 1	
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. FI	ats: 1
Shared Amenities	Number Desc	ription	
a) Kitchen	1		
b) Bathrooms/Showers c) W.C.s	2 2		
C) VV.C.S			
Licence Details			
Commencement date:	16/06/2017	Duration of licence:	26/06/2021
Maximum number of person	s or households permi	itted to occupy HMO under condition	s of licence:
		¬	
Households 5	Persons 5		
wfo wwo of: o w wo fo wwo old to	vanisla vatini va va va vatav	tuibunal au Landa Tuibunal	
	residential property	tribunal or Lands Tribunal:	
None		Defense es servicio	
Decision of Tribunal		Reference number	
Summary of conditions of lie	cence	Circ Mondoton, canda LIMO Sumit	ura Mandatar :
nivio - Elec iviandatory conds,	HIVIO - FILE LOCKS, HIVIO	D - Fire Mandatory conds, HMO - Furniti	are manuatory

conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/01554/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

14 Islingword Place Brighton BN2 9XH

Ward

Hanover And Elm Grove

Name & Address of Licer	nce Holder		
/Ir & Mrs M & C M Horsfield,	9 Clifton Hill Brighton E	BN1 3HQ	
lame & Address of Person	on Managing		
Property Description			
hort description of license	d HMO (No of storey	s etc)	
-	,	Occupancy = 5, No of Storeys = 4	
Toperty Type - STIANLED TIC	703L, NO 01 011113 - 1,	Occupancy = 3, No or Storeys = 4	
lumber of Rooms	Total Number	of Rooms 5	
) Sleeping 5	b)	Living Rooms 1	
lumber of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number De	scription	
) Kitchen	1		
) Bathrooms/Showers	2		
) W.C.s	2		
icence Details			
commencement date:	16/06/2017	Duration of licence:	26/06/2021
laximum number of persor	ns or households per	mitted to occupy HMO under conditions	of licence:
_	•		
louseholds 5	Persons 5		
oformation referred to a	residential propert	y tribunal or Lands Tribunal:	
one	residential propert	y tribunar or Lands Tribunar.	
ecision of Tribunal		Reference number	
		TOTOLOG HUMBOI	
	, HMO - Fire Doors 8,	HMO - Fire Locks, HMO - Fire Mandatory c	

HMO - Elec Mandatory conds, HMO - Fire Doors 8, HMO - Fire Locks, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Windows 6, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/01556/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

7 Pevensey Road Brighton BN2 3AG

Ward

Hanover And Elm Grove

Name & Address of Licer	nce Holder		
Mr & Mrs M & C M Horsfield, 9	9 Clifton Hill Brighton BN1	3HQ	
Name & Address of Person	on Managing		
1			
Property Description			
Short description of license	d HMO (No of storeys, et	c)	
Property Type = SHARED HC	OUSE, No of Units = 1, Occ	upancy = 5, No of Storeys = 3	
N	T. (.) N		
Number of Rooms	Total Number of F		
a) Sleeping 6	b) Livin	g Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats	: 1
Shared Amenities	Number Descrip	otion	
a) Kitchen b) Bathrooms/Showers	1		
c) W.C.s	2 2		
9, 111313			
Licence Details			
	10/00/00/5		
Commencement date:	16/06/2017	Duration of licence:	26/06/2021
Maximum number of persor	s or households permitte	ed to occupy HMO under conditions o	f licence:
	_		
Households 5	Persons 5		
Information referred to a	residential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li		O - Fire Doors 2, HMO - Fire Locks, HMC	) - Fire

Fire - Under Stairs 1, HMO - Elec Mandatory conds, HMO - Fire Doors 2, HMO - Fire Locks, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/01565/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

31 Sussex Terrace Brighton BN2 9QJ

Ward

Queen's Park

Name & Address of Licence	Holder		
Ms Caroline Cave, Park View Ch	urch Lane Ferring BN12 5HR		
Name & Address of Person			
Kendrick Property Services Ltd,	10-12 Lewes Road Brighton BN2 3HP		
Branarty Description			
Property Description  Short description of licensed F	IMO (No of storous sto)		
-	•		
Property Type = SHARED HOUS	SE, No of Units = 1, Occupancy = 5, No of	f Storeys = 3	
Number of Rooms	Total Number of Rooms 5		
a) Sleeping 5	b) Living Rooms	1	
	, <u> </u>		
Number of Self Contained Flat	s: 0 Number o	of Non Self Cont. Flats:	0
Shared Amenities	Number Description		
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	2		
Licence Details			
Commencement date:	29/11/2017 <b>Duratio</b>	n of licence:	15/04/2022
Maximum number of persons of	or households permitted to occupy HM	IO under conditions of I	icence:
Households 5 F	ersons 5		
Information referred to a res	sidential property tribunal or Lands	Tribunal:	
None			
Decision of Tribunal	R	eference number	
Summary of conditions of lice	nce	HMO Euroitura Mandat	·orv

Fire blanket, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/01580/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

75 The Drive Hove BN3 3PG

Ward

Goldsmid

		<u> </u>	
Name & Address of Lice	nce Holder		
	lat 8 Barrowfield Lodge Barrow	field Drive Hove BN3 6TQ	
Name & Address of Pers	on Managing		
Mr Andrew Keith Lees, 3 Cres	scent Drive North Woodingdean	BN2 6SP	
Property Description			
Short description of license	d HMO (No of storeys, etc)		
Property Type = SHARED HC	OUSE, No of Units = 9, Occupar	ncy = 18, No of Storeys = 5	
Number of Rooms	Total Number of Roon	ns 15	
a) Sleeping	b) Living Ro		
a) diceping	b) Living No	Joins	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats:	0
Number of Gen Gontained i	0	Number of Non Sen Sont. Fluts.	U
Shared Amenities	Number Description	1	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	04/12/2017	Duration of licence:	11/04/2022
	0 12.20		
Maximum number of persor	is or households permitted to	occupy HMO under conditions of	licence:
Households 18	Persons 18		
Information referred to a	residential property tribun	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	cence		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/01678/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

4 Upper Lewes Road Brighton BN2 3FJ

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder			
Mr & Mrs Denis & Libby Assas	si, Garden Flat 18	Narbonne Av	venue London SW4 9JS	
Name & Address of Perso	n Managing			
,				
Property Description				
Short description of licensed	d HMO (No of stor	eys, etc)		
Property Type = SHARED HO	USE, No of Units =	1, Occupano	cy = 6, No of Storeys = 3	
Number of Rooms	Total Num	ber of Room	s 6	
a) Sleeping 6		b) Living Roo	onis 1	
N			N I	
Number of Self Contained FI	ats:	0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number	Description		
a) Kitchen	1	Description		
b) Bathrooms/Showers	2			
c) W.C.s	2			
Licence Details				
Commencement date:	21/06/201	7	Duration of licence:	26/04/2022
Maximum number of person	s or households p	permitted to	occupy HMO under conditions of I	icence:
Households 6	Persons	6		
		<u> </u>		
Information referred to a	residential prop	erty tribuna	al or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of lic HMO - Elec Mandatory conds,		atory conds, I	HMO - Furniture Mandatory conds, HI	MO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Kitchen 1, HMO - Licensing Kitchen 6, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/01736/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

35 Argyle Road Brighton BN1 4QB

Ward

Preston Park

Name & Address of Licer	nce Holder	
Mr James Ford, The Mill Mill I	Lane Maidstone Road Kent TN12 8DB	
Name & Address of Pers	on Managing	
Mr Dan Lyons, Brighton Acco	mmodation Agency 74 Lewes Road Brighton BN2 3HZ	
Property Description		
Short description of license	ed HMO (No of storeys, etc)	
Property Type = SHARED HC	DUSE, No of Units = 1, Occupancy = 7, No of Storeys = 4	
Number of Rooms	Total Number of Rooms 8	
a) Sleeping 7	b) Living Rooms 1	
Number of Self Contained F	lats: 0 Number of Non Self Cont. Flats:	1
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers c) W.C.s	2 2	
c) vv.0.3		
Licence Details		
Commencement date:	04/09/2017 Duration of licence:	11/04/2022
Maximum number of persor	ns or households permitted to occupy HMO under conditions of I	icence:
	_	
Households 7	Persons 7	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Common of carallelance (C)		
Summary of conditions of li	icence	rniture

Gas, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Fire Notices 1, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Kitchen, Timescale, self closer



#### Licence No.

#### 2017/01739/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

9 Roedean Road Brighton BN2 5RA

Ward

Rottingdean Coastal

		770.0	<u> </u>
Name & Address of Licence	Holder		
Metrocity Consultants Ltd, 21 Co	mmerce Way Lancing W	est Sussex BN15 8TA	
Name & Address of Person	Managing		
Mr Dan Lyons, 74 Lewes Road B	righton BN2 3HZ		
D ( D ) (			
Property Description	IMO (No. of all and a state of a		
Short description of licensed F			
Property Type = SHARED HOUS	E, No of Units = 1, Occu	pancy = 6, No of Storeys =	3
Number of Rooms	Total Number of R	ooms 7	
a) Sleeping 6	b) Livinç	Rooms 1	
Number of Self Contained Flats	<b>s</b> : 0	Number of Non Self	Cont. Flats: 0
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s	Number Descrip  2 4 5	iion	
Licence Details			
Commencement date:	14/07/2017	Duration of licenc	e: 24/04/2022
Maximum number of persons of	or households permitte	d to occupy HMO under c	onditions of licence:
Households 6 P	ersons 6		
Information referred to a res	sidential property trik	unal or Lands Tribunal	:
None			
Decision of Tribunal		Reference n	umber
Summary of conditions of licer HMO - Elec Mandatory conds, HI		ds, HMO - Furniture Manda	tory conds, HMO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/01749/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

88 Clarendon Road Hove BN3 3WQ

		ward	Golds	mia
Name & Address of Lice	nce Holder			
Metrocity Consultants Ltd, 21	Commerce Way Lancing V	Vest Sussex BN15 8TA		
Name & Address of Pers				
Mr Dan Lyons, 74 Lewes Roa	d Brighton BN2 3HZ			
Property Description				
Short description of license	ed HMO (No of storeys, et	c)		
Property Type = SHARED HC	OUSE, No of Units = 1, Occ	supancy = 6, No of Store	ys = 4	
Number of Rooms	Total Number of F	Rooms 7		
a) Sleeping 6	b) Livir	ig Rooms 1		
Number of Self Contained F	Flats: 0	Number of Non	Self Cont. Flats:	0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description 3 3 3	ption		
icence Details				
Commencement date:	14/07/2017	Duration of lic	ence:	24/04/2022
Maximum number of persor	ns or households permitte	ed to occupy HMO und	er conditions of I	icence:
Households 6	Persons 6			
nformation referred to a	residential property tri	bunal or Lands Tribu	unal:	
lone				
Decision of Tribunal		Referen	ce number	
Summary of conditions of li	s, HMO - Fire Mandatory co			

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/01755/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

Abbey Hotel 14-19 Norfolk Terrace Brighton BN1 3AD

Ward

Regency

			-
Name & Address of Licer	nce Holder		
	Periworld Ltd, 167 Sou	th Lambeth Road London SW8 1XW	
Name & Address of Person	on Managing		
Mr David Delicata, 167 South	Lambeth Road London	sW8 1XW	
Property Description			
Short description of license	d HMO (No of storeys	s, etc)	
Property Type = BEDSIT, No	of Units = 103, Occupa	ncy = 103, No of Storeys = 6	
Number of Deems	Total November	of Booms 402	
Number of Rooms	Total Number		
a) Sleeping 103	b) L	Living Rooms 19	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats	:: 1
Shared Amenities		scription	
a) Kitchen     b) Bathrooms/Showers	103		
c) W.C.s	26		
Licence Details			
Commencement date:	24/11/2017	Duration of licence:	19/02/2022
Commencement date.	24/11/2017	Buration of ficence.	19/02/2022
Maximum number of persor	ıs or households perr	nitted to occupy HMO under conditions o	f licence:
Households 103	Persons 103		
100	100		
Information referred to a	residential property	/ tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	cence		
Additional facilities, HMO - Ele	ec Mandatory conds, H	MO - Fire Mandatory conds, HMO - Furniture y Chges Mandatory conds, HMO - Property	

Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/01827/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

20 Powis Road Brighton BN1 3HJ

Ward

Regency

			Train 100	cgcncy
Name & Address of Lice	nce Holder			
Mr Matthew Allen, Flat 1 35/3	6 Bedford Squa	are Brighton BN	1 2PL	
Name & Address of Pers				
Roger Kay, Ground Floor 87 (	Church Road H	ove BN3 2BB		
Property Description				
Short description of license	d HMO (No of	storeys, etc)		
Property Type = SHARED HC	OUSE, No of Ur	nits = 1, Occupar	ncy = 7, No of Storeys = 4	
Normalis on a f Danassa	T-4-11		7	
Number of Rooms	lotair	Number of Rooi	ms 7	
a) Sleeping 7		b) Living Ro	ooms	
Number of Self Contained F	lats:	0	Number of Non Self Cont. Fla	ats: 0
rambor or our contamour	iato.			
Shared Amenities	Number	Description	n	
a) Kitchen	2			
b) Bathrooms/Showers	2			
c) W.C.s	3			
Licence Details				
Commencement date:	09/08	3/2017	Duration of licence:	01/05/2022
Maximum number of nerses	as or bousebs	lde permitted to	o occupy HMO under conditions	of licenses
maximum number of persor	is of flousello		occupy nino under conditions	of licerice.
Households 7	Persons	7		
Information referred to a	residential p	roperty tribur	nal or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of li		landatory condo	HMO Eurniture Mandatory cond	le HMO Gae

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Steps etc 12, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/01834/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

20 Hartington Road Brighton BN2 3LS

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder —		
Mr Colin Woodcock, 3 Woodla		 6DH	
THE COMP PROCESSING OF TROCALS	a Biivo i lovo Biio (		
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license	d HMO (No of store)	ys, etc)	
Property Type = SHARED HO	USE, No of Units = 1	, Occupancy = 6, No of Storeys = 3	
Number of Dooms	Total Numbe	er of Rooms 7	
Number of Rooms			
a) Sleeping 6	b)	) Living Rooms 1	
Number of Self Contained F	lata.	Number of New Solf Court Flater	4
Number of Self Contained F	iats:	0 Number of Non Self Cont. Flats:	1
Shared Amenities	Number De	escription	
a) Kitchen	2	•	
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	17/08/2017	Duration of licence:	05/06/2021
Maximum number of person	s or households pe	ermitted to occupy HMO under conditions of	licence:
	_		
Households 6	Persons 6		
Information referred to a	residential proper	rty tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li HMO - Elec Mandatory conds,		, HMO - Fire Mandatory conds, HMO - Furniture	e

HMO - Elec Mandatory conds, HMO - Fire Doors 8, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Bathroom 4, HMO - Licensing Bedrooms, HMO - Licensing Loft Insulation, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/ Repairs



#### Licence No.

#### 2017/01843/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

67 Hanover Street Brighton **BN2 9SS** 

Ward

Hanover And Elm Grove

Name & Address of Licen	e Holder	
Dr Lucinda Ann Davies, 57 Gr	fton Road Worthing BN11 1QY	
Name & Address of Perso	n Managing	
Kendrick Property Services Ltd	10-12 Lewes Road Brighton BN2 3HP	
Property Description		
Short description of license	HMO (No of storeys, etc)	
Property Type = SHARED HO	ISE, No of Units = 1, Occupancy = 5, No of Storeys = 4	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 5	b) Living Rooms 1	
a) Sleeping	b) Living recents	
Number of Self Contained F	ts: 0 Number of Non Self Cont. Flats: 0	
Number of Sen Contained Fi	Number of Non Sen Cont. Flats.	
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	3	
c) W.C.s	4	
Licence Details		
Commencement date:	11/09/2017 <b>Duration of licence:</b> 14/05/2022	
Commencement date.	Daration of incerice.	
Maximum number of person	or households permitted to occupy HMO under conditions of licence:	
Households 5	Persons 5	
Tiouseriolus 5	0	
Information referred to a	esidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Furniture Mandatory conds, H	ence e locks, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - IO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - s, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory	

conds, Timescales



#### Licence No.

#### 2017/01895/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

3 Inverness Road Brighton BN2 3JB

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder			
Mr James Ford, The Mill Mill La	ane Maidstone Ke	nt TN12 8DB		
<u> </u>				
Name & Address of Perso	n Managing			
Mr Dan Lyons, Brighton Accon	nmodation Agency	74 Lewes Ro	oad Brighton BN2 3HZ	
Property Description				
Short description of licensed	HMO (No of sto	reys, etc)		
Property Type = SHARED HO	USE, No of Units =	= 1, Occupano	cy = 7, No of Storeys = 4	
		· ·		
Number of Rooms	Total Num	ber of Room	s 7	
a) Sleeping 7		b) Living Roo	oms 1	
Number of Self Contained Fl	ats:	0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number	Description		
a) Kitchen	2			
b) Bathrooms/Showers	2			
c) W.C.s	2			
Licence Details				
Licence Details				
Commencement date:	30/06/201	7	Duration of licence:	22/06/2022
Maximum number of persons	s or households	permitted to	occupy HMO under conditions of li	cence:
Households 7	Persons	7		
Information referred to a r	esidential prop	erty tribuna	l or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of lic HMO - Elec Mandatory conds,		atory conds, I	HMO - Furniture Mandatory conds, HM	ЛО - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/01915/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 48 Rushlake Road Brighton BN1 9AD

Ward

Hollingdean And Stanmer

,
Name & Address of Person Managing
Name & Address of Person Managing , Property Description
Name & Address of Person Managing , Property Description
Property Description
Property Description
Property Description
<b>a</b>
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3
Number of Rooms Total Number of Rooms 8
a) Sleeping 6 b) Living Rooms 1
b) Living recents
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1
Number of Self Contained Flats.
Shared Amenities Number Description
a) Kitchen 1
b) Bathrooms/Showers 2
c) W.C.s
Licence Details
Commencement date: 01/11/2017 Duration of licence: 17/06/2022
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Households 6 Persons 6
Information referred to a residential property tribunal or Lands Tribunal:
None
Decision of Tribunal Reference number
Summary of conditions of licence

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/01923/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

64 Barcombe Road Brighton BN1 9JR

Ward

Moulsecoomb And Bevendean

Name & Address of Licen	ce Holder		
Mr Richard Carr, 56 Downs Av	enue Old Town Easth	oourne BN20 8TW	
Name & Address of Perso	on Managing		
Property Description			
Short description of licensed	d HMO (No of storey	s, etc)	
Property Type = SHARED HO	USE, No of Units = 1,	, Occupancy = 7, No of Storeys = 3	
. , , , ,			
Number of Rooms	Total Number	r of Rooms 9	
a) Sleeping 7	b)	Living Rooms 1	
Number of Self Contained Fl	ats:	Number of Non Self Cont. Flats:	1
Shared Amenities	Number De	escription	
a) Kitchen	2	•	
o) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	01/06/2017	Duration of licence:	05/02/2022
Johnnon Comone dato.	01/00/2011		00/02/2022
Maximum number of person	s or households per	rmitted to occupy HMO under conditions of	licence:
Households 7	Persons 7		
lousellolus	reisons		
nformation referred to a	residential propert	ty tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lied HMO - Flec Mandatory conds.		ry conds, HMO - Fire Notices 1, HMO - Furnitu	ıre
		MO - Property Chaes Mandatory conds. HMO	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Fire Notices 1, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs



#### Licence No.

#### 2017/01965/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

8A Pool Valley Brighton BN1 1NJ

		Ward	Reger	псу
Name & Address of Licen	ce Holder			
Mrs Amanda Jayne Yazdian-T		cent Hove East Susse	x BN3 6BD	
·				
Name & Address of Perso	n Managing			
,				
Donate Description				
Property Description				
Short description of licensed				
Property Type = SHARED HO	USE, No of Units = 5, Occup	pancy = 5, No of Store	ys = 5	
Number of Rooms	Total Number of Ro	ooms 6		
a) Sleeping 5	b) Living	Rooms 1		
, , ,	, 3			
Number of Self Contained Fl	ats: 0	Number of Non	Self Cont. Flats:	1
				-
Shared Amenities	Number Descript	ion		
a) Kitchen	1			
b) Bathrooms/Showers	1			
c) W.C.s	2			
Licence Details				
Commencement date:	27/10/2017	Duration of li	cence:	04/05/2022
Maximum number of person	s or households permitted	I to occupy HMO und	ler conditions of li	icence:
		,		
Households 5	Persons 5			
Information referred to a	residential property trib	unal or Lands Trib	unal:	
None	Total property trib	ariar or Earlas IIIs	<u> </u>	
Decision of Tribunal		Referer	nce number	
Summary of conditions of lice HMO - Elec Mandatory conds,		ds, HMO - Furniture M	andatory conds. HI	MO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, additional facilities



#### Licence No.

#### 2017/01996/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

18 Beaconsfield Road Brighton BN1 4QH

Ward

St. Peter's And North Laine

Name & Address of Licen	ice Holder		
Mrs Joy Simmons, Pennant Po	ool Cottage St Veep Los	twithiel PL22 0PA	
Name & Address of Perso	on Managing		
Home Leasing Ltd, 64 Queens	Road Brighton BN1 3X	D	
Property Description			
Short description of license	d HMO (No of storeys,	etc)	
Property Type = SHARED HO	USE, No of Units = 6, O	ccupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number o	f Rooms 7	
a) Sleeping 6	b) Liv	ving Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number Desc	ription	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Liconoc Dotano			
Commencement date:	21/11/2017	Duration of licence:	19/10/2018
Maximum number of person	s or households permi	itted to occupy HMO under conditions of	licence:
Households 6	Daragna 6		
nousenoids	Persons 6		
Information referred to a	residential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal	Reference number		
	lec Mandatory conds, H	MO - Fire Mandatory conds, HMO - Furniture	

Additional amenities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



#### Licence No.

#### 2017/02024/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

127 Preston Drove Brighton BN1 6LE

Ward

Preston Park

Name & Address of Licence	Holder		
Mr Malcolm Hatch, 16 Nursery G	ardens Littlehampton \	West Sussex BN17 7LZ	
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed H	IMO (No of storeys, e	etc)	
Property Type = SHARED HOUS	E, No of Units = 1, Oc	cupancy = 5, No of Storeys = 3	
	, ,		
Number of Rooms	Total Number of	Rooms 8	
a) Sleeping	b) Liv	ing Rooms	
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities	Number Descr	iption	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
0	40/07/0047	Demotion of Bosses	4.4/05/0000
Commencement date:	18/07/2017	Duration of licence:	14/05/2022
Maximum number of persons of	or households permit	ted to occupy HMO under conditions	of licence:
		1	
Households 5 P	ersons 5		
Information referred to a res	ridential prope <del>rty t</del>	ribunal or Lande Tribunal:	
	ndential property t	Hibulial of Lalius Tribulial.	
None Decision of Tribunal		Defendance in the control of	
Decision of Tribunal		Reference number	
Summary of conditions of licer	nce		

Additional facilities, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/02027/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

33 Ewhurst Road Brighton BN2 4AL

Ward

Moulsecoomb And Bevendean

Name & Address of Licence	e Holder	
Mr Chris Norman, 28 Cobden R	oad Brighton BN2 7RT	
Name & Address of Persor		
MTM Property Services Ltd, 108	BA Lewes Road Brighton BN2 4AE	
Property Description		
Short description of licensed	HMO (No of storeys, etc)	
Property Type = SHARED HOU	SE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 6	b) Living Rooms 1	
Number of Self Contained Fla	ts: 0 Number of Non Self Cont. Fla	its: 0
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	2 2	
c) W.C.s		
Licence Details		
Commencement date:	11/09/2017 Duration of licence:	24/06/2022
Maximum number of persons	or households permitted to occupy HMO under conditions	of licence:
Households 6	Persons 6	
	esidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lice		

Fire Doors, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/02036/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

26 Bonchurch Road Brighton BN2 3PH

Ward

Hanover And Elm Grove

Name & Address of Lice		
Regency Properties (Brighto	n) Ltd, 131 Kings Road Brighton BN1 2HH	
Name & Address of Day	non Monaging	
Name & Address of Pers	Crescent Road Worthing West Sussex BN11 1QR	
ny Lets Ltd, Amelia House	Crescent Road Worthing West Sussex Biv 11 TQR	
Property Description		
	ed HMO (No of storeys, etc)	
Property Type = SHARED H	OUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 5	b) Living Rooms 1	
Number of Self Contained	Flats: 0 Number of Non Self Cont. Fla	ats: 0
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s	Number Description  1 1 1 1	
icence Details		
Sammanaamant data:	23/06/2017 Duration of licence:	07/12/2020
Commencement date:	23/06/2017 Duration of licence:	07/12/2020
Maximum number of perso	ons or households permitted to occupy HMO under conditions	of licence:
Households 5	Persons 5	
nformation referred to a	a residential property tribunal or Lands Tribunal:	
lone		
Decision of Tribunal	Reference number	
Summary of conditions of HMO - Elec Mandatory cond	licence ls, HMO - Fire Mandatory conds, HMO - Furniture Mandatory cond	s, HMO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/02044/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

16 Upper Bevendean Avenue Brighton BN2 4FF

Ward

Moulsecoomb And Bevendean

Name & Address of Licen	ice Holder		
Mr Paul Samouel, Oak Lea Ho	ouse Meath Green Lar	ne Horley Surrey RH6 8JA	
Name & Address of Perso	on Managing		
John Hilton Ltd, 127 Lewes Ro	oad Brighton East Sus	sex BN2 3LG	
Property Description			
Short description of license	d HMO (No of storeys	s, etc)	
Property Type = SHARED HO	OUSE, No of Units = 1,	Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number	of Rooms 7	
a) Sleeping 6	b) I	Living Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities		scription	
a) Kitchen     b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commonoment data	22/06/2017	Duration of licence:	08/05/2022
Commencement date:	22/00/2017	Duration of licence.	06/03/2022
Maximum number of person	ıs or households peri	mitted to occupy HMO under conditions of	licence:
Households 6	Persons 6		
Tiouseriolus	0		
Information referred to a	residential propert	y tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie HMO - Elec Mandatory conds,		y conds, HMO - Furniture Mandatory conds, H	MO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Bathroom 15, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Works



#### Licence No.

#### 2017/02067/HMO/PS

#### **REGISTER ENTRY FOR** (Address of licensed HMO)

38 Elm Grove Brighton BN2 3DD

Ward

Hanover And Elm Grove

Name & Address of Licence Holder		
Mrs Linda Leach, The Mallards Broadmead Road Send GU23 7AB		
Name & Address of Person Managing		
,		
Property Description		
Short description of licensed HMO (No of storeys, etc)		
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Si	toreys = 3	
Number of Rooms Total Number of Rooms 6		
a) Sleeping b) Living Rooms		
Number of Self Contained Flats: 0 Number of N	Ion Self Cont. Flats:	0
Shared Amenities Number Description		
a) Kitchen		
b) Bathrooms/Showers c) W.C.s		
Licence Details		
Commencement date: 12/11/2015 Duration of	of licenses	47/00/2020
Commencement date: 12/11/2015 Duration of	of ficence:	17/09/2020
Maximum number of persons or households permitted to occupy HMO	under conditions of li	cence:
Households 5 Persons 5		
Information referred to a residential property tribunal or Lands T	ribunal:	
None		
Decision of Tribunal Refe	erence number	
Summary of conditions of license		

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/02114/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

17-19 Grand Parade Brighton BN2 9QB

Ward

Queen's Park

b) Living Rooms  umber of Self Contained Flats:  0 Number of Non Self Cont. Flats: 1  hared Amenities Number Description  (Kitchen 36 (Bathrooms/Showers 11 (W.C.s 11)  icence Details  ommencement date:  26/10/2017 Duration of licence:  05/07/2022  laximum number of persons or households permitted to occupy HMO under conditions of licence:  ouseholds 39 Persons 39  Information referred to a residential property tribunal or Lands Tribunal:	nformation referred to a lone Decision of Tribunal	Toolaoliaa piopoliy alaalia or _allao lilaalian	
he Baron Homes Corporation Ltd, 10 Prince Albert Street Brighton BN1 1HE    Ame & Address of Person Managing	nformation referred to a	residential property and and or Edited Tribunian	
he Baron Homes Corporation Ltd, 10 Prince Albert Street Brighton BN1 1HE  ame & Address of Person Managing  roperty Description  hort description of licensed HMO (No of storeys, etc)  roperty Type = BEDSIT, No of Units = 36, Occupancy = 39, No of Storeys = 5  umber of Rooms		residential property tribunal or Lands Tribunal:	
he Baron Homes Corporation Ltd, 10 Prince Albert Street Brighton BN1 1HE  ame & Address of Person Managing  roperty Description  hort description of licensed HMO (No of storeys, etc)  roperty Type = BEDSIT, No of Units = 36, Occupancy = 39, No of Storeys = 5  umber of Rooms	louseholds 39	Persons 39	
he Baron Homes Corporation Ltd, 10 Prince Albert Street Brighton BN1 1HE    ame & Address of Person Managing	-		ions of licence:
he Baron Homes Corporation Ltd, 10 Prince Albert Street Brighton BN1 1HE  lame & Address of Person Managing  roperty Description hort description of licensed HMO (No of storeys, etc) roperty Type = BEDSIT, No of Units = 36, Occupancy = 39, No of Storeys = 5  umber of Rooms Total Number of Rooms Sleeping Total Number of Rooms Objective Description  Number of Non Self Cont. Flats:  1  hared Amenities Number Skitchen Slethrooms/Showers 11 W.C.s  icence Details	lavimum number of neres	as or households permitted to accurate UMO under condition	ions of licenses
he Baron Homes Corporation Ltd, 10 Prince Albert Street Brighton BN1 1HE  lame & Address of Person Managing  roperty Description hort description of licensed HMO (No of storeys, etc) roperty Type = BEDSIT, No of Units = 36, Occupancy = 39, No of Storeys = 5  umber of Rooms Total Number of Rooms Sleeping Total Number of Rooms Objective Description  hared Amenities Number Obscription  Number of Non Self Cont. Flats:  Description Obscription Obscription Obscription Obscription Obscription Obscription Obscription Obscription Obscription	Commencement date:	26/10/2017 <b>Duration of licence</b> :	05/07/2022
he Baron Homes Corporation Ltd, 10 Prince Albert Street Brighton BN1 1HE  lame & Address of Person Managing  roperty Description hort description of licensed HMO (No of storeys, etc) roperty Type = BEDSIT, No of Units = 36, Occupancy = 39, No of Storeys = 5  umber of Rooms Total Number of Rooms 36 Sleeping 36 b) Living Rooms  umber of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1  hared Amenities Number Description  (Kitchen 36 Bathrooms/Showers 11	icence Details		
he Baron Homes Corporation Ltd, 10 Prince Albert Street Brighton BN1 1HE  lame & Address of Person Managing  roperty Description hort description of licensed HMO (No of storeys, etc) roperty Type = BEDSIT, No of Units = 36, Occupancy = 39, No of Storeys = 5  umber of Rooms Total Number of Rooms 36 Sleeping 36 b) Living Rooms  umber of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1  hared Amenities Number Description  (Kitchen 36 Bathrooms/Showers 11	) vv.c.s		
he Baron Homes Corporation Ltd, 10 Prince Albert Street Brighton BN1 1HE  lame & Address of Person Managing  roperty Description hort description of licensed HMO (No of storeys, etc) roperty Type = BEDSIT, No of Units = 36, Occupancy = 39, No of Storeys = 5  umber of Rooms  Total Number of Rooms  Sleeping  Total Number of Rooms  b) Living Rooms  umber of Self Contained Flats:  0 Number of Non Self Cont. Flats: 1  hared Amenities Number Skitchen  Description	) Bathrooms/Showers		
he Baron Homes Corporation Ltd, 10 Prince Albert Street Brighton BN1 1HE  lame & Address of Person Managing  roperty Description  hort description of licensed HMO (No of storeys, etc)  roperty Type = BEDSIT, No of Units = 36, Occupancy = 39, No of Storeys = 5  umber of Rooms  Total Number of Rooms  Sleeping  Total Number of Rooms  O Number of Non Self Cont. Flats:  1	) Kitchen	36	
he Baron Homes Corporation Ltd, 10 Prince Albert Street Brighton BN1 1HE  lame & Address of Person Managing  roperty Description  hort description of licensed HMO (No of storeys, etc)  roperty Type = BEDSIT, No of Units = 36, Occupancy = 39, No of Storeys = 5  umber of Rooms  Total Number of Rooms  Sleeping  Total Number of Rooms  b) Living Rooms	hared Amenities	Number Description	
he Baron Homes Corporation Ltd, 10 Prince Albert Street Brighton BN1 1HE  lame & Address of Person Managing  roperty Description hort description of licensed HMO (No of storeys, etc) roperty Type = BEDSIT, No of Units = 36, Occupancy = 39, No of Storeys = 5  lumber of Rooms  Total Number of Rooms  36	lumber of Self Contained F	lats: 0 Number of Non Self Cont	. Flats: 1
he Baron Homes Corporation Ltd, 10 Prince Albert Street Brighton BN1 1HE  lame & Address of Person Managing  roperty Description hort description of licensed HMO (No of storeys, etc) roperty Type = BEDSIT, No of Units = 36, Occupancy = 39, No of Storeys = 5  lumber of Rooms  Total Number of Rooms  36	) Sleeping 36	b) Living Rooms	
he Baron Homes Corporation Ltd, 10 Prince Albert Street Brighton BN1 1HE  lame & Address of Person Managing  roperty Description  hort description of licensed HMO (No of storeys, etc)  roperty Type = BEDSIT, No of Units = 36, Occupancy = 39, No of Storeys = 5	lumber of Rooms		
he Baron Homes Corporation Ltd, 10 Prince Albert Street Brighton BN1 1HE  lame & Address of Person Managing  roperty Description  hort description of licensed HMO (No of storeys, etc)	Toperty Type - BEBOTT, NO	or office = 50, occupancy = 50, No or ocoreys = 5	
he Baron Homes Corporation Ltd, 10 Prince Albert Street Brighton BN1 1HE lame & Address of Person Managing roperty Description	•	• • •	
he Baron Homes Corporation Ltd, 10 Prince Albert Street Brighton BN1 1HE		ed HMO (No of storeys, etc)	
he Baron Homes Corporation Ltd, 10 Prince Albert Street Brighton BN1 1HE	Proporty Doserintion		
he Baron Homes Corporation Ltd, 10 Prince Albert Street Brighton BN1 1HE			
	lame & Address of Pers	on Managing	
	<u> </u>	•	
ame & Address of Licence Holder	he Baron Homes Corporatio		

HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/02160/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

103 Halland Road Brighton BN2 4PG

Ward

Moulsecoomb And Bevendean

lame & Address of Licence Holder
Rivers Birtwell Ltd, 103 Halland Road Brighton East Sussex BN2 4PG
Name & Address of Person Managing
Home James Ltd, Kingsway House 134-140 Church Road Hove BN3 2DL
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 9, Occupancy = 9, No of Storeys = 3
lumber of Rooms Total Number of Rooms 9
b) Living Rooms
lumber of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
Shared Amenities Number Description
ı) Kitchen
) Bathrooms/Showers
) Bathrooms/Showers
) Bathrooms/Showers c) W.C.s  Licence Details
b) Bathrooms/Showers c) W.C.s
) Bathrooms/Showers c) W.C.s  Licence Details
Bathrooms/Showers  W.C.s  Duration of licence: 14/05/2022  Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Bathrooms/Showers  W.C.s  Licence Details  Commencement date: 07/07/2017 Duration of licence: 14/05/2022
Bathrooms/Showers  W.C.s  Duration of licence: 14/05/2022  Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Bathrooms/Showers  W.C.s  Duration of licence: 14/05/2022  Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Persons 9  Persons 9
Bathrooms/Showers W.C.s  Duration of licence: 14/05/2022  Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households 9 Persons 9  Information referred to a residential property tribunal or Lands Tribunal:

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/02192/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

2 Salisbury Road Hove BN3 3AB

Ward

Brunswick And Adelaide

Name & Address of Licen	ce Holder		
Ms Lisa Davies, 2 Salisbury R	oad Hove BN3 3AB		
Name & Address of Perso	n Managing		
1			
Property Description			
Short description of license	d HMO (No of storeys,	etc)	
Property Type = BEDSIT, No o	of Units = 15, Occupancy	y = 15, No of Storeys = 5	
Number of Rooms	Total Number of	f Rooms 16	
a) Sleeping 15	b) Liv	ving Rooms	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Fl	ats: 1
Shared Amenities	Number Desc	ription	
a) Kitchen	15		
b) Bathrooms/Showers	5		
c) W.C.s	5		
Licence Details			
Licence Details			
Commencement date:	14/07/2017	Duration of licence:	01/11/2019
Maximum number of person	s or households permi	tted to occupy HMO under conditions	s of licence:
Households 15	Persons 15		
Information referred to a	residential property t	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie	cence		
HMO - Elec Mandatory conds,	HMO - Fire Mandatory	conds, HMO - Furniture Mandatory cond	ds, HMO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/02256/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

26 Russell Square	
Brighton	
BN1 2EE	

Ward

Regency

Name & Address of Licer	nce Holder		
R V & R A Monti Settlement T	rust, Monterey Ovingdea	n Road Ovingdean BN2 7BB	
Name & Address of Perse	on Managing		
Mr Nicholas Monti, 140 Longh	ill Road Ovingdean BN2	7BD	
Property Description			
Short description of license	d HMO (No of storeys, e	etc)	
Property Type = SHARED HC	OUSE, No of Units = 7, Oc	ccupancy = 7, No of Storeys = 5	
Number of Rooms	Total Number of	f Rooms 8	
a) Sleeping 7	b) Liv	ring Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. F	lats: 0
Shared Amenities	Number Desc	ription	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Licence Details			
Commencement date:	09/08/2017	Duration of licence:	06/06/2022
Maximum number of persor	ıs or households permi	tted to occupy HMO under condition	is of licence:
Households 7	Persons 7		
Information referred to a	residential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	, HMO - Fire Locks, HMC	) - Fire Mandatory conds, HMO - Furnit	

HMO - Elec Mandatory conds, HMO - Fire Locks, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Ventilation 3, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/02259/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

26 New England Road Brighton BN1 3TU

Ward

Preston Park

Summary of conditions of licence	s. HMO - Gas
Decision of Tribunal Reference number	
lone	
nformation referred to a residential property tribunal or Lands Tribunal:	
Households 5 Persons 5	
Maximum number of persons or households permitted to occupy HMO under conditions	of licence:
Commencement date: 18/07/2017 Duration of licence:	15/05/2022
icence Details	
2 2	
) Bathrooms/Showers 2	
) Kitchen 1	
Shared Amenities Number Description	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flat	ts: 0
) Siceping U) Living Rooms I	
b) Living Rooms 1	
lumber of Rooms Total Number of Rooms 6	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Short description of licensed HMO (No of storeys, etc)	
Property Description	
Name & Address of Person Managing	
/Ir Terry Mole, Flat 2 28 Medina Villas Hove BN3 2RN	
Name & Address of Licence Holder	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/02264/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

107 The Highway Brighton BN2 4GD

Ward

Moulsecoomb And Bevendean

Name & Address of Licence	Holder	
Mr Colin Woodcock, 3 Woodland		
Name & Address of Person	Managing	
,		
Property Description		
Short description of licensed H	MO (No of storeys, etc)	
Property Type = SHARED HOUS	E, No of Units = 1, Occupancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 8	
a) Sleeping 7	b) Living Rooms 1	
Number of Self Contained Flats	: 0 Number of Non Self Cont. Flats:	1
Number of Self Contained Flats	Number of Non Self Cont. Flats:	ı
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	2	
c) W.C.s	3	
Licence Details		
Commencement date:	07/09/2017 Duration of licence:	06/07/2021
Maximum number of persons of	or households permitted to occupy HMO under conditions of lic	cence:
_		
Households 7 P	ersons 7	
Information referred to a res	idential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licer		11040

HMO - Elec Mandatory conds, HMO - Fire Doors 5, HMO - Fire Locks, HMO - Fire Mandatory conds, HMO - Fire Notices 1, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Bathroom 4, HMO - Licensing Bedrooms, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/ repairs



### Licence No.

#### 2017/02296/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

4 Islingword Place Brighton BN2 9XH

Ward

Hanover And Elm Grove

ame & Address of Licer	ce Holder		
& Ms Richard Hurst & Jane	et Norris, 64 Carlton Hill Brig	phton BN2 0GW	
ime & Address of Perso	on Managing		
(			
operty Description	d LIMO (No of otomore oto	<b>.</b>	
-	d HMO (No of storeys, etc	-	
pperty Type = SHARED HC	USE, No of Units = 1, Occu	pancy = 5, No of Storeys = 3	
ımber of Rooms	Total Number of R	ooms 6	
Sleeping 5	b) Living	Rooms 1	
ımber of Self Contained F	lats: 0	Number of Non Self Cont. Fl	ats: 1
ared Amenities	Number Descrip	tion	
Kitchen	1		
Bathrooms/Showers	2		
W.C.s	2		
cence Details			
			,
mmencement date:	14/07/2017	<b>Duration of licence:</b>	13/06/2022
eximum number of person	s or households permitte	d to occupy HMO under conditions	s of licence
ouseholds 5	Persons 5		
formation referred to a	rocidontial proporty trib	ounal or Lands Tribunal:	
one	residential property tric	ounar or Lanus Tribunal.	
cision of Tribunal		Reference number	
ımmary of conditions of li		ds, HMO - Furniture Mandatory cond	ls, HMO - Gas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/02305/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

43 Hartington Road Brighton BN2 3LJ

Ward

Hanover And Elm Grove

ame & Address of Lice	nce Holder		
	er, 2A Woodbourne Avenue E	Brighton BN1 8FQ	
	., _,		
ame & Address of Pers	on Managing		
ure Property Solutions, 31 l	Upper St James Street Brigh	ton East Sussex BN2 1JN	
roperty Description			
hort description of license	ed HMO (No of storeys, etc	<b>;</b> )	
roperty Type = SHARED He	OUSE, No of Units = 1, Occi	upancy = 6, No of Storeys = 3	
	T. G. I.N C.		
umber of Rooms	Total Number of R		
Sleeping 6	b) Livinç	g Rooms 1	
umber of Self Contained I	Flats: 0	Number of Non Self Cont. Fla	ats: 1
hared Amenities	Number Descrip	tion	
Kitchen Bathrooms/Showers	3		
W.C.s	3		
cence Details			
ommencement date:	07/07/2017	Duration of licence:	28/06/2022
mmencement date.	07/07/2017	Duration of licence.	20/00/2022
aximum number of perso	ns or households permitte	ed to occupy HMO under conditions	of licence:
ouseholds 6	Persons 6		
ouscrioius 0	1 0130113		
formation referred to a	residential property tril	bunal or Lands Tribunal:	
one			
ecision of Tribunal		Reference number	
	s, HMO - Fire Mandatory cor	nds, HMO - Furniture Mandatory cond	

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/02366/HMO/PS

#### **REGISTER ENTRY FOR** (Address of licensed HMO)

48 Sackville Gardens Hove

BN3 4GH

Ward

Westbourne

Name & Address of Licence	Holder		
Mr Jason Hayward, 48 Sackville G	ardens Hove BN3 4GH		
Name & Address of Person N	Managing		
,			
Property Description			
Short description of licensed HM	MO (No of storeys, etc)		
Property Type = SHARED HOUSE	E, No of Units = 7, Occupa	ncy = 7, No of Storeys = 3	
Normalism of December	Tatal Namehou of Door		
Number of Rooms	Total Number of Rooi		
a) Sleeping	b) Living Ro	ooms	
Number of Self Contained Flats:	0	Number of Non Self Cont. Flat	es: 0
Number of Self Contained Flats.	0	Number of Non Sen Cont. I lat	.s. U
Shared Amenities N	umber Description	1	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	09/08/2017	Duration of licence:	30/05/2022
Maximum number of persons or	households permitted to	o occupy HMO under conditions	of licence:
Households 7 Pe	ersons 7		
Information referred to a resi	dential property tribur	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of ligan			

HMO - Elec Mandatory conds, HMO - Fire Doors 2, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



## Licence No.

### 2017/02368/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

10 Temple Street	
Brighton	
BN1 3BH	

	ward	Regei	ncy
lame & Address of Licence Holde	er i		
Ir Tom Ghibaldan, 59 Braemore Road	Hove BN3 4HA		
Name & Address of Person Mana	ging		
Property Description			
Short description of licensed HMO (N	o of storeys, etc)		
Property Type = SHARED HOUSE, No	of Units = 1, Occupancy = 5, No of Sto	oreys = 3	
lumber of Rooms To	tal Number of Rooms 6		
) Sleeping 5	b) Living Rooms 1		
lumber of Self Contained Flats:	0 Number of No	on Self Cont. Flats:	0
difficulties of containing Figure .	Training of the		Ū
Shared Amenities Number	r Description		
) Kitchen 1			
) Bathrooms/Showers 1			
) W.C.s1			
icence Details			
Commencement date: 0	6/12/2017 <b>Duration of</b>	Fliggraph	02/07/2021
ommencement date.	Duration of	incerice.	02/07/2021
laximum number of persons or hous	eholds permitted to occupy HMO u	nder conditions of l	icence:
louseholds 5 Persons	5		
nformation referred to a resident	al property tribunal or Lands Tr	ibunal:	
lone			
ecision of Tribunal	Refer	rence number	
Summary of conditions of licence Fire Doors, Gas, HMO - Elec Mandatory			ndatory

conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Substantial doors, Ventilation



#### Licence No.

#### 2017/02516/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

45 Franklin Street Brighton BN2 3AL

Ward

Hanover And Elm Grove

Name & Address of Licence		
Mr David Martin, C/o 47 Norfolk	Square Brighton BN1 2PA	
Name & Address of Person	- · ·	
Homelets (Brighton) Ltd, 47 North	folk Square Brighton BN1 2PA	
Dranauty Description		
Property Description  Short description of licensed I	JMO (No of storous sto)	
-		
Property Type = SHARED HOUS	SE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping	b) Living Rooms	
, , , , , , , , , , , , , , , , , , , ,	, 0	
Number of Self Contained Flat	s: 0 Number of Non Self Cont. I	Flats: 1
rumber of our contained rad	3. Number of Non Sen Sona.	1
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	3	
Licence Details		
Commencement date:	10/08/2017 Duration of licence:	05/06/2022
Maximum number of persons	or households permitted to occupy HMO under conditio	ns of licence:
Households 6 F	Persons 6	
Information referred to a re	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lice	nce	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/02517/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

106 Islingword Road Brighton BN2 9SG

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder			
Mr David Martin, 86 Shaftesbury Road Brighton BN1 4NG				
Name & Address of Perso	n Managing			
Homelets (Brighton) Ltd, 47 Norfolk Square Brighton East Sussex BN1 2PA				
Property Description				
Short description of licensed				
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3				
Number of Rooms	Total Number of Rooms 6			
a) Sleeping 6	b) Living Rooms 1			
, . • <u> </u>	<u> </u>			
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1				
Shared Amenities	Number Description			
a) Kitchen	1			
b) Bathrooms/Showers	2			
c) W.C.s	2			
Licence Details				
Commencement date:	10/08/2017 Duration of licence:	11/07/2022		
Maximum number of persons	s or households permitted to occupy HMO under conditions of	licence:		
Households 6	Persons 6			
Information referred to a r	residential property tribunal or Lands Tribunal:			
Information referred to a residential property tribunal or Lands Tribunal:  None				
Decision of Tribunal	Reference number			
Summary of conditions of licence HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 7, HMO - Fire Blocked MOE, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing				

Kitchen 1, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Walls 5, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



Mandatory conds, Other Fire Works, Structural Fire Works

# Licence No.

#### 2017/02519/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

35 Bristol Gardens Brighton BN2 5JR

Ward

East Brighton

Name & Address of Licence H	older	
Sanscript Consultancy Ltd, Brookho	ollow 8 Holland Road Hove East Sussex BN3 1JJ	
Name & Address of Person M	anaging	
S J Lettings Ltd, 52 Lewes Road Br	ighton BN2 3HW	
Property Description		
Short description of licensed HM	O (No of storeys, etc)	
Property Type = SHARED HOUSE,	No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 5	b) Living Rooms 1	
a) olcoping	b) Living Rooms	
Number of Solf Contained Flater	0 Number of New Self Cont. Flate.	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	1
Shared Amenities Nu	mber Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Commencement date:	30/06/2017 Duration of licence:	05/06/2022
Johnnencement date.	SU/00/2017 Duration of licence.	03/00/2022
Maximum number of persons or	households permitted to occupy HMO under conditions of lie	cence:
Households 5 Per	sons 5	
5	555	
nformation referred to a resid	lential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
HMO - Fire Blanket, HMO - Fire Em HMO - Furniture Mandatory conds,	e f Bedroom, HMO - Elec Mandatory conds, HMO - Fire Alarm Sys nergency Lighting 1, HMO - Fire Mandatory conds, HMO - Fire No HMO - Gas Mandatory conds, HMO - Property Chges Mandatory	otices 1, y conds,



#### Licence No.

#### 2017/02524/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

37 Riley Road Brighton BN2 4AG

Ward

Moulsecoomb And Bevendean

Name & Address of Licen	ce Holder		
Mr Martin Barry, 62 Roman Ro		N	
<u> </u>	, ,		
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of license	,	•	
Property Type = SHARED HO	USE, No of Units = 1,	Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number	of Rooms 6	
a) Sleeping 5	b) l	Living Rooms 1	
Number of Self Contained F	ats: 0	Number of Non Self Cont. Fla	its: 0
Shared Amenities	Number Des	scription	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Communication data.	20/44/2047	Duration of linears	20/05/2022
Commencement date:	29/11/2017	Duration of licence:	30/05/2022
Maximum number of person	s or households perr	mitted to occupy HMO under conditions	of licence:
Households 5	Persons 5		
	3.000		
Information referred to a	residential property	y tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie		Fire Mandatory conds HMO - Furniture M	andatory

Elec Installation, Electrical intake, Gas Certs, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/02630/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

34 Old Shoreham Road Brighton BN1 5DD

Ward

Preston Park

Name & Address of Licen	ce Holder		
Mr Dean Golding, Clifton Mew	s Clifton Hill Brighton	on East Sussex BN1 3HR	
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license	d HMO (No of store	ys, etc)	
Property Type = SHARED HO	USE, No of Units =	1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Numb	er of Rooms 6	
a) Sleeping 5	b	) Living Rooms 1	
Number of Self Contained Fl	lats:	0 Number of Non Self Cont. Flat	ts: 1
Shared Amenities	Number D	Description	
a) Kitchen	1	·	
b) Bathrooms/Showers	2		
c) W.C.s	2		
D ( )			
Licence Details			
Commencement date:	23/08/2017	Duration of licence:	11/06/2022
	20/00/2017		11/00/2022
Maximum number of person	s or households pe	ermitted to occupy HMO under conditions	of licence:
Households 5	Persons 5	:	
Tiouseriolus 5	reisons 5	<u>,                                      </u>	
Information referred to a	residential prope	rty tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	datory conds, HMO -	Fire Mandatory conds, HMO - Furniture Man	



#### Licence No.

#### 2017/02633/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

12 Edinburgh Road Brighton BN2 3HY

Ward

St. Peter's And North Laine

Name & Address of Licence Holder
Ms Michelle Woodman, 1 Magnolia Dene Hazlemere Bucks HP15 7QF
Name & Address of Person Managing
John Hilton, 127 Lewes Road Brighton East Sussex BN2 3LG
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 6, Occupancy = 6, No of Storeys = 4
Number of Rooms Total Number of Rooms 8
a) Sleeping 6 b) Living Rooms 2
b) Living rooms
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
Number of cell contained riats.
Shared Amenities Number Description
a) Kitchen 2
b) Bathrooms/Showers 2
C) W.C.s 3
Licence Details
Commencement date: 26/09/2017 Duration of licence: 02/09/2022
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Households 6 Persons 6
Touseholds 0 1 closells 0
Information referred to a residential property tribunal or Lands Tribunal:
None
Decision of Tribunal Reference number
Summary of conditions of licence HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas



#### Licence No.

#### 2017/02658/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

33 Buckingham Road Brighton BN1 3RP

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
Ms Halina Woodthorpe, 26 Dyl		n BN1 5LB	
,	<u> </u>		
Name & Address of Perso	n Managing		
ı			
Property Description	LUMO (No of stances	-4-1	
Short description of licensed	•	•	
Property Type = BEDSIT, No c	of Units = 6, Occupancy	= 6, No or Storeys = 3	
Number of Rooms	Total Number of	f Rooms 6	
a) Sleeping 6	b) Liv	ring Rooms	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Flat	s: 0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description   6	ription	
Licence Details			
Commencement date:	14/09/2017	Duration of licence:	26/06/2022
Maximum number of persons	s or households permi	tted to occupy HMO under conditions	of licence:
Households 6	Persons 6		
Information referred to a r	esidential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic		conds HMO - Furniture Mandatory conds	HMO - Gas



#### Licence No.

#### 2017/02664/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

18 Seafield Road Hove BN3 2TP

Ward

Central Hove

Summary of conditions of licence				
Decision of Tribunal Reference number				
None				
nformation referred to a residential property tribunal or Lands Tribunal:				
Households 12 Persons 12				
maximum mamber of persons of nouseholds permitted to occupy miso under conditions of	n noence.			
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
Commencement date: 05/10/2017 Duration of licence:	31/05/2022			
Licence Details				
b) W.C.s 7				
b) Bathrooms/Showers 7				
Shared Amenities Number Description  a) Kitchen 4				
Number of Cent Contained Flats.	. 1			
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	s: 1			
a) Sleeping b) Living Rooms 2				
Number of Rooms 12				
Property Type = BEDSIT, No of Units = 12, Occupancy = 12, No of Storeys = 3				
Short description of licensed HMO (No of storeys, etc)				
Property Description				
Mr Andrew Morris, 11 Radinden Drive Hove BN3 6LB				
Name & Address of Person Managing				
Regency One Ltd, 11 Radinden Drive Hove BN3 6LB				
Name & Address of Licence Holder				



#### Licence No.

#### 2017/02817/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

11 Aberdeen Road Brighton BN2 3JA

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
Mr Peter Bell, 30 Hilda Vale Re			
·			
Name & Address of Perso	n Managing		
Kendrick Property Services Ltd	d, 10-12 Lewes Road Brighton East Sussex BN2 3HP		
Property Description			
Short description of license	d HMO (No of storeys, etc)		
Property Type = SHARED HO	USE, No of Units = 1, Occupancy = 6, No of Storeys =	= 4	
Number of Rooms	Total Number of Rooms 7		
a) Sleeping 6	b) Living Rooms 1		
Number of Self Contained Fl	ats: 0 Number of Non Se	If Cont. Flats: 1	
Shared Amenities	Number December		
a) Kitchen	Number Description		
b) Bathrooms/Showers	6		
c) W.C.s	6		
Licence Details			
Commencement date:	31/07/2017 Duration of licen	nce: 19/06/2022	
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
		conditions of licence.	
Households 6	Persons 6		
	vanidautial uunungutu tuibuunal au lauda Tuibuun	al.	
	residential property tribunal or Lands Tribuna	di:	
None  Decision of Tribunal	Reference	numbor	
<b>Summary of conditions of lic</b> Additional Facilities, HMO - Ele Mandatory conds, HMO - Gas	c <b>ence</b> ec Mandatory conds, HMO - Fire Mandatory conds, H Mandatory conds, HMO - Property Chges Mandatory	MO - Furniture conds, HMO - Property	

Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs



#### Licence No.

#### 2017/02828/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

73B St James's Street Brighton BN2 1PJ

Ward

Queen's Park

Name & Address of Licen	ce Holder		
DIM South LTD, Hazel Cottage	: Warren Road Brighton	BN2 6DA	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	l HMO (No of storeys, e	tc)	
Property Type = Not Assigned,	No of Units = 4, Occupa	ncy = 4, No of Storeys = 4	
Number of Rooms	Total Number of	Rooms 4	
a) Sleeping 4	b) Livi	ng Rooms	
Number of Self Contained Fla	ats: 2	Number of Non Self Cont. Flat	s: 0
Shared Amenities	Number Descr	iption	
a) Kitchen	4		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Licence Details			
Commencement date:	08/09/2017	Duration of licence:	18/06/2022
Maximum number of nersons	a ar bayaabalda narmit	ted to ecoupy UMO under conditions	of lineman
waxiiiuiii iiuiiiber oi persons	s or nousendlas permit	ted to occupy HMO under conditions	or nicerice.
Households 4	Persons 4		
Information referred to a r	esidential property to	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice	ence		



#### Licence No.

#### 2017/02865/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

77 Cobden Road Brighton BN2 9TJ

Ward

Hanover And Elm Grove

Name & Address of Licence Holder
Mr Tony Plank, 6 Mayfield Crescent Brighton BN1 8HQ
Will folly Frank, o Mayneld Grescent Brighton Birt of its
Name & Address of Person Managing
Mr Dan Lyons, T/a Brighton Accommodation Agency 74 Lewes Road Brighton BN2 3HZ
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3
Number of Rooms Total Number of Rooms 6
a) Sleeping 5 b) Living Rooms 1
a) Sleeping b) Living Rooms 1
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1
Number of Self Contained Flats.
Shared Amenities Number Description
a) Kitchen 1
b) Bathrooms/Showers 2
c) W.C.s
Licence Details
Commencement date: 01/11/2017 Duration of licence: 24/06/2022
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Households 5 Persons 5
Information referred to a residential property tribunal or Lands Tribunal:
None
Decision of Tribunal Reference number
Summary of conditions of licence HMO - Elec Mandatory conds, HMO - Fire Doors 4, HMO - Fire Mandatory conds, HMO - Furniture



#### Licence No.

#### 2017/02966/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

12 Caledonian Road Brighton BN2 3HX

Ward

St. Peter's And North Laine

Name & Address of Licence H	older		
Mr & Mrs R Ransom, 36 Tongdean	Avenue Hove BN3 6TN		
Name & Address of Person Ma	anaging		
,			
Property Description			
Short description of licensed HM	O (No of storeys etc)		
•	No of Units = 7, Occupancy = 7, No of Sto	rove = A	
Froperty Type - STIANED HOUSE,	No of Office – 1, Occupancy – 1, No of Sto	Cy5 - 4	
Number of Rooms	Total Number of Rooms 8		
a) Sleeping 7	b) Living Rooms 1		
Number of Self Contained Flats:	0 Number of No	n Self Cont. Flats:	0
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s	mber Description		
Licence Details			
Commencement date:	02/11/2017 <b>Duration of</b>	licence:	19/07/2022
Maximum number of persons or I	nouseholds permitted to occupy HMO u	nder conditions of l	icence:
Households 7 Per	sons 7		
Information referred to a resid	ential property tribunal or Lands Tri	bunal:	
None			
Decision of Tribunal	Refer	ence number	



#### Licence No.

#### 2017/03023/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

101 Milner Road Brighton BN2 4BR

Ward

Moulsecoomb And Bevendean

Name & Address of Licence Holder
Mr Fu Wah Cheng, 40 Rodney Gardens Pinner Middlesex HA5 2RP
Name & Address of Person Managing
,
Duran auto Dananintian
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3
Number of Rooms Total Number of Rooms 7
a) Sleeping 6 b) Living Rooms 1
a) Sleeping b) Living Rooms 1
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1
Shared Amenities Number Description
a) Kitchen 2 5 b) Bathrooms/Showers 2
c) W.C.s 2
Licence Details
Commencement date: 01/11/2017 Duration of licence: 09/08/2022
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Households 6 Persons 6
Information referred to a residential property tribunal or Landa Tribunal.
Information referred to a residential property tribunal or Lands Tribunal:
None  Desiries of Tribunal
Decision of Tribunal Reference number
Summary of conditions of licence HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas



#### Licence No.

#### 2017/03195/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

6 Lower Rock Gardens Brighton BN2 1PG

Ward

Queen's Park

Name & Address of Licen	ce Holder		
Geneva Investment Group Ltd	, Geneva House 77A Rutlar	nd Road Hove BN3 5FE	
Name & Address of Perso	n Managing		
Buon antin Boomintian			
Property Description	d LIMO (No of storous sto		
Short description of license			
Property Type = BEDSIT, No o	of Units = 10, Occupancy =	10, No of Storeys = 5	
Number of Rooms	Total Number of Ro	ooms 10	
a) Sleeping 10	b) Living	Rooms	
, , , , , , , , , , , , , , , , , , , ,	, 3		
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Flat	ts: 1
	<u> </u>		
Shared Amenities	Number Descript	iion	
a) Kitchen	10		
o) Bathrooms/Showers	4		
c) W.C.s	4		
_icence Details			
Licence Details			
Commencement date:	23/11/2017	<b>Duration of licence:</b>	23/07/2022
W		d 4   1110 diti	-f.l
waximum number of person	s or nousenolas permitted	d to occupy HMO under conditions	of licence:
Households 10	Persons 10		
nformation referred to a	residential property trib	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie		de HMO Eurnituro Mandatory conde	L HMO



#### Licence No.

#### 2017/03222/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

216A Dyke Road Brighton BN1 5AA

Ward

Preston Park

Licence Details  Commencement date: 03/02/2016 Duration of licence:  Maximum number of persons or households permitted to occupy HMO under conditions of licence because of the second s	17/11/2020 cence:
Licence Details  Commencement date: 03/02/2016 Duration of licence:  Maximum number of persons or households permitted to occupy HMO under conditions of licence because the second seco	
Licence Details  Commencement date: 03/02/2016 Duration of licence:  Maximum number of persons or households permitted to occupy HMO under conditions of licence.	
Licence Details  Commencement date: 03/02/2016 Duration of licence:	
c) W.C.s 2  Licence Details	17/11/2020
c) W.C.s	
c) W.C.s	
D) Datin Control Children L	
b) Bathrooms/Showers 2	
Shared Amenities Number Description  a) Kitchen 1	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats:	0
a) Sleeping 5 b) Living Rooms 1	
Number of Rooms Total Number of Rooms 5	
Property Type = SHARED HOUSE, No of Units = 5, Occupancy = 5, No of Storeys = 3	
Short description of licensed HMO (No of storeys, etc)	
Property Description	
,	
Name & Address of Person Managing	
Mr Andrew Gill, 216A Dyke Road Brighton East Sussex BN1 5AA	
Name & Address of Licence Holder	

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/03232/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

137 Westbourne Street Hove BN3 5FB

Ward

Westbourne

Name & Address of Licer	ice Holder	
Potter & Regan Properties, FI	at 7 26 Adelaide Crescent Hove BN3 2JH	
Name & Address of Person	on Managing	
,		
Property Description		
Short description of license	d HMO (No of storeys, etc)	
Property Type = SHARED HC	OUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 8	
a) Sleeping 6	b) Living Rooms 2	
	b) Living Roome	
Number of Self Contained F	lats: 0 Number of Non Self Cont. Flats:	0
Number of Gen Gontained i	Number of Non Sen Sont. Hats.	U
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Licence Details		
Commencement date:	22/11/2017 Duration of licence:	06/08/2022
Maximum number of never	and the control of th	inoman.
Maximum number of persor	is or households permitted to occupy HMO under conditions of li	icence.
Households 6	Persons 6	
	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of li Fire doors, HMO - Elec Mand	cence atory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandator	ry conds,



#### Licence No.

#### 2017/03256/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

19 Stirling Place	
Hove	
BN3 3YU	

Ward

Central Hove

Name & Address of Licen	ce Holder			
Mr Maurice Goldring, 35 Eley	Drive Brighton East	t Sussex BN	2 7FG	
Name & Address of Perso	on Managing			
,				
Property Description				
Short description of licensed	d HMO (No of stor	eys, etc)		
Property Type = BEDSIT, No o	of Units = 5, Occup	ancy = 5, No	of Storeys = 3	
Number of Rooms	Total Numi	ber of Room	ns 5	
a) Sleeping 5		b) Living Ro	oms	
	_		]	_
Number of Self Contained Fl	lats:	0	Number of Non Self Cont. Flats:	0
Shared Amenities a) Kitchen	Number 5	Description		
b) Bathrooms/Showers	4			
c) W.C.s	4			
Licence Details				
Commencement date:	14/09/201	7	Duration of licence:	09/07/2022
Maximum number of person	s or households p	permitted to	occupy HMO under conditions of	licence:
Households 5	Persons	5		
Information referred to a	residential prop	erty tribun	al or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of lie	cence			
Additional facilities, Fire alarm	s, HMO - Elec Man		s, HMO - Fire Mandatory conds, HMO	
-unitione ivialidatory conds, Hi	iviO - Gas iviaridato	ny conus, mi	MO - Property Chges Mandatory con	us, HIVIO -

Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/03286/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

61 Beaconsfield Road Brighton BN1 4QJ

		Ward	Preston	Park
Name & Address of Licence	Holder			
Brighton Student Developments	Ltd, C/O North Quay Ho	ouse Sutton Harbour Plyr	mouth PL4 0RA	
Name & Address of Person	Managing			
,				
Dranauty Dagarintian				
Property Description Short description of licensed F	IMO (No of storous, et	۵)		
-	-	•		
Property Type = SHARED HOUS	SE, No of Units = 1, Occ	cupancy = 6, No of Store	ys = 3	
Number of Rooms	Total Number of I	Rooms 7		
a) Sleeping 6	b) Livir	ng Rooms 1		
Number of Self Contained Flats	s: 0	Number of Non	Self Cont. Flats:	1
Shared Amenities	Number Descri	ption		
a) Kitchen	2			
b) Bathrooms/Showers	2			
c) W.C.s	2			
Licence Details				
Commencement date:	23/11/2017	Duration of lic	cence:	06/09/2022
Maximum number of persons of	or households permitt	ed to occupy HMO und	er conditions of I	icence:
Ususahalda O F				
Households 6 F	Persons 6			
Information referred to a res	sidential property tr	ibunal or Lands Tribu	unal:	
None				
Decision of Tribunal		Referen	ce number	
Summary of conditions of licer HMO - Elec Mandatory conds, H		un de LIMO. Euroiture M	andatan, aanda Ul	MO Gas

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/03295/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 54 Viaduct Road Brighton BN1 4ND

Ward

St. Peter's And North Laine

Name & Address of Licen	ice Holder		
Mr Muthulingam Thayalacuma	ar, 54 Viaduct Road Brighton	BN1 4ND	
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, etc)		
Property Type = SHARED HO	USE, No of Units = 1, Occup	ancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Ro	oms 7	
a) Sleeping 5	b) Living	Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flat	ts: 1
Shared Amenities	Number Descripti	on	
a) Kitchen b) Bathrooms/Showers	1		
c) W.C.s	2		
0) 11.0.0			
Licence Details			
Commencement date:	11/09/2017	Duration of licence:	11/07/2022
Maximum number of person	s or households permitted	to occupy HMO under conditions	of licence:
		,	
Households 5	Persons 5		
Information referred to a	residential property trib	unal ar Landa Tribunal:	
Information referred to a None	residential property tribi	unar or Lanus Tribunai:	
None Decision of Tribunal		Reference number	
Decision of Tribunal		Reference number	
Summary of conditions of li		Fire Blocked MOE, HMO - Fire Mand	datary aanda
		conds, HMO - Property Chges Mand	

HMO - Property Maint Mandatory conds, HMO - Repairs Bathroom 17, HMO - Repairs Ventilation 3, HMO -

RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/03330/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

20 Bennett Road Brighton BN2 5JL

Ward

**East Brighton** 

Name & Address of Licence Holder
Ms Sanjana Kaura, Brookhollow 8 Holland Road Hove East Sussex BN3 1JJ
Name & Address of Person Managing
S J Lettings Ltd, 52 Lewes Road Brighton BN2 3HW
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3
Number of Rooms Total Number of Rooms 5
a) Sleeping b) Living Rooms
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
Shared Amenities Number Description
a) Kitchen
h) Rathroome/Showere
b) Bathrooms/Showers
c) W.C.s
c) W.C.s  Licence Details
c) W.C.s
c) W.C.s  Licence Details
Licence Details  Commencement date: 07/12/2016 Duration of licence: 10/02/2021  Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Licence Details  Commencement date: 07/12/2016 Duration of licence: 10/02/2021
Licence Details  Commencement date: 07/12/2016 Duration of licence: 10/02/2021  Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households 5 Persons 5
Licence Details  Commencement date: 07/12/2016 Duration of licence: 10/02/2021  Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households 5 Persons 5  Information referred to a residential property tribunal or Lands Tribunal:
Licence Details  Commencement date: 07/12/2016 Duration of licence: 10/02/2021  Maximum number of persons or households permitted to occupy HMO under conditions of licence:  Households 5 Persons 5

Summary of conditions of licence



#### Licence No.

#### 2017/03357/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 41 College Place Brighton BN2 1HN

	vvard	East Brig	gnton
Name & Address of Licence Holder			
Mr Peter Devere-Catt & Miss Helen Devere-Cat	, 48 Chelsham Road South	n Croydon Surrey CR2 6	НҮ
Name & Address of Person Managing			
Property Plus Lettings Ltd, 45 Church Road Hov	e BN3 2BE		
Property Description			
Short description of licensed HMO (No of sto	reys, etc)		
Property Type = Not Assigned, No of Units = 8,	Occupancy = 8, No of Store	eys = 3	
Number of Rooms Total Nun	nber of Rooms 8		
a) Sleeping	b) Living Rooms		
Number of Self Contained Flats:	2 Number of	Non Self Cont. Flats:	6
			-
Shared Amenities Number	Description		
a) Kitchen 8			
b) Bathrooms/Showers 4			
c) W.C.s 4			
Licence Details			
Commencement date: 29/11/20	17 Duration	of licence:	12/07/2022
Maximum number of persons or households	permitted to occupy HM0	O under conditions of li	cence:
Households 8 Persons	8		
Information referred to a residential prop	perty tribunal or Lands	Tribunal:	
None			
Decision of Tribunal	Re	eference number	
Summary of conditions of licence Cooker, Fire Blanket, Fire locks, Flat 1, HMO - E	Elec Mandatory conds, HMC	O - Fire Mandatory conds	s, HMO -

Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO -Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Heating, IS, Sockets, Window



#### Licence No.

#### 2017/03479/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

7 Islingword Street Brighton BN2 9UR

Ward

Hanover And Elm Grove

		waiu	Tianovei Ana	LIIII OIOVC
Name & Address of Licer	ce Holder			
Linda, Steve, Lawrence Danie		svenor Properties Tu	udor Grange 13 The	Upper
Drive Have BN3 6CD				
Name & Address of Perso	on Managing			
1				
Dranauty Decemention				
Property Description  Short description of license	d HMO (No of atorova, etc)			
•		5 N (0)		
Property Type = SHARED HC	USE, No of Units = 1, Occupa	ancy = 5, No of Stor	eys = 4	
Number of Rooms	Total Number of Roo	oms 8		
a) Sleeping 5	b) Living F	Rooms 1		
Number of Self Contained F	lats: 0	Number of No	n Self Cont. Flats:	1
Shared Amenities	Number Description	on		
a) Kitchen	1			
o) Bathrooms/Showers	2			
c) W.C.s	2			
Licence Details				
_				
Commencement date:	20/11/2017	Duration of I	licence:	05/08/2022
Maximum number of persor	s or households permitted	to occupy HMO un	der conditions of I	icence:
	_			
Households 5	Persons 5			
nformation referred to a	residential property tribu	ınal or Lands Tril	ounal:	
None				
Decision of Tribunal		Refere	ence number	
Summary of conditions of li HMO - Elec Mandatory conds		s, HMO - Furniture I	Mandatory conds. H	MO - Gas



#### Licence No.

#### 2017/03485/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

8 Ditchling Road Brighton BN1 4SF

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
		Grosvenor Properties Tudor Grange 1	3 The Upper
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	d HMO (No of storeys, etc		
Property Type = SHARED HO	USE, No of Units = 1, Occi	upancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of R	Rooms 7	
a) Sleeping 6	b) Livin	g Rooms 1	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities a) Kitchen b) Bathrooms/Showers	Number Descrip	otion	
c) W.C.s	2		
Licence Details			
Commencement date:	06/10/2017	Duration of licence:	25/07/2022
Maximum number of person	s or households permitte	ed to occupy HMO under conditions	of licence:
Households 6	Persons 6		
Information referred to a <b>i</b>	residential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic	cence		



#### Licence No.

#### 2017/03518/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

12 Newmarket Road Brighton BN2 3QF

Ward

Hanover And Elm Grove

Name & Address of Licence Holder	
Mr Matthew Peace, 89 Lowther Road Brighton BN1 6LG	
Name & Address of Person Managing	
,	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms Total Number of Rooms 6	
a) Sleeping 5 b) Living Rooms 1	
2, 2g	
Number of Self Contained Flats: 0 Number of Non Self Cont.	Flats: 1
Number of Self Contained Flats.	riais.
Shared Amenities  a) Kitchen b) Bathrooms/Showers c) W.C.s  Number Description  1  1  1  1  1  1  1  1  1  1  1  1  1	
Licence Details	
Commencement date: 30/08/2017 Duration of licence:	24/07/2022
Maximum number of persons or households permitted to occupy HMO under condition	ons of licence:
Households 5 Persons 5	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference numbe	r
Summary of conditions of licence	
June 1990 Conditions of incence	



#### Licence No.

#### 2017/03523/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 48 Over Street Brighton BN1 4EE

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
Mr Leo Horsfield, 15 Windlesh	am Road Brighton East Suss	ex BN1 3AG	
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, etc)		
Property Type = SHARED HO	USE, No of Units = 1, Occupa	ancy = 6, No of Storeys = 4	
Number of Rooms	Total Number of Roo	oms 7	
a) Sleeping 6	b) Living F	Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number Description	on	
a) Kitchen	2		
b) Bathrooms/Showers c) W.C.s	2 2		
o) vv.o.s			
Licence Details			
Commencement date:	23/11/2017	<b>Duration of licence:</b>	19/07/2022
Maximum number of person	s or households permitted	to occupy HMO under conditions	of licence:
		остану о	
Households 6	Persons 6		
		mal and and Tribunal	
Information referred to a	residential property tribu	mai or Lands Tribunai:	
None		Defe	
Decision of Tribunal		Reference number	
Summary of conditions of lie		S HMO Fire Deers 2 HMO Fire D	Nooro 2 LIMO
		5, HMO - Fire Doors 2, HMO - Fire D ure Mandatory conds, HMO - Gas M	

conds, HMO - Licensing Kitchen 1, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Works



#### Licence No.

#### 2017/03538/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 35 Chesham Road Brighton BN2 1NB

Ward

East Brighton

Name & Address of Licen	ce Holder		
Mrs Doreen Hills, 8 Whylands	Crescent Worthing BN13 3	HQ	
Name & Address of Perso	n Managing		
Duamanti: Daganintian			
Property Description	d UMO (No of storous sto)		
Short description of license			
Property Type = SHARED HO	USE, No of Units = 7, Occu	pancy = 7, No of Storeys = 4	
Number of Rooms	Total Number of Ro	ooms 8	
a) Sleeping 7	b) Living	Rooms	
· · · · · · · · · · · · · · · · · · ·	_		
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities	Number Descript	ion	
a) Kitchen	2		
) Bathrooms/Showers	2		
c) W.C.s	3		
_icence Details			
			_
Commencement date:	14/09/2017	<b>Duration of licence:</b>	26/06/2022
Maximum number of person	e or housaholds normitta	d to occupy HMO under conditions	of licence:
maximum number of person		a to occupy rimo under conditions	of ficerice.
Households 7	Persons 7		
		and and and Talamak	
nformation referred to a	residential property trib	unaror Lands Tribunai:	
None		D-f	
Decision of Tribunal		Reference number	
Summary of conditions of lie		do UMO. Euroituro Mondotory conde	NUMO Coo



#### Licence No.

#### 2017/03590/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

65 Ditchling Rise Brighton BN1 4QN

Ward

Preston Park

Name & Address of Licent			
Linda, Steve, Danielle & Lawre	nce Harmer-Strange, T	7/a Grosvenor Properties Tudor Grange	13 The Upper
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys,	etc)	
Property Type = SHARED HOL	JSE, No of Units = 1, C	Occupancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of	of Rooms 8	
a) Sleeping 7	b) Li	iving Rooms 1	
Number of Self Contained Fla	ats: 0	Number of Non Self Cont. Fl	ats: 1
Shared Amenities	Number Desc	cription	
a) Kitchen	2		
b) Bathrooms/Showers	3		
c) W.C.s	3		
Licence Details			
Commencement date:	08/01/2018	Duration of licence:	29/07/2022
Maximum number of persons	or households perm	nitted to occupy HMO under conditions	s of licence:
Households 7	Persons 7		
Information referred to a r	esidential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic HMO - Elec Mandatory conds,		MO - Fire Mandatory conds, HMO - Furn	iiture

HMO - Elec Mandatory conds, HMO - Fire Doors 3, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Kitchen 1, HMO - Repairs Ventilation 3, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/03600/HMO/PS

#### **REGISTER ENTRY FOR** (Address of licensed HMO)

1 St Leonards Road Brighton BN2 3AJ

Ward

Hanover And Elm Grove

Name & Address of Licer	ice Holder			
Mr Alfred Haagman, Meadowl	prook House Brook Street	Cuckfield RH17	5JJ	
Name & Address of Person	on Managing			
Hove Lets Ltd, C/o Parkers	Cornelius House 178-1	80 Church Road	Hove BN3 2DJ	
Daniel Daniel Co				
Property Description	d UMO (No of starous o	<b>1</b> 0)		
Short description of license		•	f Otana	
Property Type = SHARED HC	OSE, NO OF UNITS = 1, OC	cupancy = 6, No o	r Storeys = 3	
Number of Rooms	Total Number of	Rooms 6		
a) Sleeping	b) Livi	ng Rooms		
Number of Self Contained F	lats: 0	Number o	of Non Self Cont. Flat	s: 0
Shared Amenities a) Kitchen b) Bathrooms/Showers	Number Descr	iption		
c) W.C.s				
Licence Details				
			,	
Commencement date:	18/10/2013	Duratio	on of licence:	26/03/2018
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
Households 6	Persons 6			
Information referred to a	residential property tr	ibunal or Land	s Tribunal:	
illioilliation referred to a	rootaottaar proporty ti			
None				
			Reference number	

Summary of conditions of licence

HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Fire Test Certificates, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Kitchen 1, HMO - Licensing Kitchen 5, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/03601/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

9 St Martins Place Brighton BN2 3LE

Ward

Hanover And Elm Grove

Name & Address of Licence Holder	
Mr Alfred Haagman, Meadowbrook House Brook Street Cuckfield RH17 5JJ	
Name & Address of Person Managing	
Hove Lets Ltd, Parkers Cornelius House 178-180 Church Road Hove BN3 2DJ	
Pura un auto de Para actività de	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms Total Number of Rooms 5	
a) Sleeping 5 b) Living Rooms 1	
a, e.e., g. 100mg	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0	
Number of deli dontained riats.	
Shared Amenities Number Description	
a) Kitchen 1	
b) Bathrooms/Showers 1	
c) W.C.s	
License Detelle	
Licence Details	
Commencement date: 10/10/2017 Duration of licence: 26/07/202	2
Maximum number of persons or households permitted to occupy HMO under conditions of licence:	
Households 5 Persons 5	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of licence Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds,	



#### Licence No.

#### 2017/03620/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

67 Warleigh Road Brighton BN1 4NS

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder	
Linda, Steve, Danielle & Lawre	ence Harmer-Strange, T/a Grosvenor Properties Tudor Grange 13	The Upper
DRIVA BAVA BRIZ KIZD		
Name & Address of Perso	on Managing	
,		
Property Description		
Short description of license	d HMO (No of storeys, etc)	
Property Type = SHARED HO	USE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping 6	b) Living Rooms 1	
a) Siceping	b) Living Rooms	
Number of Self Contained F	lats: 0 Number of Non Self Cont. Flats	s: 1
Shared Amenities	Number Description	
<ul><li>a) Kitchen</li><li>b) Bathrooms/Showers</li></ul>	2 2	
c) W.C.s	2	
-,		
Licence Details		
Commencement date:	08/01/2018 Duration of licence:	29/08/2022
Maximum number of person	s or households permitted to occupy HMO under conditions o	of licence:
Households 6	Persons 6	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lie	conco	



#### Licence No.

#### 2017/03654/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

100 Bonchurch Road Brighton BN2 3PH

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder		
Millpepper Ltd, Mall House Th	e Mall Faversham ME13 8JL	-	
Name & Address of Perso	on Managing		
G4 Lets, 2 Hythe Road Brighton	on BN1 6JS		
Property Description			
Short description of license	d HMO (No of storeys, etc)		
Property Type = SHARED HO	USE, No of Units = 1, Occup	pancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Ro	oms 7	
a) Sleeping 6	b) Living		
a) olcoping	b) Living	TOOMS	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fl	ats: 0
Number of Sen Contained in	ats.	Number of Non Sen Cont. 11	ats.
Shared Amenities	Number Descripti	ion	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
License Betails			
Commencement date:	20/09/2017	<b>Duration of licence:</b>	27/07/2022
Maximum number of person	s or households normitted	to occupy HMO under condition	s of licence:
		to occupy rimo under condition	s of ficerice.
Households 6	Persons 6		
w	vooidontial maanautustuik	unal and anda Tubunal	
Information referred to a	residential property trib	unal or Lands Tribunal:	
None Decision of Tribunal		Reference number	
Decision of Tribunal		Keierence number	
Summary of conditions of lied HMO - Elec Mandatory conds,		ds, HMO - Furniture Mandatory cond	ds, HMO - Gas



#### Licence No.

#### 2017/03670/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

4 Coronation Street Brighton BN2 3AQ

Ward

Hanover And Elm Grove

Summary of conditions of licence



#### Licence No.

#### 2017/03746/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

307 Queens Park Road Brighton BN2 9XL

Ward

Hanover And Elm Grove

me & Address of Licer	nce Holder		
Nicholas Davey, Flat 37 Vi	ctory Mews The S	Strand Brighton East Sussex BN2 5XA	
me & Address of Pers	on Managing		
ndrick Property Services Li	mited, Carlton Hou	se 28-29 Carlton Terrace Brighton East Sussex	BN41 1UR
operty Description			
ort description of license	d HMO (No of sto	reys, etc)	
perty Type = SHARED HC	OUSE, No of Units =	= 6, Occupancy = 6, No of Storeys = 4	
mber of Rooms	Total Num	ber of Rooms 8	
	Total Hulli		
Sleeping 6		b) Living Rooms 1	
mber of Self Contained F	lats:	0 Number of Non Self Cont. Flats	s: <u> </u>
ared Amenities Kitchen	Number 2	Description	
Bathrooms/Showers	2		
W.C.s	2		
cence Details			
mmencement date:	10/10/201	7 Duration of licence:	02/08/2022
minorioomone dato.	10/10/201	Daration of modifice.	02/00/2022
ximum number of persor	ns or households	permitted to occupy HMO under conditions o	of licence:
ouseholds 6	Persons	6	
	. Greene		
formation referred to a	residential prop	erty tribunal or Lands Tribunal:	
ne			

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Other Fire Works



#### Licence No.

#### 2017/03750/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

35 Caledonian Road Brighton BN2 3HX

Ward

St. Peter's And North Laine

Name & Address of Licenc	e Holder	
	use 2 Ashford Road Brighton BN1 6LJ	
,	<u> </u>	
Name & Address of Person	Managing	
,		
Property Description		
Short description of licensed	HMO (No of storeys, etc)	
Property Type = SHARED HOU	SE, No of Units = 6, Occupancy = 6, No of Storeys = 4	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping 6	b) Living Rooms 1	
a) diceping	b) Living Rooms	
Number of Self Contained Fla	s: 0 Number of Non Self Cont. Flats:	0
Number of Sen Contained Fla	S. Number of Non Sen Cont. Hats.	0
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	6	
c) W.C.s	6	
Licence Details		
License Betails		
Commencement date:	21/09/2017 Duration of licence:	03/08/2022
Maximum number of persons	or households permitted to occupy HMO under conditions of lic	ence:
Households 6	Persons 6	
Information referred to a re	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lice	nce IMO - Fire Mandatory conds HMO - Furniture Mandatory conds HM	0 000



#### Licence No.

#### 2017/03782/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

18A Preston Road Brighton BN1 4QF

Ward

Preston Park

Name & Address of Licence Holder
Mr Ashley Bennett, 204 Church Road Hove BN3 2DJ
Name & Address of Person Managing
,
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3
Number of Rooms Total Number of Rooms 6
a) Sleeping 5 b) Living Rooms 1
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
Shared Amenities Number Description
a) Kitchen 1
b) Bathrooms/Showers 2 c) W.C.s 2
Licence Details
Commencement date: 09/11/2017 Duration of licence: 07/08/2022
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Households 5 Persons 5
Information referred to a residential property tribunal or Lands Tribunal:
Information referred to a residential property tribunal or Lands Tribunal:  None  Decision of Tribunal  Reference number



#### Licence No.

#### 2017/03791/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

22 Freshfield Street Brighton BN2 9ZG

Ward

Queen's Park

Name & Address of Licence Holder Christopher Walter & Anna Lawrence, Millstream Mill Lane Burley Hampshire BH24 4HR Name & Address of Person Managing	
Christopher Walter & Anna Lawrence, Millstream Mill Lane Burley Hampshire BH24 4HR	
lame & Address of Person Managing	
lame & Address of Person Managing	
G4 Lets, 2 Hythe Road Brighton BN1 6JS	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms Total Number of Rooms 7	
a) Sleeping b) Living Rooms 1	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats:	0
Shared Amenities Number Description	
a) Kitchen 2	
b) Bathrooms/Showers 5	
5) W.C.s 5	
icence Details	
Commencement date: 28/09/2017 Duration of licence: 08/08/2	2022
20/09/2017 Duration of ficence.	.022
Maximum number of persons or households permitted to occupy HMO under conditions of licence:	
La callada de la callada d	
Households 6 Persons 6	
nformation referred to a residential property tribunal or Lands Tribunal:	
nformation referred to a residential property tribunal or Lands Tribunal:	
Households 6 Persons 6  Information referred to a residential property tribunal or Lands Tribunal:  None  Decision of Tribunal Reference number	



#### Licence No.

#### 2017/03792/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

45 Beaconsfield Road Brighton BN1 4QH

Ward

Preston Park

Name & Address of Licence	e Holder	
Mr & Mrs Marcus Grimes, The S	Stables Park Farm Wheatsheaf Road Henfield BN5 9BA	
Name & Address of Person		
G4 Lets, 2 Hythe Road Brightor	1 BN1 6JS	
Durante Description		
Property Description	LIMO (No of storous etc.)	
Short description of licensed		
Property Type = SHARED HOU	JSE, No of Units = 1, Occupancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 9	
a) Sleeping 7	b) Living Rooms 1	
, . <b>.</b>	, <u> </u>	
Number of Self Contained Fla	ts: 0 Number of Non Self Cont. Flats	: 0
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Licence Details		
Commencement date:	08/01/2018 Duration of licence:	06/03/2022
Maximum number of nercens	or households permitted to occupy HMO under conditions o	f licence:
maximum number of persons	or nouseholds permitted to occupy rimo under conditions o	i licelice.
Households 7	Persons 7	
Information and		
	esidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lice		HMO Gas



#### Licence No.

#### 2017/03795/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

287 Queens Park Road Brighton BN2 9XL

Ward

Hanover And Elm Grove

Name & Address of Licence Holder		
Mr Ian Agnew, Oastlands View North Road Goudhurst Cranbrook Kent TN17 1JR		
Name & Address of Person Managing		
Mr Dan Lyons, 21 Bramber Road Seaford BN25 1AG		
Duamantis Danavintian		
Property Description Short description of licensed HMO (No of storeys, etc)		
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3		
Number of Rooms Total Number of Rooms 6		
a) Sleeping b) Living Rooms 1		
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats:	0	
Shared Amenities Number Description		
a) Kitchen 2		
b) Bathrooms/Showers 2 c) W.C.s 2		
c) W.C.s		
Licence Details		
Commencement date: 15/04/2015 Duration of licence: 0	03/09/2019	
Maximum number of persons or households permitted to occupy HMO under conditions of licence:		
Herreshelde 6 Bereens 6		
Households 6 Persons 6		
Information referred to a residential property tribunal or Lands Tribunal:		
None		
Decision of Tribunal Reference number		
Summary of conditions of licence HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas		



#### Licence No.

#### 2017/03835/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

10 Mayo Road Brighton BN2 3RJ

Ward

St. Peter's And North Laine

Name & Address of Licenc	e Holder	
Mr Peter Bell, 30 Hilda Vale Roa		
,		
Name & Address of Persor	n Managing	
DL Property Management, 2 As	hford Road Brighton BN1 6LJ	
Property Description		
Short description of licensed	HMO (No of storeys, etc)	
Property Type = SHARED HOU	SE, No of Units = 1, Occupancy = 6, No of Storeys = 4	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping	b) Living Rooms	
a) Sieeping	b) Living Rooms	
Number of Self Contained Fla	ts: 0 Number of Non Self Cont. Fla	its: 1
Number of Sen Contained Fia	ts. 0 Number of Non-Sen Cont. Fia	113.
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Linear Britaile		
Licence Details		
Commencement date:	22/09/2017 Duration of licence:	14/08/2022
Maximum number of persons	or households permitted to occupy HMO under conditions	of licence
		or noonoo.
Households 6	Persons 6	
Information referred to a re	esidential property tribunal or Lands Tribunal:	
None	sadenda property tribunar or Lands Tribunal.	
Decision of Tribunal	Reference number	
Summary of conditions of lice		



# Licence No.

#### 2017/03916/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

129 Bevendean Crescent Brighton BN2 4RE

Ward

Moulsecoomb And Bevendean

Name & Address of Licen	ce Holder		
Mr David Goss, 3 Kippens Lan	e Cowfold Road West G	Grinstead West Sussex RH13 8HY	
Name of Address of Barre	a Managhan		
Name & Address of Perso	<u> </u>		
John Hilton Limited, 127 Lewe	s Road Brighton BN2 3L	G	
Property Description			
Short description of licensed	HMO (No of storeys	etc)	
•		ccupancy = 5, No of Storeys = 3	
Froperty Type – STIANED TO	OSE, NO OF OTHES = 1, OF	ccupancy – 5, No or Storeys – 5	
Number of Rooms	Total Number of	f Rooms 5	
a) Sleeping 5	b) Liv	ring Rooms 1	
Number of Self Contained FI	ats: 0	Number of Non Self Cont. Flat	:s: 0
Shared Amenities	Number Desc	ription	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s			
Licence Details			
		7	
Commencement date:	04/11/2016	Duration of licence:	27/06/2021
Maximum number of person	s or households permi	tted to occupy HMO under conditions	of licence:
Households 5	Persons 5	٦	
nousellolus 5	reisons 5		
Information referred to a	residential property t	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
HMO - Gas Mandatory conds,	atory conds, HMO - Fire HMO - Property Chges I	Mandatory conds, HMO - Furniture Mand Mandatory conds, HMO - Property Maint	Mandatory

Repairs



#### Licence No.

#### 2017/03932/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

23 Viaduct Road Brighton BN1 4NB

Ward

St. Peter's And North Laine

Name & Address of Licence	Holder		
Mr Sam Ghibaldan, 28A Royal Ci			
Name & Address of Person	Managing		
Brand Vaughan Ltd, 117-118 We	stern Road Hove East Su	ssex BN3 1DB	
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Occup	pancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Ro	oms 6	
a) Sleeping	b) Living	Rooms	
Normalis and Colf Countries of Florie		North an of New Oalf Court Flat	
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities	Number Descripti	on	
a) Kitchen	200011pt		
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	25/02/2016	Duration of licence:	01/12/2020
			0171272020
Maximum number of persons of	r households permitted	to occupy HMO under conditions	of licence:
Households 5 P	ersons 5		
lusta a ti a ua sta a l ta	:	unal and anala Tribunal	_
Information referred to a res	idential property tribi	unal or Lands Tribunal:	
None		Defense and the second of	
Decision of Tribunal		Reference number	
O			

Summary of conditions of licence



#### Licence No.

#### 2017/03948/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

39 Queens Park Road Brighton BN2 0GJ

Ward

Queen's Park

Name & Address of Lice	nce Holder	
	Park Road Wimbledon SW19 8JQ	
<u> </u>		
Name & Address of Pers	on Managing	
Ms Jenny Hau, 24-26 Meeting	House Lane Brighton East Sussex BN1 1HB	
Property Description		
Short description of license	d HMO (No of storeys, etc)	
Property Type = SHARED HC	OUSE, No of Units = 5, Occupancy = 5, No of Storeys = 4	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 5	b) Living Rooms 1	
, , ,	, , ,	
Number of Self Contained F	lats: 0 Number of Non Self Con	nt. Flats:
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	2	
c) W.C.s	3	
Licence Details		
Commencement date:	05/02/2018 Duration of licence:	20/08/2022
Massimos mountains of manage	and the control of th	itions of linears.
Maximum number of persoi	ns or households permitted to occupy HMO under condi	itions of licence:
Households 5	Persons 5	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference numl	ber
Summary of conditions of li	cence  HMO - Fire Mandatory conds HMO - Furniture Mandatory	conds HMO - Gas



#### Licence No.

#### 2017/04045/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

24 Normanton Street Brighton BN2 3AT

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder		
Mr Phil Donovan, Sunset Dow	n Henfield Road Small Do	ole West Sussex BN5 9XJ	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, e	etc)	
Property Type = SHARED HO	USE, No of Units = 1, Oc	ccupancy = 6, No of Storeys = 3	
Number of Deems	Tatal Novebox of	Baama 7	
Number of Rooms	Total Number of		
a) Sleeping 6	b) Livi	ing Rooms 1	
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Fla	ats: 1
Shared Amenities	Number Descr	iption	
a) Kitchen	2		
b) Bathrooms/Showers c) W.C.s	2		
0) **.0.5			
Licence Details			
		1	
Commencement date:	23/11/2017	Duration of licence:	25/07/2022
Maximum number of person	s or households permit	ted to occupy HMO under conditions	s of licence:
•	·	· ·	
Households 6	Persons 6		
Information referred to a	rosidontial proporty t	ribunal or Lands Tribunal:	
Mone	residential property ti	nbunai or Lanus Imbunai.	
None Decision of Tribunal		Reference number	
		Neierence number	
Summary of conditions of lie HMO - Flec Mandatory conds	cence HMO - Fire Mandatory c	onds, HMO - Furniture Mandatory cond	ls HMO - Gas
= 100 manaator, 00 mao,	The managery o	and, in a managery conc	,



#### Licence No.

#### 2017/04049/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

121B St James's Street Brighton BN2 1TH

Ward

Queen's Park

Information referred to a residential property tribunal or Lands Tribunal:	
Maximum number of persons or households permitted to occupy HMO under condit	ions of licence:
Commencement date: 20/11/2017 Duration of licence:	05/07/2021
Licence Details	
Licence Detaile	
c) W.C.s 5	
b) Bathrooms/Showers 5	
Shared Amenities Number Description a) Kitchen 2	
Number of Self Contained Flats: 0 Number of Non Self Cont	t. Flats: 1
a) Sleeping b) Living Rooms 1	
Number of Rooms Total Number of Rooms 10	
Troperty Type – Office Priodoc, No of Office – 1, Occupancy – 0, No of Otology – 0	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Short description of licensed HMO (No of storeys, etc)	
Property Description	
,	
Name & Address of Person Managing	
Mr Liasos Stavrou, 121B St James Street Brighton BN2 1TH	
Name & Address of Licence Holder	

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Work



#### Licence No.

#### 2017/04087/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

13 The Drive Hove BN3 3JE

Ward

Central Hove

Name & Address of Licence	e Holder	
Mr Geoffrey Fisher, 2 Kelso Clos	se Sompting BN15 0DZ	
Name & Address of Person		
Town & Country Property Service	es, 81 Church Road Hove BN3 2BB	
Property Description		
Short description of licensed	HMO (No of storeys, etc)	
Property Type = BEDSIT, No of	Units = 13, Occupancy = 13, No of Storeys = 5	
Number of Rooms	Total Number of Rooms 13	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flat	Number of Non Self Cont. Flats:	0
Oleane d. Americkia	North an Description	
Shared Amenities a) Kitchen	Number Description 7	
b) Bathrooms/Showers	2	
c) W.C.s	2	
_		
Licence Details		
Common common to detail	A7/04/2040 Duration of linear	27/06/2022
Commencement date:	17/01/2018 Duration of licence:	27/06/2022
Maximum number of persons	or households permitted to occupy HMO under conditions of	licence:
Households 13	Persons 13	
nousellolus 13	reisons	
Information referred to a re	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lice Electrical Works, HMO - Elec Ma	ence andatory conds, HMO - Fire Mandatory conds, HMO - Furniture Ma	andatory

Electrical Works, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Heating 5, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Other Fire Works



#### Licence No.

#### 2017/04132/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

33 Blaker Street Brighton BN2 0JJ

Ward

Queen's Park

		114.4	33.73.7 4.11
Name & Address of Lice	nce Holder		
Linda, Steve, Danielle & Law Drive Hove BN3 6CB	rence Harmer-Strange, T/a G	rosvenor Properties Tudor Grange	13 The Upper
Name & Address of Pers	on Managing		
,			
Property Description			
	ed HMO (No of storeys, etc)		
Property Type = SHARED Ho	OUSE, No of Units = 1, Occup	pancy = 6, No of Storeys = 3	
Number of Rooms a) Sleeping 6	Total Number of Ro		
Number of Self Contained I	Flats: 0	Number of Non Self Cont. F	lats: 1
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Descript 2 2 2 2	ion	
Licence Details			
Commencement date:	29/11/2017	Duration of licence:	06/09/2022
Maximum number of perso	ns or households permitted	I to occupy HMO under condition	ns of licence:
Households 6	Persons 6		
Information referred to a	residential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	s, HMO - Fire Doors 8, HMO -	- Fire Mandatory conds, HMO - Fur	

HMO - Elec Mandatory conds, HMO - Fire Doors 8, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Bedrooms, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other fire works



#### Licence No.

#### 2017/04133/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

12 Campbell Road Brighton BN1 4QD

		Ward	Preston	Park
Name of Add	- Halden			
Name & Address of Licen		Crosvonor Proportion	Tudor Crango 12 Th	uo Unnor
Linda, Steve, Danielle, & Lawr	ence narmer-strange, 17a	Grosvenor Properties	rudor Grange 13 11	e Opper
Nama <sup>8</sup> Address of Davas	n Managing			
Name & Address of Perso	n wanaging			
,				
Property Description				
Short description of licensed	HMO (No of storeys, etc	:)		
Property Type = SHARED HO	-		rove = 3	
Floperty Type – SHARED HO	JSE, NO OF OTHES - 1, OCC	upancy – 5, No 01 310	ieys – 3	
Number of Rooms	Total Number of R	Rooms 6		
a) Sleeping 5	b) Livin	g Rooms 1		
Number of Self Contained FI	ats: 0	Number of No	n Self Cont. Flats:	0
Shared Amenities	Number Descrip	otion		
a) Kitchen	1			
b) Bathrooms/Showers	2			
c) W.C.s	2			
Licence Details				
Liconico Botano				
Commencement date:	05/12/2017	Duration of	licence:	09/09/2022
Maximum number of person	s or housaholds normitte	nd to occupy HMO u	ndor conditions of li	conco:
Maximum number of person	s of flousefloids perfillitte	ed to occupy rimo di	idei conditions of i	cence.
Households 5	Persons 5			
Information referred to a I	esidential property tri	bunal or Lands Tri	bunal:	
None				
Decision of Tribunal		Refer	ence number	
Summary of conditions of lice HMO - Elec Mandatory conds.		nds, HMO - Furniture	Mandatory conds. HN	ЛО - Gas



#### Licence No.

#### 2017/04144/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

124 Osborne Road Brighton BN1 6LU

Ward

**Preston Park** 

Name & Address of Licen	ce Holder		
		erwalton Benerloch Oban Argyll PA37 19	SA
· · · · · ·		٠,	
Name & Address of Perso	n Managing		
Harringtons Lettings, 109 Wes	tern Road Hove BN3 1F	A	
Property Description			
Short description of licensed	d HMO (No of storeys,	etc)	
Property Type = SHARED HO	USE, No of Units = 1, O	ccupancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of	f Rooms 8	
a) Sleeping 7	D) LIV	ring Rooms 1	
N		N	
Number of Self Contained FI	ats: 0	Number of Non Self Cont. Fla	its: 0
Shared Amenities	Number Desc	windia.	
a) Kitchen	2 Desc	ription	
b) Bathrooms/Showers	2		
c) W.C.s	2		
0) **.0.3			
Licence Details			
	2011112012	7	20//0/2020
Commencement date:	30/11/2017	Duration of licence:	03/10/2022
Maximum number of person	s or households permi	tted to occupy HMO under conditions	of licence:
Households 7	Persons 7	1	
Information referred to a I	residential property t	tribunal or Lands Tribunal:	
Information referred to a R	residential property t	ribunal or Lands Tribunal:	
	residential property t	ribunal or Lands Tribunal:  Reference number	



#### Licence No.

#### 2017/04161/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

16 Park Crescent Road Brighton BN2 3HT

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder			
Mr Stuart Strachan, 18 Aymer	Road Hove BN3 4	-GA		
Name & Address of Perso	n Managing			
D L Property Services Ltd, Th	e Old Warehouse	2 Ashford Ro	oad Brighton BN1 6LJ	
Property Description				
Short description of licensed	HMO (No of stor	reys, etc)		
Property Type = SHARED HO	USE, No of Units =	= 1, Occupano	cy = 6, No of Storeys = 4	
			_	
Number of Rooms	Total Num	ber of Room		
a) Sleeping 6		b) Living Roo	oms 1	
				,
Number of Self Contained Fl	ats:	0	Number of Non Self Cont. Flats:	0
Shared Amenities	Number	Description		
a) Kitchen	2			
b) Bathrooms/Showers c) W.C.s	3			
c) vv.o.s				
Licence Details				
Commencement date:	09/11/201	7	Duration of licence:	06/09/2022
Maximum number of person	s or households	permitted to	occupy HMO under conditions of li	icence:
Households 6	Persons	6		
nouseriolus	Persons	O		
Information referred to a	residential prop	erty tribuna	al or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of lic HMO - Elec Mandatory conds,		atory conds, I	HMO - Furniture Mandatory conds, HN	MO - Gas



#### Licence No.

#### 2017/04164/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

26 Park Street Brighton BN2 0BS

	Ward	Queen's Park	
Name & Address of Licence Ho	Ndor		
	onder armer-Strange, T/a Grosvenor Propert	ies Tudor Grange 13 Th	ne Upper
Drive Hove PNS 6CD	J /		
Name & Address of Person Ma	naging		
1			
Property Description			
Short description of licensed HMC	(No of storeys, etc)		
Property Type = SHARED HOUSE, I	No of Units = 1, Occupancy = 5, No of	Storeys = 3	
Number of Rooms	Total Number of Rooms 6		
a) Sleeping 5	b) Living Rooms 1		
Number of Self Contained Flats:	0 Number of	Non Self Cont. Flats:	1
Shared Amenities Nun	nber Description		
-,	1		
,	2		
c) w.c.s			
Licence Details			
Commonount data:	22/44/2047 <b>D</b> uration	of lineman.	00/00/2022
Commencement date:	23/11/2017 <b>Duration</b>	of licence:	09/09/2022
Maximum number of persons or h	ouseholds permitted to occupy HMC	under conditions of	licence:
Households 5 Pers	ons 5		
Information referred to a reside	ential property tribunal or Lands	Tribunal:	
None			
Decision of Tribunal	Re	ference number	
Summary of conditions of licence HMO - Elec Mandatory conds, HMO	- Fire Mandatory conds, HMO - Furnitu	ire Mandatory conds. H	MO - Gas



#### Licence No.

#### 2017/04165/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

16 Argyle Road Brighton BN1 4QA

Ward

Preston Park

Name & Address of Licen	ice Holder		
	ence Harmer-Strange, T/a	Grosvenor Properties Tudor Grange 13	3 The Upper
Drivo Hovo BN3 6CD			
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, etc	;)	
Property Type = SHARED HO	USE, No of Units = 1, Occi	upancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of R	Rooms 7	
a) Sleeping 6	b) Livin	g Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flat	ts: 1
Shared Amenities	Number Descrip	otion	
a) Kitchen	2 2		
b) Bathrooms/Showers			
c) W.C.s	2		
Licence Details			
Commencement date:	29/11/2017	Duration of licence:	06/09/2022
Maximum number of person	s or households permitte	ed to occupy HMO under conditions	of licence:
Haveahalda C	<b>D</b>		
Households 6	Persons 6		
Information referred to a	residential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie	cence		

Electrical Works, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Bedrooms, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Other fire works



#### Licence No.

#### 2017/04169/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

60 Osborne Road Brighton BN1 6LQ

Ward

Preston Park

		vvaru Fies	OII Faik
Name & Address of Lice	nce Holder		
Mr David Christopher Ashley	Stones, Inverlochan Letter	walton Benerloch Oban Argyll PA37 1S	A
Name & Address of Pers	on Managing		
Harringtons Lettings, 109 We	stern Road Hove BN3 1FA		
Property Description			
Short description of license	ed HMO (No of storevs, e	tc)	
-		cupancy = 7, No of Storeys = 3	
Troperty Type - Orlinited The	700E, 140 01 011113 - 1, 000	supurity = 7, No or storeys = 5	
Number of Rooms	<b>Total Number of</b>	Rooms 8	
a) Sleeping 7	b) Livir	ng Rooms 1	
Number of Self Contained F	Flats: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities	Number Descri	ption	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s			
Licence Details			
Commencement date:	30/11/2017	Duration of licence:	03/10/2022
Johnnen Coment date.	00/11/2017	Burdion of nechec.	00/10/2022
Maximum number of perso	ns or households permitt	ed to occupy HMO under conditions	of licence:
Households 7	Persons 7		
Information referred to a	residential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of I	icence	anda IIMO Familiana Mandatana and	- 11140 - 0-1



#### Licence No.

#### 2017/04174/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

17 Margaret Street Brighton BN2 1TS

Ward

Queen's Park

Name & Address of Licen	ice Holder		
Mr Leo Horsfield, 15 Windlesh	am Road Brighton East	Sussex BN1 3AG	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys,	etc)	
Property Type = SHARED HO	USE, No of Units = 1, C	Occupancy = 6, No of Storeys = 4	
Number of Rooms	Total Number of	of Rooms 7	
a) Sleeping 6	b) Li	iving Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number Desc	cription	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Licence Details			
Commencement date:	02/01/2018	Duration of licence:	06/09/2022
		_	
Maximum number of person	s or households perm	itted to occupy HMO under conditions of I	icence:
Households 6	Persons 6		
		_	
Information referred to a	residential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	conco		
Summary of conditions of lice HMO - Elec Mandatory conds,		ems 3, HMO - Fire Blanket, HMO - Fire Doors	s 2, HMO

HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 3, HMO - Fire Blanket, HMO - Fire Doors 2, HMO - Fire Doors 3, HMO - Fire Doors 5, HMO - Fire Emergency Lighting 1, HMO - Fire Glazing / Windows 3, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Kitchen 1, HMO - Licensing Kitchen 6, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Other Fire Works





#### Licence No.

#### 2017/04175/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

38 Over Street Brighton BN1 4EE

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
Mr Leo Horsfield, 15 Windlesh	am Road Brighton East S	Sussex BN1 3AG	
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, e	rtc)	
Property Type = SHARED HO	USE No of Units = 1 Oc	cupancy = 6, No of Storeys = 4	
Troporty Type Office The	1, 00	ouparioy 6, 140 or eteroyo	
Number of Rooms	Total Number of	Rooms 7	
a) Sleeping 6	b) Liv	ing Rooms	
, , , ,	,		
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flat	ts: 1
Number of Sen Contained F	dis. 0	Number of Non Sen Cont. Flat	15.
Ol I A 111	Nl.		
Shared Amenities a) Kitchen	Number Descr	iption	
b) Bathrooms/Showers	2		
c) W.C.s	3		
0, 11.0.0			
Licence Details			
Commencement date:	23/11/2017	Duration of licence:	06/09/2022
Maximum number of nerse	e or households name!	ted to occupy HMO under conditions	of licence:
maximum number of person	s or nousenoids permit	ted to occupy mino under conditions	of incerice.
Households 6	Persons 6		
Information referred to a	residential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	cence		
Samming of Somulations of the	501100		

HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 3, HMO - Fire Doors 2, HMO - Fire Doors 3, HMO - Fire Doors 5, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/04183/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 31 Western Road Hove BN3 1AF

Ward

Brunswick And Adelaide

Name & Address of Licen	ce Holder		
Mr Jonathan Brand, Merville T	ne Street Poynings Brigh	ton West Sussex BN45 7AQ	
Name & Address of Perso	n Managing		
Property Description			
Short description of licensed	HMO (No of storevs, et	tc)	
-	-	cupancy = 5, No of Storeys = 2	
Topolity Type Climite E TTO	, , , , , , , , , , , , , , , , , , ,	supuney 6, 116 of closelye 2	
Number of Rooms	Total Number of	Rooms 6	
a) Sleeping 5	b) Livir	ng Rooms 1	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities  a) Kitchen b) Bathrooms/Showers	Number Descri	ption	
c) W.C.s	1		
Licence Details			
Commencement date:	20/11/2017	Duration of licence:	04/09/2022
Maximum number of person	s or households permitt	ed to occupy HMO under conditions	of licence:
-	-		
Households 5	Persons 5		
nformation referred to a <b>i</b>	residential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic		Mandatory condo HMO. Eurnituro Mon	idatory conds



#### Licence No.

#### 2017/04196/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

111 Whippingham Road Brighton BN2 3PF

Ward

Hanover And Elm Grove

Name & Address of Licence	ce Holder		
Mr Michael Todaro, 10 Tredcro			
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOL		ancv = 5. No of Storevs = 3	
	, , , , , , , , , , , , , , , , , , ,		
Number of Rooms	Total Number of Roo	oms 6	
a) Sleeping 5	b) Living R	Rooms 1	
		_	
Number of Self Contained Fla	ats: 0	Number of Non Self Cont. Flats	s: 1
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description 1 1 2	n	
Licence Details			
Commencement date:	16/02/2018	Duration of licence:	21/05/2022
Maximum number of persons	or households permitted t	to occupy HMO under conditions o	of licence:
Households 5	Persons 5		
Information referred to a r	esidential property tribu	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic		Mandatory conds. HMO. Eurnituro N	Aandaton,

conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/04197/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

96 Bonchurch Road Brighton BN2 3PH

Ward

Hanover And Elm Grove

Name & Address of Licence	e Holder		
Mr Darren Rix, 53 Woodruff Ave	enue Hove BN3 6PH		
Name & Address of Person	n Managing		
	ited, Amelia House Cres	cent Road Worthing West Sussex Unite	d Kingdom
DN11 10D			
Property Description			
Short description of licensed	HMO (No of storeys, et	c)	
Property Type = SHARED HOL	ISE No of Units = 1 Occ	upancy = 5. No of Storeys = 3	
		apaney e, ite er etereje e	
Number of Rooms	Total Number of I	Rooms 5	
a) Sleeping 5	b) Livir	g Rooms 1	
,	,		
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Flat	:s: 0
Number of Sen Contained Fla	ιs. 0	Number of Non Sen Cont. Flat	.s. U
<b>2</b> 1 14 14			
Shared Amenities	Number Descri	otion	
a) Kitchen b) Bathrooms/Showers	1		
c) W.C.s	1		
o) 11.0.0	<u> </u>		
Licence Details			
Commencement date:	14/04/2014	Duration of licence:	24/04/2018
Maximum number of persons	or households permitt	ed to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Information referred to a re	esidential property tr	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
0 1111			
Summary of conditions of lice Fire Alarms, HMO - Flec Manda		Mandatory conds, HMO - Furniture Man	datory conds
		andatory conds. HMO - Property Maint	



#### Licence No.

#### 2017/04199/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

121 Islingword Road Brighton BN2 9SG

Ward

Hanover And Elm Grove

N. 0 4 11 51:		
Name & Address of Lice		
Lindene GB Promotion Ltd, 12	2 Franklin Road Portslade BN41 1AF	
Nama <sup>9</sup> Address of Dava	on Managing	
Name & Address of Pers		
Mr Kevin Keehan, 121 Islingw	ord Road Brighton BN2 95G	
Property Description		
Short description of license	d HMO (No of storevs. etc)	
•	DUSE, No of Units = 6, Occupancy = 6, No of Storeys = 3	
Troperty Type – OFFAILED TIC	TOOL, NO OF OTHER - 0, Occupancy - 0, NO OF Otorcys - 5	
Number of Rooms	Total Number of Rooms 8	
a) Sleeping 6	b) Living Rooms 1	
Number of Self Contained F	lats: 0 Number of Non Self Cont. Flats:	1
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Commencement date:	16/02/2018 Duration of licence:	10/09/2022
Maximum number of persor	ns or households permitted to occupy HMO under conditions of li	cence:
Households 6	Persons 6	
5		
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of li HMO - Elec Mandatory conds	cence , HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HM	ЛО - Gas



#### Licence No.

#### 2017/04242/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

75 Brading Road Brighton BN2 3PE

Ward

Hanover And Elm Grove

Name & Address of Licence			
Mr Sanjeev Dhuna, 48 Woodlar	d Drive Hove BN3 6DL		
Name & Address of Persor	n Managing		
S J Lettings Ltd, 52 Lewes Roa	d Brighton BN2 3HW		
Property Description	LIMO (No of stanson at	-1	
Short description of licensed		•	
Property Type = SHARED HOL	SE, No of Units = 1, Occ	upancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of F	Rooms 6	
a) Sleeping 6	b) Livin	g Rooms 1	
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Fla	ats: 1
Shared Amenities	Number Descrip	otion	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	3		
Licence Details			
Commencement date:	02/11/2017	Duration of licence:	17/09/2022
Commencement date.	02/11/2017	burduon of neence.	17703/2022
Maximum number of persons	or households permitte	ed to occupy HMO under conditions	s of licence:
Households 6	Persons 6		
Information referred to a re	esidential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice HMO - Elec Mandatory conds, I		nds, HMO - Furniture Mandatory cond	ls, HMO - Gas



#### Licence No.

#### 2017/04254/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

27 Reading Road Brighton BN2 5NE

Ward

East Brighton

		•
Name & Address of Licence Holder		
Ms Helen Bayliss, 11 Woodside Avenue Brighton BN1 5NF		
Name & Address of Person Managing		
Sure Property Solutions Limited, 31 Upper St James Street Brighton B	N2 1JN	
Property Description		
Short description of licensed HMO (No of storeys, etc)		
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, N	o of Storeys = 3	
N. J. (B		
Number of Rooms Total Number of Rooms 6		
a) Sleeping b) Living Rooms	1	
Number of Self Contained Flats: 0 Numb	er of Non Self Cont. Flats	: 0
Shared Amenities Number Description		
a) Kitchen 1		
b) Bathrooms/Showers 2		
c) W.C.s		
Licence Details		
Licence Details		
Commencement date: 07/12/2017 Dura	ation of licence:	12/09/2022
Maximum number of persons or households permitted to occupy	HMO under conditions of	f licence:
Households 5 Persons 5		
Information referred to a residential property tribunal or La	nds Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence		
HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - F	urniture Mandatory conds.	HMO - Gas



#### Licence No.

#### 2017/04281/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

54 Baden Road Brighton BN2 4DP

Ward

Moulsecoomb And Bevendean

Name & Address of Licen			
Mr Marius Foster, 5 Mulberry C	lose Brighton BN1 6QE		
Name & Address of Perso	n Managing		
John Hilton LTD, 127 Lewes R	oad Brighton BN2 3LG		
Property Description			
Short description of licensed	। । HMO (No of storeys, є	etc)	
•		ccupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of	f Rooms 7	
a) Sleeping 6	b) Liv	ring Rooms 1	
Number of Self Contained Fla	ats: 0	Number of Non Self Cont. Fla	ats: 1
Shared Amenities	Number Descr	ription	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	31/10/2017	Duration of licence:	14/09/2022
Maximum number of persons	s or households permit	tted to occupy HMO under conditions	s of licence:
Households 6	Persons 6		
Information referred to a r	esidential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic HMO - Elec Mandatory conds.		conds. HMO - Furniture Mandatory cond	ls. HMO - Gas



#### Licence No.

### 2017/04297/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

345 Hangleton Road Hove BN3 7LQ

Ward

Hangleton And Knoll

Name & Address of Licen	ce Holder		
Mr Jerjes Philips, The Bungald	ws 11 Hangleton La	ane Hove BN3 8EB	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of license	d HMO (No of store)	ys, etc)	
Property Type = Not Assigned	, No of Units = 1, Oc	cupancy = 5, No of Storeys = 3	
1 7 71	,	,	
Number of Rooms	Total Number	er of Rooms 6	
a) Sleeping 5	b)	) Living Rooms 1	
Number of Self Contained Fl	ats:	0 Number of Non Self Cont. Flats:	0
Shared Amenities	Number De	escription	
a) Kitchen	1	550 <b>p</b> 5	
b) Bathrooms/Showers	2		
c) W.C.s	3		
Licence Details			
0	07/40/0047	Donation of Bounces	40/00/0000
Commencement date:	07/12/2017	Duration of licence:	13/09/2022
Maximum number of person	s or households pe	ermitted to occupy HMO under conditions of	licence:
	_		
Households 5	Persons 5		
Information referred to a	recidential proper	ety tribunal ar Landa Tribunal	
	residentiai proper	rty tribunal or Lands Tribunal:	
None		<b>D</b> .6	
Decision of Tribunal		Reference number	
	latory conds, HMO -	Fire Mandatory conds, HMO - Furniture Mandat ges Mandatory conds, HMO - Property Maint Ma	



#### Licence No.

#### 2017/04298/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

2 Ewhurst Road Brighton BN2 4AJ

Ward

Moulsecoomb And Bevendean

Name & Address of Licen	ce Holder		
Ms Jennifer Ann Forbes, Heat	nerlands Cansiron Lane Ashurst Wo	ood East Grinstead RH19 3SD	
Name & Address of Perso	n Managing		
MTM Property Services Ltd, 10	08A Lewes Road Brighton BN2 4AE		
Property Description			
Short description of licensed	-		
Property Type = SHARED HO	USE, No of Units = 5, Occupancy =	5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms	7	
a) Sleeping 5	b) Living Rooms	1	
	2, <u>-</u> g		
Number of Self Contained Fl	ats: 0 N	umber of Non Self Cont. Flats:	1
Trainibor of Con Contained 1		ambor of iton con contain ato.	•
Shared Amenities	Number Description		
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Licence Details			
Commencement date:	16/02/2018	Duration of licence:	18/09/2022
Maximum number of person	s or households permitted to occ	eury HMO under conditions of I	iconco:
maximum number of person	s or nousenolus permitted to occ	apy nino under conditions of i	icerice.
Households 5	Persons 5		
Information referred to a	vocidontial nyonomby tuiby melo	r I anda Tribunal	
	residential property tribunal o	r Lanus Tribunai:	
None  Decision of Tribunal		Reference number	
		Reference number	
Summary of conditions of lie		S. E	MO 0



#### Licence No.

#### 2017/04301/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

37 Over Street Brighton BN1 4EE

Ward

St. Peter's And North Laine

Name & Address of Licence Holder	
Messrs Alan & Simon Bishop, 92 Central Road Drayton Hants PO6 1QX	
Name & Address of Person Managing	
Q Lets, Maytree House Meres Lane Cross In Hand Heathfield TN21 0TZ	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 6, Occupancy = 6, No of Storeys = 4	
Number of Rooms Total Number of Rooms 7	
a) Sleeping b) Living Rooms 1	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flat	s: 1
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s  Number  2  3  3	
Licence Details	
Commencement date: 14/02/2018 Duration of licence:	04/07/2022
Maximum number of persons or households permitted to occupy HMO under conditions	of licence:
Households 6 Persons 6	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of licence HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds	, HMO - Gas



#### Licence No.

#### 2017/04351/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

128 Coombe Road Brighton BN2 4EE

Ward

Moulsecoomb And Bevendean

Name & Address of Licen			
Mr Mark Haskett, 29 Quarry B	ank Tonbridge Kent TN9	2QZ	
Name O Address of Barre	Managaran		
Name & Address of Person			
Dan Lyons, 74 Lewes Road B	righton BN2 3HZ		
Property Description			
Short description of license	d HMO (No of storeys, e	tc)	
-	-	•	
Property Type = SHARED HO	USE, NO OF OTHER = 1, OC	cupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 7	
a) Sleeping 6	b) Livi	ng Rooms 1	
, . <del>.</del>	,		
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	its: 0
	0		
Shared Amenities	Number Descr	iption	
a) Kitchen	2		
b) Bathrooms/Showers	3		
c) W.C.s	3		
Linna Braile			
Licence Details			
Commencement date:	13/12/2017	Duration of licence:	18/09/2022
Maximum number of person	s or households permit	ted to occupy HMO under conditions	of licence:
Households 6	Persons 6		
Information referred to a	residential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie	cence		



#### Licence No.

#### 2017/04372/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

39 Caledonian Road Brighton BN2 3HX

Ward

St. Peter's And North Laine

Name & Address of Licence	e Holder		
Mr Mark Waters, 5 Herbert Road		BN1 6PB	
Name & Address of Person	Managing		
Kendrick Property Services Ltd,	10-12 Lewes Road Brig	hton BN2 3HP	
Property Description			
Short description of licensed I	•	•	
Property Type = SHARED HOUS	SE, No of Units = 1, Occ	cupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 6	
a) Sleeping 5	b) Livi	ng Rooms 1	
J	- ,	<u> </u>	
Number of Self Contained Flat	:s: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number Descri	ption	
a) Kitchen	1	•	
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Licence Details			
Commencement date:	31/10/2017	Duration of licence:	07/09/2022
Maximum mumbay of manage	- " b b - l d	to d to a community of the conditions	of linears.
waximum number of persons	or nousenoids permitt	ted to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Information referred to a re	sidential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	IMO - Fire Blanket, HM0	D - Fire Mandatory conds, HMO - Furnit	

HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Steps etc 10, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Works



#### Licence No.

#### 2017/04382/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 61 Islingword Street Brighton BN2 9US

Ward

Hanover And Elm Grove

Name & Address of Licence Holder
Mr Thomas Carroll, 12 Franklin Road Portslade East Sussex BN41 1AF
Name & Address of Person Managing
Mr John Standing, 12 Franklin Road Portslade East Sussex BN41 1AF
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3
Number of Rooms Total Number of Rooms 6
a) Sleeping b) Living Rooms
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
Shared Amenities Number Description
a) Kitchen
b) Bathrooms/Showers
c) W.C.s
Licence Details
Commencement date: 17/08/2016 Duration of licence: 17/05/2021
Maximum number of negrous or households negroited to account LIMO under conditions of licenses.
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Households 6 Persons 6
Information referred to a residential property tribunal or Lands Tribunal:
None
Decision of Tribunal Reference number
Summary of conditions of licence

Summary of conditions of licence



#### Licence No.

#### 2017/04419/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 4 St Martins Street Brighton BN2 3HJ

Ward

St. Peter's And North Laine

Name & Address of Licence	Holder		
Mrs Fran Hopkins, Broom Bank S	Sandy Lane Little Bealin	gs Suffolk Woodbridge IP13 6LW	
Name & Address of Person	Managing		
MTM Property Services Ltd, Ursa	Court 108A Lewes Roa	ad Brighton BN2 4AE	
Property Description			
Short description of licensed H	-		
Property Type = Not Assigned, N	o of Units = 1, Occupand	cy = 6, No of Storeys = 4	
Number of Rooms	Total Number of R	cooms 6	
a) Sleeping	b) Livino	g Rooms	
-,,	,		
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Flat	s: 0
			<u> </u>
Shared Amenities	Number Descrip	otion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	21/06/2016	<b>Duration of licence:</b>	17/12/2020
Maximum number of persons of	or households nermitte	ed to occupy HMO under conditions o	of licence:
		to occupy rimo under conditions (	or needlee.
Households 6 P	ersons 6		
Information referred to a re-	idential present this	humal and a Tribunal	
Information referred to a res	sidential property trii	ounal or Lands Tribunal:	
None Decision of Tribunal		Reference number	
Decision of Tribunal		Reference number	
Summary of conditions of licer	ice		



#### Licence No.

#### 2017/04458/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

10 Upper Hollingdean Road Brighton BN1 7GA

Ward

Hollingdean And Stanmer

Name & Address of Licen	ce Holder		
Mr & Mrs H W & A C Cash, 27	Crescent Road Burgess	Hill RH15 8EH	
Name & Address of Perso	n Managing		
G4 Lets, 2 Hythe Road Brighton	on BN1 6JS		
Property Description			
Short description of licensed	d HMO (No of storeys, e	etc)	
Property Type = SHARED HO	USE, No of Units = 1, Oc	cupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 7	
a) Sleeping 6	b) Livi	ing Rooms 1	
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Fla	nts: 0
Shared Amenities	Number Descr	ription	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Licondo Botano			
Commencement date:	02/01/2018	Duration of licence:	08/08/2022
Na	b b - l - l l - l		-611
Maximum number of person	s or nousenoids permit	ted to occupy HMO under conditions	of licence:
Households 6	Persons 6		
Information referred to a	residential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie	cence		
		onds, HMO - Furniture Mandatory cond	s, HMO - Gas



#### Licence No.

#### 2017/04461/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

30 Southampton Street Brighton BN2 9UT

Ward

Hanover And Elm Grove

Name & Address of Lice	nce Holder	
Mr David M Humphrey, Clock	COttage Itchen Abbas Nr Winchester Hants SO2	1 1BQ
Name & Address of Pers	on Managing	
G4 Lets, 2 Hythe Road Bright	on BN1 6JS	
Property Description		
Short description of license	, ,	
Property Type = SHARED HO	DUSE, No of Units = 1, Occupancy = 7, No of Store	≥ys = 4
Number of Rooms	Total Number of Rooms 8	
a) Sleeping 7	b) Living Rooms	
	, <b>3</b>	
Number of Self Contained F	lats: 0 Number of Non	Self Cont. Flats: 0
itambor or oon contamour		
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	2	
c) W.C.s	3	
Licence Details		
Liconoc Dotano		
Commencement date:	07/12/2017 <b>Duration of li</b>	icence: 23/09/2022
Maximum number of nerso	ns or households permitted to occupy HMO un	der conditions of licence:
		act conditions of mornes.
Households 7	Persons 7	
Information referred to a	residential property tribunal or Lands Trib	unal:
None	residential proporty tribunal of Editas IIIs	- Tarrent
Decision of Tribunal	Refere	nce number
C		
Summary of conditions of I HMO - Elec Mandatory conds	i <b>cence</b> , HMO - Fire Mandatory conds, HMO - Furniture M	landatory conds, HMO - Gas



### Licence No.

#### 2017/04464/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

16 Hollingbury Road Brighton BN1 7JA

Ward

Hollingdean And Stanmer

Name & Address of Licen	ice Holder		
Mr & Mrs J Barrett, Rushett R	ushett Lane Norton Nr	Faversham Kent ME13 0SG	
Name & Address of Perso	on Managing		
G4 Lets, 2 Hythe Road Brighton	on BN1 6JS		
Property Description	dumo (No of ctourse	- 442	
Short description of license		•	
Property Type = SHARED HO	USE, No of Units = 1,	Occupancy = 7, No of Storeys = 4	
Number of Rooms	Total Number	of Rooms 8	
a) Sleeping 7	b) l	Living Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats:	0
Shared Amenities	Number Des	scription	
a) Kitchen	2		
b) Bathrooms/Showers c) W.C.s	3		
0) 11.0.0			
Licence Details			
Commencement date:	02/01/2018	Duration of licence:	27/08/2022
Commencement date.	02/01/2010	Duration of ficerice.	21100/2022
Maximum number of person	s or households perr	mitted to occupy HMO under conditions of	licence:
Households 7	Persons 7		
Information referred to a	residential property	y tribunal or Lands Tribunal:	
None			
Decision of Tribunal	Reference number		
	, HMO - Fire Mandator	y conds, HMO - Furniture Mandatory conds, H y conds. HMO - Property Maint Mandatory con	

RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/04468/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

3 Bevendean Crescent Brighton BN2 4RB

Ward

Moulsecoomb And Bevendean

Name & Address of Licence Holder		
Mr Mrs Michelle & Michael Pearce, Honey	s Green Cottage Lewes Road Uckfield East Sussex	TN225RE
Name & Address of Person Managir	ng	
,		
Dronarty Description		
Property Description  Short description of licensed HMO (No o	of storous, etc.)	
•		
Property Type = SHARED HOUSE, No of C	Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms Tota	I Number of Rooms 5	
a) Sleeping 5	b) Living Rooms 2	
,	,	
Number of Self Contained Flats:	0 Number of Non Self Cont. Fla	its: 1
number of con contamou rate.	Nambor of Non Con Contain In	1
Shared Amenities Number	Description	
a) Kitchen 1	]	
b) Bathrooms/Showers 1		
c) W.C.s		
1.1 B.4.%		
Licence Details		
Commencement date: 02/0	01/2018 Duration of licence:	11/09/2022
Maximum number of persons or househ	nolds permitted to occupy HMO under conditions	of licence:
Households 5 Persons	5	
Information referred to a residential	property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence		
HMO - Elec Mandatory conds, HMO - Fire	Doors 2, HMO - Fire Doors 3, HMO - Fire Locks, HM	10 - Fire



#### Licence No.

#### 2017/04525/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

20 Islingword Road Brighton BN2 9SE

Ward

Hanover And Elm Grove

Name & Address of Licence Ho	lder	
Mr John Lewis, 277 Dyke Road Hove	BN3 6PB	
Name & Address of Person Mar	naging	
,		
Property Description		
Short description of licensed HMO	(No of storeys, etc)	
Property Type = SHARED HOUSE, N	lo of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flat	ts: 0
Shared Amenities Num	ber Description	
a) Kitchen		
b) Bathrooms/Showers		
c) W.C.s		
Licence Details		
Commencement date:	01/04/2014 Duration of licence:	13/10/2018
Maximum number of persons or ho	buseholds permitted to occupy HMO under conditions	of licence:
Households 6 Perso	ons 6	
Information referred to a reside	ntial property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	

Summary of conditions of licence



#### Licence No.

#### 2017/04553/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 57 Surrey Street Brighton BN1 3PB

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
Mr Stephen James Ball, 44 Ke	mpshott Road Horsham R	RH12 2EM	
Name & Address of Perso	n Managing		
1			
Property Description			
Short description of licensed	HMO (No of storevs. et	c)	
-	-	supancy = 5, No of Storeys = 3	
	.,		
Number of Rooms	Total Number of F	Rooms 5	
a) Sleeping 5	b) Livin	ng Rooms 1	
			-
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Flat	s: 0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description	ption	
Licence Details			
Commencement date:	06/02/2018	Duration of licence:	17/09/2022
Maximum number of person	s or households permitte	ed to occupy HMO under conditions	of licence:
Households 5	Persons 5		
Information referred to a ।	esidential property tri	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic		ndo HMO. Eurnituro Mandatory condo	HMO Coo



#### Licence No.

#### 2017/04555/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

68 Elm Grove Brighton BN2 3DD

Ward

Hanover And Elm Grove

Name & Address of Licence Ho		
Mr Rod Hughes, Goldeneye Glen Roa	ad Grayshot Surrey GU26 6NB	
Name & Address of Person Mar	haging	
,		
Property Description		
Short description of licensed HMO	(No of storeys, etc)	
Property Type = SHARED HOUSE, N	lo of Units = 5, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 5	b) Living Rooms 1	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats	:: 1
Shared Amenities Num	<u> </u>	
a) Kitchen 1 b) Bathrooms/Showers 1		
b) Bathrooms/Showers 1 c) W.C.s 2		
2		
Licence Details		
Commencement date:	14/02/2018 Duration of licence:	28/08/2022
Maximum number of persons or ho	ouseholds permitted to occupy HMO under conditions o	of licence:
Households 5 Perso	ons 5	
	utial magnesis, tuib mal au Leuda Tuib mal	
	ntial property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence Fire alarm, HMO - Elec Mandatory co	nds, HMO - Fire Mandatory conds, HMO - Furniture Manda	tory conds,



#### Licence No.

#### 2017/04565/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

22 Park Crescent Road Brighton BN2 3HT

Ward

St. Peter's And North Laine

Name & Address of Licence H	Holder	
Mr Tom Ghibaldan, 59 Braemore R	toad Hove East Sussex BN3 4HA	
Name & Address of Person M		
Cambridge Brand Vaughan Ltd, T/a	as Brand Vaughan 117-118 Western Road Hove East Sussex	BN3 1DB
Property Description		
Short description of licensed HM	IO (No of storeys, etc)	
-	, No of Units = 1, Occupancy = 5, No of Storeys = 3	
	, 1.0 c. c.iiic - 1, c.c.apaille, c, 1.0 c. c.c.ayc	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 5	b) Living Rooms 1	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats	s: 1
Shared Amenities Nu	umber Description	
a) Kitchen	1	
b) Bathrooms/Showers	1 2	
c) W.C.s		
Licence Details		
Commencement date:	05/12/2017 Duration of licence:	28/09/2022
Commencement date.	03/12/2017 Duration of licence.	26/09/2022
Maximum number of persons or	households permitted to occupy HMO under conditions o	of licence:
Households 5 Per	rsons 5	
riousenoius 5 rei	30113	
Information referred to a resid	dential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence HMO - Elec Mandatory conds, HMO	e O - Fire Mandatory conds, HMO - Furniture Mandatory conds,	HMO - Gas



#### Licence No.

#### 2017/04593/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

1 Argyle Road Brighton BN1 4QA

Ward

Preston Park

Name & Address of Licence F	lolder	
Mr Mark Waters, 5 Herbert Road B	righton BN1 6PB	
Name & Address of Person M	anaging	
John Hiltons Ltd, 127 Lewes Road	Brighton BN2 3LG	
Property Description		
Short description of licensed HM	O (No of storeys, etc)	
Property Type = SHARED HOUSE	, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Dooms	Total Number of Dooms 7	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping 6	b) Living Rooms 1	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats	:: 0
	ımber Description	
a) Kitchen b) Bathrooms/Showers	2	
c) W.C.s	2	
0) 11.0.0		
Licence Details		
Commencement date:	06/11/2017 Duration of licence:	06/09/2022
Maximum number of persons or	households permitted to occupy HMO under conditions o	f licence:
Hawaahalda C Barr		
Households 6 Per	rsons 6	
Information referred to a resid	dential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence	e	
	D - Fire Blocked MOE, HMO - Fire Mandatory conds, HMO - F	urniture

HMO - Elec Mandatory conds, HMO - Fire Blocked MOE, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Other Fire Works



#### Licence No.

#### 2017/04598/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

51 Gladstone Place Brighton BN2 3QE

Ward

Hanover And Elm Grove

Name & Address of Licer	ce Holder
Mrs Heidi Crawford, 22 Elringt	on Road Hove BN3 6LG
Name & Address of Person	on Managing
John Hilton Ltd, 127 Lewes Ro	pad Brighton BN2 3LG
Property Description	
Short description of license	d HMO (No of storeys, etc)
Property Type = SHARED HC	USE, No of Units = 1, Occupancy = 6, No of Storeys = 3
Number of Rooms	Total Number of Rooms 7
a) Sleeping 6	b) Living Rooms 1
Normalis and Colf Countries and F	Number of New Oals Court Flates
Number of Self Contained F	lats: 0 Number of Non Self Cont. Flats: 0
Shared Amenities	Number Description
a) Kitchen	2
b) Bathrooms/Showers	3
c) W.C.s	3
Licence Details	
Commencement date:	14/12/2017 <b>Duration of licence:</b> 01/10/2022
Commencement date.	14/12/2017 Duration of ficence.
Maximum number of person	s or households permitted to occupy HMO under conditions of licence:
Households 6	Persons 6
1 IOUSCIIOIUS 0	1 0130113
Information referred to a	residential property tribunal or Lands Tribunal:
None	
Decision of Tribunal	Reference number
Summary of conditions of li	cence
	, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas



#### Licence No.

#### 2017/04623/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

16 Arlington Crescent Brighton BN1 9AP

Ward

Hollingdean And Stanmer

Name & Address of Licence Holder		
Mr Andrew Sidaway, 94 Greenways Crescent	nt Shoreham By Sea BN43 6HS	
Name & Address of Person Managing		
,		
Property Description		
Short description of licensed HMO (No of	storeys, etc)	
Property Type = SHARED HOUSE, No of Uni	nits = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms Total N	Number of Rooms 6	
a) Sleeping	b) Living Rooms	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flat	s: 0
Shared Amenities Number	Description	
a) Kitchen		
b) Bathrooms/Showers		
c) W.C.s		
Licence Details		
04/09/	20044 Duration of licenses	20/40/2049
Commencement date: 04/08/	/2014 Duration of licence:	20/10/2018
Maximum number of persons or househole	lds permitted to occupy HMO under conditions	of licence:
Households 6 Persons	6	
	un un autor tuile con al au la auda Tuile con al	
Information referred to a residential pr	roperty tribunal or Lands Tribunal:	
None	Defense a more	
Decision of Tribunal	Reference number	
Summary of conditions of licence		



#### Licence No.

#### 2017/04669/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

8 Elm Grove Brighton BN2 3DD

Ward

Hanover And Elm Grove

		<del></del>
Name & Address of Licen	ce Holder	
Mr David Symons, 2 Little Pem	brokes Downview Road Worthing West Sussex BN11 4NL	
Name & Address of Perso	n Managing	
DL Properties, 2 Ashford Road	Brighton BN1 6LJ	
Property Description		
Short description of licensed	I HMO (No of storevs. etc)	
-	JSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Troporty Type Crimital Prior	552, 116 d. c.m.c ., c.saapaney c, 116 d. c.c.e.g. c	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 5	b) Living Rooms 1	
Number of Self Contained Fla	ats: 0 Number of Non Self Cont. Flats	s: 0
Shared Amenities	Number Description	
a) Kitchen		
b) Bathrooms/Showers	1	
c) W.C.s	2	
Licence Details		
0	00/04/0040	00/00/0000
Commencement date:	23/01/2018 Duration of licence:	09/09/2022
Maximum number of persons	s or households permitted to occupy HMO under conditions o	of licence:
Households 5	Persons 5	
5		
Information referred to a r	esidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lic		HMO Gas



#### Licence No.

#### 2017/04722/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

31 Park Crescent Road Brighton BN2 3HT

Ward

St. Peter's And North Laine

Name & Address of Licence Holder
Mr A Haagman, Meadowbrook House Brook Street Cuckfield RH17 5JJ
Name & Address of Person Managing
Pavilion Properties Ltd, 128-129 Lewes Road Brighton BN2 3LG
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3
Number of Rooms Total Number of Rooms 6
a) Sleeping b) Living Rooms 1
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1
Shared Amenities Number Description
a) Kitchen 1 5 5 6 6 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
c) W.C.s 2
Licence Details
Commencement date: 15/12/2017 Duration of licence: 08/08/2022
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Households 5 Persons 5
Information referred to a residential property tribunal or Lands Tribunal:
None  Parision of Tribunal
Decision of Tribunal Reference number
Summary of conditions of licence HMO - Elec Mandatory conds. HMO - Fire Mandatory conds. HMO - Furniture Mandatory conds. HMO - Gas



#### Licence No.

#### 2017/04744/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

49 Totland Road Brighton BN2 3EP

Ward

Hanover And Elm Grove

Name & Address of Licence Holder
Mr Neil Myers, 46 Hove Park Way Hove East Sussex BN3 6PW
Name & Address of Person Managing
Mr Dan Lyons, 74 Lewes Road Brighton East Sussex BN2 3HZ
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3
Number of Rooms Total Number of Rooms 7
a) Sleeping b) Living Rooms 1
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1
Shared Amenities Number Description
a) Kitchen 2
b) Bathrooms/Showers 6
c) W.C.s
Licence Details
Commencement date: 23/01/2018 Duration of licence: 04/10/2022
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Households 6 Persons 6
Information referred to a residential property tribunal or Lands Tribunal:
None
Decision of Tribunal Reference number
Summary of conditions of licence HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas



#### Licence No.

#### 2017/04745/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

80 Whippingham Road Brighton BN2 3PG

Ward

Hanover And Elm Grove

Name & Address of Licer	nce Holder		
Linda & Steve, Danielle & Lav	vrence Harmer-Strange, T/	a Grosvenor Properties Tudor Grange	13 The Upper
Name & Address of Pers	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, et	c)	
Property Type = SHARED HC	OUSE, No of Units = 6, Occ	cupancy = 6, No of Storeys = 3	
		_	
Number of Rooms	Total Number of	Rooms 7	
a) Sleeping 6	b) Livir	ng Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities	Number Descri	ption	
a) Kitchen     b) Bathrooms/Showers	2 2		
c) W.C.s	3		
,			
Licence Details			
Commencement date:	31/01/2018	Duration of licence:	10/10/2022
Commencement date.	31/01/2016	Duration of licence.	10/10/2022
Maximum number of persor	ıs or households permitt	ed to occupy HMO under conditions	of licence:
Households 6	Persons 6		
0			
Information referred to a	residential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	cence		



#### Licence No.

#### 2017/04765/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

20 Nyetimber Hill Brighton BN2 4TL

Ward

Moulsecoomb And Bevendean

Name & Address of Licence	e Holder		
Mr Mahesh Chauhan, 8 Halfway	/ Avenue Luton Beds LU4	8RB	
Name O Address of Bonne	Manager		
Name & Address of Persor	Managing		
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
· Property Type = SHARED HOU	-		
	.,		
Number of Rooms	Total Number of Ro	ooms 7	
a) Sleeping 5	b) Living	Rooms 2	
			<u> </u>
Number of Self Contained Fla	<b>ts</b> : 0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s	Number Descript  1 1 1	ion	
Licence Details			
Commencement date:	05/12/2017	Duration of licence:	09/10/2022
Maximum number of persons	or households permitted	d to occupy HMO under conditions	of licence:
Households 5	Persons 5		
nformation referred to a re	sidential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice		da HMO Eurnitura Mandatany aanda	LIMO Cos



#### Licence No.

#### 2017/04799/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Carlyle House 38 Clifton Hill Brighton BN1 3HQ

Ward

Regency

Name & Address of Licen	ce Holder		
Mr David Delicata, 14-19 Norfo	olk Terrace Brighton BN1 3	AD	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	d HMO (No of storeys, etc	<b>:</b> )	
Property Type = BEDSIT, No o	of Units = 10, Occupancy =	16, No of Storeys = 5	
Number of Rooms	Total Number of R	dooms 10	
a) Sleeping 10	b) Livin	g Rooms	
Number of Self Contained Fl	ats: 9	Number of Non Self Cont. Fla	nts: 10
Shared Amenities	Number Descrip	otion	
a) Kitchen	10		
b) Bathrooms/Showers	4		
c) W.C.s	4		
Licence Details			
Licence Details			
Commencement date:	16/01/2018	Duration of licence:	12/10/2022
Maximum number of person	s or households permitte	ed to occupy HMO under conditions	of licence:
Households 10	Persons 16		
Information referred to a	residential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic	rence		
HMO - Elec Mandatory conds,	HMO - Fire Mandatory cor	nds, HMO - Furniture Mandatory cond	s, HMO - Gas



#### Licence No.

#### 2017/04818/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

31 Caledonian Road Brighton BN2 3HX

Ward

St. Peter's And North Laine

Name & Address of Licence Holder		
Mr Bradley Hamilton, 108A Lewes Road Brighton East Sussex E	3N2 4AE	
Name & Address of Person Managing		
MTM Property Services Ltd, 108A Lewes Road Brighton East Su	ussex BN2 4AE	
Property Description		
Short description of licensed HMO (No of storeys, etc)		
Property Type = SHARED HOUSE, No of Units = 1, Occupancy	= 6, No of Storeys = 3	
Number of Rooms Total Number of Rooms	6	
a) Sleeping b) Living Room	IS	
Number of Self Contained Flats: 0	Number of Non Self Cont. Flats:	0
Shared Amenities Number Description		
a) Kitchen		
b) Bathrooms/Showers		
c) W.C.s		
Licence Details		
Commencement date: 06/05/2016	Duration of licence:	06/04/2021
Maximum number of persons or households permitted to oc	ccupy HMO under conditions of I	icence:
Households 6 Persons 6		
Information referred to a residential property tribunal	or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence		



#### Licence No.

#### 2017/04885/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 44 Lansdowne Place Hove BN3 1HH

Ward

Brunswick And Adelaide

Name & Address of Licen	ce Holder		
Ms Vida Jaffe, 44 Lansdowne	Place Hove BN3 1HH		
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of licensed	d HMO (No of storeys, e	tc)	
Property Type = SHARED HO	USE, No of Units = 6, Oc	cupancy = 6, No of Storeys = 4	
Number of Rooms	Total Number of	Rooms 8	
a) Sleeping 6	D) LIVII	ng Rooms 1	
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities a) Kitchen	Number Descri	ption	
b) Bathrooms/Showers	3		
c) W.C.s	3		
Licence Details			
	24/24/2242		
Commencement date:	31/01/2018	Duration of licence:	30/10/2022
Maximum number of person	s or households permit	ted to occupy HMO under conditions of l	icence:
Households 6	Persons 6		
Information referred to a	residential property tr	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie Additional facilities, HMO - Ele		) - Fire Mandatory conds, HMO - Furniture N	<i>M</i> andatory

conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, structural fire works



#### Licence No.

#### 2017/04899/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

Flat C 191 Church Road Hove BN3 2AB

Ward

Central Hove

Name & Address of Licen	ce Holder			
First Charterhouse Investment	ts Limited, 257 Pres	ston Road Br	ighton BN1 6SE	
Name & Address of Perso	n Managing			
Jan Jones T/A Kudos Venture	s, 28 St Aubyns Ho	ve BN3 2TD		
Property Description				
Short description of licenses	d HMO (No of stor	eys, etc)		
Property Type = SHARED HO	USE, No of Units =	: 1, Occupano	cy = 5, No of Storeys = 4	
Number of Rooms	Total Numl	ber of Room	s 4	
a) Sleeping 3		b) Living Roo	oms 1	
Number of Self Contained FI	ats:	0	Number of Non Self Cont. Flats:	0
Shared Amenities	Number	Description		
a) Kitchen	1			
b) Bathrooms/Showers	1			
c) W.C.s	2			
Licence Details				
Commencement date:	09/01/201	8	Duration of licence:	16/10/2022
Maximum number of parean	o or households i	normitted to	occupy HMO under conditions of li	ioonoo
maximum number of person	s or nousenous p	Jermilleu lo	occupy Himo under conditions of it	icerice.
Households 3	Persons	5		
Information referred to a	residential prop	erty tribuna	al or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of lie Fire alarms, HMO - Elec Mand		- Fire Manda	atory conds, HMO - Furniture Mandato	ory conds,



#### Licence No.

#### 2017/05009/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

75 Hythe Road Brighton BN1 6JR

Ward

Preston Park

Name & Address of Licence	e Holder		
Mr Ian Cunningham, Mill Farm	Downs Lane Yetminst	er Sherborne DT9 6NJ	
Name & Address of Perso	n Managing		
G4 Lets, 2 Hythe Road Brighton	n BN1 6JS		
Property Description	LIMO (No. of all and	1.1	
Short description of licensed	-	·	
Property Type = SHARED HOL	JSE, No of Units = 1, C	Occupancy = 7, No of Storeys = 3	
Number of Rooms	Total Number	of Rooms 8	
a) Sleeping 7	b) L	iving Rooms 1	
,	,		
Number of Self Contained Fla	nts: 0	Number of Non Self Cont. Fla	its: 0
Shared Amenities	Number Des	cription	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	3		
Licence Details			
•	40/40/0047	D. office of Process	07/00/0000
Commencement date:	13/12/2017	Duration of licence:	27/08/2022
Maximum number of persons	or households perm	nitted to occupy HMO under conditions	of licence:
Households 7	Persons 7		
ilouseiloius i	1 6130113		
Information referred to a r	esidential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic			
HIVIO - Elec Mandatory conds.	⊣IVIO - Fire Mandatory	conds, HMO - Furniture Mandatory cond	s, HIVIO - Gas



#### Licence No.

#### 2017/05023/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

5 St Martins Place Brighton BN2 3LE

Ward

Hanover And Elm Grove

Name & Address of Licence Holder	
Mr Peter Downes, Sea Glen 125 Elmer Road Middleton-on-Sea Bognor PO22 6LH	
Name & Address of Person Managing	
G K White Co Ltd, 88 Boundary Road Hove East Sussex BN3 7GA	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms Total Number of Rooms 5	
a) Sleeping b) Living Rooms 1	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1	
Shared Amenities Number Description	
a) Kitchen 1	
b) Bathrooms/Showers 1	
c) W.C.s	
Licence Details	
Commencement date: 21/12/2017 Duration of licence: 04/11/202	22
Maximum number of persons or households permitted to occupy HMO under conditions of licence:	
Maximum number of persons of nouseholds permitted to occupy Himo under conditions of licence.	
Households 5 Persons 5	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of licence	
HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas	



#### Licence No.

#### 2017/05032/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

129 Upper Lewes Road Brighton BN2 3FD

Ward

St. Peter's And North Laine

Name & Address of Licence Holder	•	
	niel Darwish 121 Woodville Road Barnet EN5 5NS	
Name & Address of Person Managi	ing	
Pavilion Properties Ltd, 39 Sackville Road	Hove East Sussex BN3 3WD	
Property Description		
Short description of licensed HMO (No	of storeys, etc)	
Property Type = SHARED HOUSE, No of	Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms Tota	al Number of Rooms 6	
a) Sleeping 5	b) Living Rooms 1	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	1
Shared Amenities Number	Description	
a) Kitchen 1		
b) Bathrooms/Showers 2		
c) W.C.s		
Licence Details		
Commencement date: 14/	/12/2017 Duration of licence:	04/11/2022
Maximum number of persons or house	holds permitted to occupy HMO under conditions of li	icence:
Ususahalda 5 Banana		
Households 5 Persons	5	
Information referred to a residentia	l property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence	e Mandatory conds HMO - Furniture Mandatory conds HN	MO - Gas



#### Licence No.

#### 2017/05037/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

Flat At 119 Islingword Road Brighton BN2 9SG

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder			
Mr Daniel Darwish, 121 Wood	ville Road Barnet F	EN5 5NS		
Name & Address of Perso	n Managing			
Pavilion Properties Ltd, 39 Sac	ckville Road Hove	East Sussex	BN3 3WD	
Property Description				
Short description of license	d HMO (No of sto	reys, etc)		
Property Type = SHARED HO	USE, No of Units =	= 1, Occupand	cy = 5, No of Storeys = 3	
Normalian of Danier	T-4-1 N		- 0	
Number of Rooms	i otai num	ber of Room		
a) Sleeping 5		b) Living Roo	oms 1	
Number of Self Contained Fl	ats:	0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number	Description		
a) Kitchen	1			
b) Bathrooms/Showers c) W.C.s	2			
c) w.o.s				
Licence Details				
Commencement date:	14/12/201	17	Duration of licence:	04/11/2022
Maximum number of person	s or households	permitted to	occupy HMO under conditions of li	cence:
Households 5	Persons	5		
Information referred to a	residential prop	erty tribuna	al or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of lie HMO - Elec Mandatory conds,		atory conds, I	HMO - Furniture Mandatory conds, HI	MO - Gas



### Licence No.

#### 2017/05042/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

3 Jackson Street Brighton BN2 9UL

		,	vvard	Hanover And	EIM Grove
Name & Address of Licer	ice Holder				
Mr Robin Bradshaw, JSS Staf	f Directors Dept 33	FL 1 Pacific Plac	ce 88 Queensw	ay Admiralty Hong	Kong
Name & Address of Perso	on Managing				
G K White Co Ltd, 88 Bounda	ıry Road Hove Eas	t Sussex BN3 70	GA		
Property Description					
Short description of license	d HMO (No of stor	reys, etc)			
Property Type = SHARED HC	USE, No of Units =	= 1, Occupancy =	= 5, No of Store	eys = 4	
Number of Rooms a) Sleeping 5	Total Num	ber of Rooms b) Living Rooms	6 S 1		
Number of Self Contained F	lats:	0 N	lumber of Non	Self Cont. Flats:	1
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number  1 2 2	Description			
Licence Details					
Commencement date:	09/01/201	8	Duration of I	cence:	04/11/2022
Maximum number of person	s or households	permitted to occ	cupy HMO un	der conditions of li	cence:
Households 5	Persons	5			
Information referred to a	residential prop	erty tribunal o	or Lands Trib	unal:	
None					
Decision of Tribunal			Refere	nce number	
Summary of conditions of li HMO - Elec Mandatory conds HMO - Furniture Mandatory co HMO - Property Maint Mandat conds, HMO - Tenant Agrmnt	, HMO - Fire Blanke onds, HMO - Gas M tory conds, HMO - I	Mandatory conds	, HMO - Prope	rty Chges Mandator	y conds,



#### Licence No.

#### 2017/05063/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

12 St Martins Street Brighton BN2 3HJ

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder			
Mr David Bull, 16 Windmill Av	enue Epsom Surre	y KT17 1LL		
Name & Address of Perso	n Managing			
Mr Dan Lyons, 74 Lewes Road	d Brighton BN2 3H	Z		
Property Description				
Short description of license	d HMO (No of stor	reys, etc)		
Property Type = SHARED HO	USE, No of Units =	= 1, Occupand	cy = 7, No of Storeys = 4	
Number of Rooms	Total Num	ber of Room	s 8	
	i Otal Nulli			
a) Sleeping 7		b) Living Roo	oms 1	
				_
Number of Self Contained Fl	ats:	0	Number of Non Self Cont. Flats:	1
01	N	<b>5</b>		
Shared Amenities a) Kitchen	Number 2	Description		
b) Bathrooms/Showers	2			
c) W.C.s	2			
Licence Details				
Commencement date:	09/01/201	8	Duration of licence:	04/11/2022
Maximum number of person	s or households <sub>l</sub>	permitted to	occupy HMO under conditions of li	cence:
Households 7	Persons	7		
Information referred to a	residential prop	erty tribuna	al or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of lie HMO - Elec Mandatory conds,		atory conds, I	HMO - Furniture Mandatory conds, HN	ЛО - Gas



#### Licence No.

#### 2017/05081/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) 81 Elm Grove Brighton BN2 3ET

Ward

Hanover And Elm Grove

Name & Address of Licen	ce Holder			
Mr James Ford, Flat 190 Princ	ess Park Manor Ro	oyal Drive Lo	ndon N11 3NL	
Name & Address of Perso	on Managing			
Mr Dan Lyons, 74 Lewes Road	d Brighton BN2 3H2	Z		
Property Description				
Short description of licensed	d HMO (No of stor	reys, etc)		
Property Type = SHARED HO	USE, No of Units =	1, Occupan	cy = 7, No of Storeys = 3	
			_	
Number of Rooms	Total Numi	ber of Room	s 8	
a) Sleeping 7		b) Living Ro	oms 1	
Number of Self Contained Fl	ats:	0	Number of Non Self Cont. Flats	: 1
Shared Amenities	Number	Description		
a) Kitchen	2			
b) Bathrooms/Showers	2			
c) W.C.s	2			
Licence Details				
Commencement date:	19/12/201	7	Duration of licence:	04/11/2022
Mavimum numbar of navoan			LIMOdan aanditiana a	f lineman.
maximum number of person	s or nousenoias p	permitted to	occupy HMO under conditions of	r licence:
Households 7	Persons	7		
Information referred to a	residential prop	erty tribuna	al or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of lie	cence			
HMO - Elec Mandatory conds,	HMO - Fire Blanke		e Doors 8, HMO - Fire Mandatory of	
· Furniture Maridatory Conds, I	iiviO - Gas ivialidat	iory conus, n	MO - Property Chges Mandatory co	nius, MIVIO -

Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/05093/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

13 Carlyle Avenue Brighton BN2 4DR

Ward

Moulsecoomb And Bevendean

Name & Address of Licence	e Holder	
Mr Alan Cunliffe, 97 Hanover Te	rrace Brighton East Sussex BN2 9SP	
Name & Address of Person		
MTM Property Services Ltd, 108	A Lewes Road Brighton BN2 4AE	
Property Description		
Short description of licensed I	-IMO (No of storeys, etc)	
Property Type = SHARED HOUS	SE, No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 5	b) Living Rooms 1	
a) Sieeping	b) Living Rooms	
Normalism of Oalf Oamtains of Flat	Number of New Oalf Court Flates	
Number of Self Contained Flat	S: 0 Number of Non Self Cont. Flats:	0
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Commencement date:	28/03/2017 Duration of licence:	22/12/2021
Maximum number of persons	or households permitted to occupy HMO under conditions of	licence:
Households 5	Persons 5	
Information referred to a re	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lice	nce	
	IMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, h	HMO - Gas



#### Licence No.

#### 2017/05096/HMO/PS

# REGISTER ENTRY FOR (Address of licensed HMO)

22 Manton Road Brighton BN2 4FB

Ward

Moulsecoomb And Bevendean

Name & Address of Licer		
Mr Simeon Bowes, 17 Montpe	elier Road Brighton BN1 2LQ	
Name & Address of Pers	on Managing	
	d, T/as Brand Vaughan Amelia House Crescent Road Worthing BN1	1 10P
Cambridge Brand Vaugnan Li	u, 17as Brand Vaughan Amelia House Grescent Road Worthing Bivi	TIQN
Property Description		
Short description of license	d HMO (No of storeys, etc)	
Property Type = SHARED HC	OUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
. , , ,		
Number of Rooms	Total Number of Rooms 7	
a) Sleeping 6	b) Living Rooms 1	
Number of Self Contained F	lats: 0 Number of Non Self Cont. Flats:	1
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description 2 2 2 2	
Licence Details		
0	40/40/0047	0.4/4.4/0.000
Commencement date:	19/12/2017 Duration of licence:	04/11/2022
Maximum number of persor	s or households permitted to occupy HMO under conditions of	licence:
Households 6	Persons 6	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of li	cence . HMO - Fire Mandatory conds. HMO - Furniture Mandatory conds. H	IMO - Gas



#### Licence No.

#### 2017/05103/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO) Bensons Guest House 16 Egremont Place Brighton BN2 0GA

Ward

Queen's Park

Name & Address of Licence	Holder	
Mrs Elizabeth Stanhope, 2 High S	treet Hallaton LE16 8UD	
Name & Address of Person I	Managing	
S J Lettings Ltd, 52 Lewes Road I	3righton BN2 3HW	
Property Description		
Short description of licensed H	MO (No of storeys, etc)	
Property Type = SHARED HOUS	E, No of Units = 1, Occupancy = 6, No of Storeys = 4	
Number of Rooms a) Sleeping  6	Total Number of Rooms 10 b) Living Rooms 1	
Number of Self Contained Flats	: 0 Number of Non Self Cont. Flats:	1
Shared Amenities  a) Kitchen  b) Bathrooms/Showers  c) W.C.s	Description 2 2 2 2	
Licence Details		
Commencement date:	22/11/2017 Duration of licence:	12/08/2022
Maximum number of persons o	r households permitted to occupy HMO under conditions of lic	ence:
Households 6 Pe	ersons 6	
Information referred to a res	idential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licen	ce MO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HM	O - Gas

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -Repairs Bathroom 17, HMO - Repairs Windows 8, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs



#### Licence No.

#### 2017/05110/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

57 Milner Road Brighton BN2 4BP

Ward

Moulsecoomb And Bevendean

Name & Address of Licence Holder		
Ms Linda Allen, 17 Old Farm Road Brighton BN1 8HE		
Name & Address of Person Managing		
,		
Property Description  Short description of line and LIMO (No of storage atc)		
Short description of licensed HMO (No of storeys, etc)	_	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Sto	reys = 3	
Number of Rooms Total Number of Rooms 7		
a) Sleeping b) Living Rooms 1		
Number of Self Contained Flats: 0 Number of No	on Self Cont. Flats:	0
Shared Amenities Number Description		
a) Kitchen 2		
b) Bathrooms/Showers 3		
c) W.C.s		
Licence Details		
Commencement date: 16/01/2018 Duration of	licence:	19/11/2022
Maximum number of persons or households permitted to occupy HMO u	nder conditions of li	cence:
Haveahalda C Barrana C		
Households 6 Persons 6		
Information referred to a residential property tribunal or Lands Tr	ibunal:	
None		
Decision of Tribunal Refer	ence number	
Summary of conditions of licence HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture	Mandatory conds. HN	лО - Gas



#### Licence No.

#### 2017/05142/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

25 The Highway Brighton BN2 4GB

Ward

Moulsecoomb And Bevendean

Name 8 Address of Linear	Holden	
Name & Address of Licence		
Mr Phil Donovan, Sunset Down F	Henfield Road Small Dole Henfield BN5 9XJ	
Name 8 Address of Davis	Managing	
Name & Address of Person	Managing	
,		
Property Description		
Short description of licensed F	IMO (No of storous atc)	
-		
Property Type = SHARED HOUS	SE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping	b) Living Rooms	
, . •	,	
Number of Self Contained Flats	s: 0 Number of Non Self Cont. Flat:	s: 0
	Trainizor of Non John Film	J
Shared Amenities	Number Description	
Shared Amenities	Number Description	
a) Kitchen	Number Description	
	Number Description	
a) Kitchen	Number Description	
a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description	
a) Kitchen b) Bathrooms/Showers	Number Description	
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details		14/05/2019
a) Kitchen b) Bathrooms/Showers c) W.C.s	10/02/2014 Duration of licence:	14/05/2018
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:		1.00.20.0
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons of	10/02/2014 Duration of licence: or households permitted to occupy HMO under conditions of	1.00.20.0
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons of	10/02/2014 Duration of licence:	1
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons of the second of the se	10/02/2014 Duration of licence: or households permitted to occupy HMO under conditions of the conditio	1
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons of the second of the se	10/02/2014 Duration of licence: or households permitted to occupy HMO under conditions of	1
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  Maximum number of persons of the second of the se	10/02/2014 Duration of licence: or households permitted to occupy HMO under conditions of the conditio	1.00.20.0

Summary of conditions of licence



#### Licence No.

#### 2017/05143/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

52 Barcombe Road Brighton BN1 9JR

Ward

Moulsecoomb And Bevendean

Name & Address of Licer	ice Holder	
Mr Oliver Dorman, 8 Bramble	Rise Brighton BN1 5GF	
Name & Address of Perso	on Managing	
Rivers Birtwell Ltd, 52 Barcom	nbe Road Brighton BN1 9JR	
Property Description		
Short description of license	d HMO (No of storeys, etc)	
•	DUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 10	
a) Sleeping 6	b) Living Rooms 3	
a) 5.55pg	2, <u>2</u>	
Number of Self Contained F	lats: 0 Number of Non Self Cont	t. Flats: 1
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers c) W.C.s	3	
C) VV.C.S	3	
Licence Details		
Commencement date:	19/12/2017 Duration of licence:	05/11/2022
Maximum number of person	ns or households permitted to occupy HMO under condit	ions of licence:
-		
Households 6	Persons 6	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference numb	er
Summary of conditions of li HMO - Elec Mandatory conds	cence , HMO - Fire Mandatory conds, HMO - Furniture Mandatory c	conds, HMO - Gas



#### Licence No.

#### 2017/05162/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

76 Hanover Terrace Brighton BN2 9SP

Ward

Hanover And Elm Grove

Name & Address of Lice	nce Holder		
Linda, Steve, Danielle, Lawre	ence Harmer-Strange	e, Tudor Grange 13 The Upper Drive Hove Ea	ast Sussex BN3
Name & Address of Pers	son Managing		
ı			
Property Description			
Short description of licens	ed HMO (No of stor	eys, etc)	
Property Type = SHARED H	OUSE, No of Units =	1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Numl	ber of Rooms 6	
a) Sleeping 5		b) Living Rooms 1	
2) 0.00pmg		2) Living (165)	
Number of Self Contained	Flats:	0 Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number	Description	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
Commencement date:	13/12/201	7 Duration of licence:	04/11/2022
Maximum number of perso	ns or households p	permitted to occupy HMO under conditions	of licence:
Households 5	Persons	5	
Information referred to a	residential prop	erty tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	rm, HMO - Elec Man	datory conds, HMO - Fire Mandatory conds, H ry conds, HMO - Property Chges Mandatory c	



#### Licence No.

#### 2017/05204/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

8 Egremont Place Brighton BN2 0GA

Ward

Queen's Park

Name & Address of Licen	ice Holder			
Mr Tim Marlow, 28 Stanley Ro	ad Brighton BN1 4	1NJ		
Name & Address of Perso	on Managing			
Bishop Sullivan, 72 Preston St	treet Brighton East	Sussex BN1	2HG	
Property Description				
Short description of license	d HMO (No of sto	reys, etc)		
Property Type = SHARED HO	USE, No of Units	= 1, Occupand	cy = 5, No of Storeys = 3	
			_	
Number of Rooms	Total Num	ber of Room	s 7	
a) Sleeping 5		b) Living Roo	oms 1	
Number of Self Contained F	lats:	0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number	Description		
a) Kitchen	1			
b) Bathrooms/Showers c) W.C.s	2			
0) 11.0.0				
Licence Details				
Commencement date:	05/01/201	18	Duration of licence:	04/11/2022
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
Hausahalda E	Davagna	E		
Households 5	Persons	5		
Information referred to a	residential prop	erty tribuna	al or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of lie HMO - Elec Mandatory conds,		atory conds, I	HMO - Furniture Mandatory conds, HI	MO - Gas



#### Licence No.

#### 2017/05240/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

9 Barcombe Road Brighton BN1 9JP

Ward

Moulsecoomb And Bevendean

	Name & Address of Licence Holder				
Mr Simeon Bowes, 17 Montpelier Road Brighton BN1 2LQ					
Name & Address of Person Managing					
Cambridge Brand Vaughan Ltd, T/as Brand Vaughan 110 St Georges Road Brighton BN2 1E.	A				
Property Description					
Short description of licensed HMO (No of storeys, etc)					
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3					
Number of Rooms Total Number of Rooms 7					
a) Sleeping b) Living Rooms 1					
Number of Self Contained Flats: 0 Number of Non Self Cont. F	lats: 1				
Shared Amenities Number Description					
a) Kitchen 2					
a) Kitchen 2 b) Bathrooms/Showers 2					
a) Kitchen 2					
a) Kitchen 2 b) Bathrooms/Showers 2					
a) Kitchen 2 b) Bathrooms/Showers 2 c) W.C.s 2					
a) Kitchen 2 b) Bathrooms/Showers 2 c) W.C.s 2	20/11/2022				
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  19/12/2017  Duration of licence:					
a) Kitchen 2 b) Bathrooms/Showers 2 c) W.C.s 2  Licence Details					
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  19/12/2017  Duration of licence:					
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  19/12/2017  Duration of licence:  Maximum number of persons or households permitted to occupy HMO under condition  Households  0  Persons 6					
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  19/12/2017  Duration of licence:  Maximum number of persons or households permitted to occupy HMO under condition  Households  0  Persons 6  Information referred to a residential property tribunal or Lands Tribunal:					
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  19/12/2017  Duration of licence:  Maximum number of persons or households permitted to occupy HMO under condition Households  0  Persons 6  Information referred to a residential property tribunal or Lands Tribunal: None					
a) Kitchen b) Bathrooms/Showers c) W.C.s  Licence Details  Commencement date:  19/12/2017  Duration of licence:  Maximum number of persons or households permitted to occupy HMO under condition  Households  0  Persons 6  Information referred to a residential property tribunal or Lands Tribunal:					



#### Licence No.

#### 2017/05249/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

12 Egginton Road Brighton BN2 4PL

Ward

Moulsecoomb And Bevendean

Name & Address of Licer	ce Holder			
Mr Simeon Bowes, 17 Montpelier Road Brighton BN1 2LQ				
Name & Address of Person	on Managing			
Cambridge Brand Vaughan T	as Brand Vaughan, 110 St Georges Road Brighton BN2 1EA			
Property Description				
Short description of license	d HMO (No of storeys, etc)			
Property Type = SHARED HC	OUSE, No of Units = 1, Occupancy = 6, No of Storeys = 3			
Number of Rooms	Total Number of Rooms 7			
a) Sleeping 6	b) Living Rooms 1			
N	No transfer of the contract of			
Number of Self Contained F	lats: 0 Number of Non Self Cont. Flats:	1		
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description 2 2 3			
C) W.O.3				
Licence Details				
0	40/40/0047 Powerfier of House	00/44/0000		
Commencement date:	19/12/2017 Duration of licence:	20/11/2022		
Maximum number of persor	s or households permitted to occupy HMO under conditions of li	cence:		
Households 0	Persons 6			
Tiousenoius 0	reisons			
Information referred to a	residential property tribunal or Lands Tribunal:			
None				
Decision of Tribunal	Reference number			
Summary of conditions of li HMO - Elec Mandatory conds	cence , HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HM	1O - Gas		



#### Licence No.

#### 2017/05259/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

34 Widdicombe Way Brighton BN2 4TG

Ward

Moulsecoomb And Bevendean

Name & Address of Licence Holder
Ms A Kettle, 514 Falmer Road Brighton BN2 6LH
Name & Address of Person Managing
John Hilton Ltd, 127 Lewes Road Brighton East Sussex BN2 3LG
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 3
Number of Rooms Total Number of Rooms 6
a) Sleeping b) Living Rooms 1
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1
Shared Amenities Number Description
a) Kitchen 1 5 5 6 6 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
c) W.C.s 3
Licence Details
Commencement date: 23/01/2018 Duration of licence: 06/11/2022
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Households 5 Persons 5
Information referred to a residential property tribunal or Lands Tribunal:
None
Decision of Tribunal Reference number
Summary of conditions of licence HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas



#### Licence No.

#### 2017/05261/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

30 Barcombe Road Brighton BN1 9JQ

Ward

Moulsecoomb And Bevendean

Name & Address of Licence	Holder	
Mr Mark Barrowcliffe, 7 Wykehar	n Terrace Brighton BN1 3FF	
Name & Address of Person	Managing	
,		
Property Description		
Short description of licensed h	IMO (No of storeys, etc)	
Property Type = SHARED HOUS	SE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping 6	b) Living Rooms 1	
Number of Self Contained Flat	s: 0 Number of Non Self Cont. Flats:	1
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers c) W.C.s	2 2	
0) 11.0.0		
Licence Details		
Commencement date:	21/12/2017 Duration of licence:	30/11/2022
Commencement date.	Z1/12/2017 Buration of needles.	30/11/2022
Maximum number of persons of	or households permitted to occupy HMO under conditions of li	cence:
Households 6 F	Persons 6	
Information referred to a res	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licer HMO - Elec Mandatory conds. H	nce MO - Fire Blanket. HMO - Fire Mandatory conds. HMO - Furniture	

HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Bathroom 17, HMO - Repairs Ventilation 2, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs



#### Licence No.

#### 2017/05264/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

405 Portland Road Hove BN3 5SG

Ward

Wish

Name & Address of Licence I		
Mr Ismael Awad, 405 Portland Roa	d Hove BN3 5SG	
Name & Address of Person N	lanaging	
,		
<b>.</b>		
Property Description		
Short description of licensed HN	IO (No of storeys, etc)	
Property Type = SHARED HOUSE	No of Units = 6, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping 6	b) Living Rooms 1	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	: 0
	umber Description	
a) Kitchen b) Bathrooms/Showers	5	
c) W.C.s	6	
-,		
Licence Details		
Γ		
Commencement date:	06/02/2018 Duration of licence:	07/11/2022
Maximum number of persons or	households permitted to occupy HMO under conditions of	f licence:
•		
Households 6 Pe	rsons 6	
Information referred to a resi	dential property tribunal or Lands Tribunal:	
	pential property tribunal of Lanus Tribunal.	
None	Defenses	
Decision of Tribunal	Reference number	
Summary of conditions of licence HMO - Elec Mandatory conds, HM	ee O - Fire Mandatory conds, HMO - Furniture Mandatory conds, I	HMO - Gas



#### Licence No.

#### 2017/05302/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

23 Ewhurst Road Brighton BN2 4AL

Ward

Moulsecoomb And Bevendean

Name & Address of Licence Holder				
Ms Aloysia Daros, The Barn H	indon Road Dinton	SP3 5EL		
Name & Address of Perso	n Managing			
Pier Associates Ltd T/a Just Le	ets, 87 Church Roa	d Hove BN3	2BB	
Property Description				
Short description of licensed	d HMO (No of store	eys, etc)		
Property Type = SHARED HO	USE, No of Units =	1, Occupano	cy = 5, No of Storeys = 3	
Number of Rooms	Total Numb	per of Room	s 6	
a) Sleeping 5	I	b) Living Ro	oms 1	
Number of Self Contained Fl	ats:	0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number I	Description		
a) Kitchen	2			
b) Bathrooms/Showers	2			
c) W.C.s	2			
Licence Details				
Commencement date:	27/12/2017	7	Duration of licence:	20/12/2022
M				
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
Households 5	Persons	5		
Information referred to a	residential prope	erty tribuna	al or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of lie HMO - Elec Mandatory conds,		Systems 5, I	HMO - Fire Blanket, HMO - Fire Doors	8, HMO

HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 5, HMO - Fire Blanket, HMO - Fire Doors 8, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/05331/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

26A Church Road Hove BN3 2FN

Ward

Central Hove

Name & Address of Licer	nce Holder		
Mr Richard Gumbrell, 22 Ran	elagh Villas Hove BN3 6HE		
Name & Address of Pers	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, etc	:)	
Property Type = BEDSIT, No	of Units = 5, Occupancy = 7	', No of Storeys = 5	
		•	
Number of Rooms	Total Number of R		
a) Sleeping 7	b) Livinç	g Rooms 1	
Number of Self Contained F	lats: 1	Number of Non Self Cont. Flats:	0
Shared Amenities	Number Descrip	tion	
a) Kitchen	5		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Licence Details			
Commencement date:	15/02/2018	Duration of licence:	12/11/2022
Maximum number of persor	is or households permitte	d to occupy HMO under conditions of	licence:
Households 7	Persons 7		
Information referred to a	residential property tril	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	re alarms, HMO - Elec Man	datory conds, HMO - Fire Mandatory con	

ADDITIONAL FACILITIES, Fire alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, STRUCTURAL FIRE WORKS



#### Licence No.

#### 2017/05424/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

40 St Martins Place Brighton BN2 3LE

Ward

Hanover And Elm Grove

Name & Address of Licence H	lolder	
Mr Jonathan Dodds, 20 Clyde Road	Brighton BN1 4NP	
Name O Address of Dames M		
Name & Address of Person M	anaging	
1		
Property Description		
Short description of licensed HM	O (No of storeys, etc)	
Property Type = SHARED HOUSE,	No of Units = 1, Occupancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 5	b) Living Rooms 1	
a) olcoping	b) Living Rooms	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	1
	mber Description	
a) Kitchen b) Bathrooms/Showers	1 2	
c) W.C.s	2	
Licence Details		
Commencement date:	14/02/2018 Duration of licence:	14/11/2022
Maximum number of persons or	households permitted to occupy HMO under conditions of li	cence:
Households 5 Per	sons 5	
Information referred to a resid	lential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence HMO - Elec Mandatory conds. HMO	e D - Fire Mandatory conds. HMO - Furniture Mandatory conds. HN	10 - Gas



#### Licence No.

#### 2017/05430/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

20 Baden Road Brighton BN2 4DP

Ward

Moulsecoomb And Bevendean

Name & Address of Licer	nce Holder		
Mr Jonathan Dodds, 20 Clyde	Road Brighton BN1 4NP		
Name & Address of Person	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, et	c)	
Property Type = SHARED HC	OUSE, No of Units = 1, Occ	supancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of I		
a) Sleeping 6	b) Livir	ng Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number Descri	ption	
a) Kitchen	2		
b) Bathrooms/Showers c) W.C.s	2 2		
9, 111313			
Licence Details			
_			
Commencement date:	14/02/2018	Duration of licence:	14/11/2022
Maximum number of persor	ıs or households permitt	ed to occupy HMO under conditions	of licence:
	_		
Households 6	Persons 6		
Information referred to a	residential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li		) - Fire Mandatory conds, HMO - Furnit	ure



#### Licence No.

#### 2017/05461/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

36 Newmarket Road Brighton BN2 3QF

Ward

Hanover And Elm Grove

Name & Address of Lice	nce Holder	
Mrs Fiona Glare, 23 Cissbury	Crescent Saltdean BN2 8PN	
Name & Address of Pers	on Managing	
Kendrick Property Services L	td, 10-12 Lewes Road Brighton BN2 3HP	
Property Description		
Short description of license	• • •	
Property Type = SHARED HO	DUSE, No of Units = 1, Occupancy = 5, No of Storeys = 4	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 5	b) Living Rooms 1	
, , ,	, , ,	
Number of Self Contained F	Flats: 0 Number of Non Self Cont. Flats:	0
		-
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Commencement date:	09/02/2018 Duration of licence:	05/12/2022
Maximum number of person	ns or households permitted to occupy HMO under conditions of	licence:
Haveahalda 5	Parana E	
Households 5	Persons 5	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of I		MO 0
HIVIO - Elec Mandatory conds	s, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, H	IIVIO - Gas



#### Licence No.

#### 2017/05700/HMO/PS

## REGISTER ENTRY FOR (Address of licensed HMO)

2 Nyetimber Hill Brighton BN2 4TL

Ward

Moulsecoomb And Bevendean

Name & Address of Licen	ace Holder	
DB Sussex Investments Ltd, 2	Ashford Road Brighton East Sussex BN1 6LJ	
Name & Address of Perso		
Mr Dan Lyons, 74 Lewes Road	d Brighton East Sussex BN2 3HZ	
Property Description		
Short description of license	d HMO (No of storeys, etc)	
-	USE, No of Units = 1, Occupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping 6	b) Living Rooms 1	
Number of Self Contained Fl	lats: 0 Number of Non Self Cont. Flats	s: 1
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	2	
c) W.C.s	3	
Licence Details		
Commencement date:	23/01/2018 Duration of licence:	27/11/2022
Commencement date.	23/01/2010 Duration of incence.	21111/2022
Maximum number of person	s or households permitted to occupy HMO under conditions o	of licence:
Households 6	Persons 6	
1.6		
	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lie HMO - Elec Mandatory conds.	cence , HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds,	HMO - Gas



#### Licence No.

#### 2017/05740/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

28 Roedale Road Brighton BN1 7GB

Ward

Hollingdean And Stanmer

Name & Address of Licence	Holdor		
		all Data at the West Occurs CHOO OF I	
Lurbeck Properties Limited, Orch	ard Park Farm Lurgash	all Petworth West Sussex GU28 9EU	
Name O Address of Bosses	Managina		
Name & Address of Person	5 5		
G4 Lets, 2 Hythe Road Brighton	BN1 6JS		
Durante Description			
Property Description	IMO (No of otomove of	->	
Short description of licensed F	•	•	
Property Type = SHARED HOUS	SE, No of Units = 1, Occ	upancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of F	Rooms 8	
a) Sleeping 7	b) Livir	g Rooms 1	
Number of Self Contained Flat	s: 0	Number of Non Self Cont. Flats:	0
Shared Amenities	Number Descri	otion	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	3		
Licence Details			
Licence Details			
Commencement date:	13/02/2018	Duration of licence:	28/11/2022
N			
waximum number of persons of	or nousenoias permitti	ed to occupy HMO under conditions of	licence:
Households 7 F	Persons 7		
Information referred to a res	sidential property tr	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Mandatory conds, HMO - Proper	MO - Fire Mandatory co ty Chges Mandatory co	nds, HMO - Furniture Mandatory conds, I	

RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Other Fire Works



#### Licence No.

#### 2017/05814/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

10 Marlow Road Brighton BN2 5NB

Ward

East Brighton

Name & Address of Lice			
Mr Khasru Miah, 10 Marlow F	load Brighton BN2 5NB		
Nous O Adduses of Dave	an Mananina		
Name & Address of Pers	on Managing		
1			
Property Description			
Short description of license	nd HMO (No of storays, a	tc)	
-		•	
Property Type = SHARED HO	JUSE, NO OF UNITS = 7, OC	cupancy = 7, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 8	
a) Sleeping 7	b) Livi	ng Rooms 1	
, . <b>.</b>	,	<u> </u>	
Number of Self Contained F	lats: 0	Number of Non Self Cont. FI	ats: 0
Shared Amenities	Number Descr	iption	
a) Kitchen	2	•	
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Licence Details			
Commencement date:	06/02/2018	Duration of licence:	30/11/2022
Maximum number of perso	ns or households permit	ted to occupy HMO under conditions	s of licence:
Households 7	Persons 7		
Information referred to a	residential property tr	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of I	icence		
		conds, HMO - Fire Mandatory conds,	HMO -

Additional facilities, Fire alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structrural fire works, Ventilation



#### Licence No.

#### 2017/05836/HMO/PS

**REGISTER ENTRY FOR** (Address of licensed HMO)

12A Lewes Road Brighton BN2 3HP

Ward

St. Peter's And North Laine

lame & Address of Licen	ce Holder		
Mr Ahmed Abbas, 10-12 Lewe	s Road Brighton BN2 3F	<del>I</del> P	
Name & Address of Perso	on Managing		
Property Description			
Short description of license	d HMO (No of storeys, o	etc)	
Property Type = SHARED HO	USE, No of Units = 1, Oo	ccupancy = 6, No of Storeys = 3	
Number of Rooms	Total Number of	f Rooms 6	
a) Sleeping 6	b) Liv	ving Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number Desc	ription	
a) Kitchen	2		
) Bathrooms/Showers	3		
c) W.C.s	3		
icence Details			
nochoc Betans			
Commencement date:	20/02/2018	Duration of licence:	05/12/2022
laximum number of person	s or households permi	tted to occupy HMO under conditions of	licence:
Households 6	Persons 6	7	
nformation referred to a	residential property t	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie	cence		
		conds, HMO - Furniture Mandatory conds, H	MO - Gas

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Loft Insulation, Management/ Repairs, Other Fire Works



### Licence No.

### 2017/05905/HMO/PS

### **REGISTER ENTRY FOR** (Address of licensed HMO)

86 Washington Street Brighton BN2 9SR

Ward

Hanover And Elm Grove

ssex BN42 4GB shford Road Brighton BN1 6LJ	
shford Road Brighton BN1 6LJ	
shford Road Brighton BN1 6LJ	
shford Road Brighton BN1 6LJ	
Jancy – 5, No of Storeys – 4	
ooms 6	
Rooms 1	
Number of Non Self Cont. Flats:	0
ion	
Duration of licenses	11/12/2022
Duration of licence:	11/12/2022
d to occupy HMO under conditions of li	icence:
unal or Lands Tribunal:	
Reference number	
	Number of Non Self Cont. Flats:  ion  Duration of licence:  I to occupy HMO under conditions of licence condit

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



#### Licence No.

#### 2017/05912/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

24 Edinburgh Road Brighton BN2 3HY

Ward

St. Peter's And North Laine

Name & Address of Licence Holder		
Mr Sanjeev Dhuna, 48 Woodland Drive Hove BN3 6DL		
Name & Address of Person Managing		
S J Lettings Ltd, 52 Lewes Road Brighton BN2 3HW		
Property Description		
Short description of licensed HMO (No of storeys, etc)		
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = §	5, No of Storeys = 4	
	•	
Number of Rooms Total Number of Rooms	6	
a) Sleeping b) Living Rooms	1	
Number of Self Contained Flats: 0 Nu	mber of Non Self Cont. Flats: 0	
Shared Amenities Number Description		
a) Kitchen 1		
b) Bathrooms/Showers 2		
c) W.C.s		
Licence Details		
Commencement date: 11/12/2013	Duration of licence: 21/03/201	18
Maximum number of persons or households permitted to occu	uny HMO under conditions of licence	
	apy nime under conditions of nectice.	
Households 5 Persons 5		
Information referred to a residential property tribunal or	Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence	_ , , , , , , , , , , , , , , , , , , ,	
HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO	- Furniture Mandatory conds, HMO - Gas	



#### Licence No.

#### 2017/06042/HMO/PS

REGISTER ENTRY FOR (Address of licensed HMO)

44A Lewes Road Brighton BN2 3HQ

Ward

St. Peter's And North Laine

Name & Address of Licer	ice Holder		
Khalil Leasing Ltd, 124 Lewes	Road Brighton East Susse	x BN2 3LG	
Name & Address of Person	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, etc	:)	
Property Type = SHARED HC	USE, No of Units = 1, Occu	upancy = 5, No of Storeys = 3	
Number of Rooms	Total Number of R	ooms 6	
a) Sleeping 5	b) Living	g Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number Descrip	tion	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Licence Details			
Commencement date:	05/02/2018	Duration of licence:	05/11/2022
		L_	
Maximum number of persor	is or households permitte	d to occupy HMO under conditions of	licence:
Households 5	Persons 5		
Information referred to a	residential property tril	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	conco		
HMO - Elec Mandatory conds	, HMO - Fire Alarm Systems	s 5, HMO - Fire Mandatory conds, HMO -	
Mandatory conds HMO - Gas	Mandatory conds HMO - I	Property Chaes Mandatory conds. HMO.	- Property

HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 5, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Electrics 10, HMO - Repairs Kitchen 5, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs