

Licence No.

2013/03435/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

35 George Street Brighton BN2 1RH

Ward

Queen's Park

Name & Address of Licence Holder	
Ms Virginia Porpora, 261 Preston Road Brighton BN1 6SE	
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 = 4, No of Storeys = 4	
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	s: 0
Shared Amenities Number Description	
a) Kitchen	
b) Bathrooms/Showers	
c) W.C.s	
Licence Details	
Commencement date: 14/08/2013 Duration of licence:	06/06/2018
Maximum number of persons or households permitted to occupy HMO under conditions	of licence:
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

Additional Facilities, Electrical works, 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, Management / Repairs, Management/Repairs, Structural fire works, Ventilation



Licence No.

2015/04683/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

7 Castle Street Brighton BN1 2HD

Ward

Regency

Name & Address of Licence	Holder		
Miss Melanie Ford, 10A Sydney S	Street Brighton BN1 4EN	N	
Name & Address of Person I	Managing		
,			
Property Description			
Short description of licensed H	MO (No of storeys, etc	c)	
Property Type = SHARED HOUS	E, No of Units = 1, Occi	upancy = 4, No of 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	ts: 0
	lumber Descrip	otion	
a) Kitchen b) Bathrooms/Showers			
c) W.C.s			
0) 11.5.5			
Licence Details			
Commencement date:	03/02/2016	Duration of licence:	01/11/2020
Maximum number of persons o	r households permitte	ed to occupy HMO under conditions	of licence:
	-		
Households 4 Po	ersons 4		
Information referred to a res	idential property tri	hunal or Lands Tribunal:	
Mone	idential property tri	bullat of Latius Tribuliat.	
INCHE			
		Reference number	
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 - 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.

2015/05225/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

81A St Georges Road Brighton BN2 1EF

Ward

East Brighton

Name & Address of Licence		
Investsave Ltd, 98-100 Reigate	Road Brighton BN1 5AG	
Nama 9 Addusas of Dayson	Managing	
Name & Address of Person		
iny Lets Ltd, Amelia House Cre	escent Road Worthing West Sussex BN11 1QR	
Property Description		
Short description of licensed	HMO (No of storeys, etc)	
Property Type = SHARED HOU	ISE, No of Units = 1, Occupancy = 3, No of Storeys = 2	
. , ,,		
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 3	b) Living Rooms 1	
Number of Self Contained Fla	ts: 0 Number of Non Self Cont. Flats	s: 0
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	1	
c) W.C.s	1	
Licence Details		
Commencement date:	05/04/2016 Duration of licence:	01/11/2020
Maximum number of persons	or households permitted to occupy HMO under conditions o	f licence:
Households 3	Persons 3	
Information referred to a re	esidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lice		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 - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



Licence No.

2015/05240/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

1 Shaftesbury Place Brighton BN1 4QS

Ward

Preston Park

Name & Address of Licence Holder	
Investsave Ltd, 98-100 Reigate Road Brighton BN1 5AG	
Name O Address of Davis on Managina	
Name & Address of Person Managing My Leta Ltd. Ameila House, Crescent Read, Worthing, West Sugger, RN11 10R	
My Lets Ltd, Ameila 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 = 2	
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	: 0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s Number Description 2 2	
Licence Details	
Commencement date: 05/04/2016 Duration of licence:	01/11/2020
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



Licence No.

2015/05454/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

129 Ditchling Rise Brighton BN1 4QQ

Ward

Preston Park

Name & Address of Licence Holder	
Ms Holly Faithfull, 78 Gleneagle Road London SW16 6AF	
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 = 4, No of Storeys = 2	
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	
c) W.C.s Licence Details	
	01/11/2020
Licence Details	
Licence Details Commencement date: 01/02/2016 Duration of licence:	
Licence Details Commencement date: 01/02/2016 Duration of licence: Maximum number of persons or households permitted to occupy HMO under conditions of	
Licence Details Commencement date: 01/02/2016 Duration of licence: Maximum number of persons or households permitted to occupy HMO under conditions of Households 4 Persons 4	

Summary of conditions of licence

Electrical works, HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 3, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Licensing Kitchen 6, HMO - Licensing Loft Insulation, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural Fire Works



Licence No.

2015/05517/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

28A New England Road Brighton BN1 3TU

Ward

Preston Park

Name & Address of Licen	ce Holder			
Ms Sarah Morris-Bray, 24 Que	bec Street Brightor	n BN2 9UZ		
Name & Address of Perso	n Managing			
John Hilton Estate Agents, 127	7 Lewes Road Brigh	hton BN2 3L	G	
Property Description				
Short description of licensed	HMO (No of store	eys, etc)		
Property Type = SHARED HO	USE, No of Units =	1, Occupano	cy = 3, No of Storeys = 2	
Number of Rooms		ber of Room		
a) Sleeping 3		b) Living Ro	oms 1	
Number of Self Contained Fl	ats:	0	Number of Non Self Cont. Flats:	0
Shared Amenities	Number I	Description		
a) Kitchen	1			
b) Bathrooms/Showers c) W.C.s	1			
c) vv.c.s	<u> </u>			
Licence Details				
Commencement date:	03/02/2016	6	Duration of licence:	01/11/2020
Maximum number of person	s or households r	permitted to	occupy HMO under conditions of li	icence:
Households 3	Persons	3		
l. ((d and and statement	
Information referred to a	residentiai prope	erty tribuna	ai or Lands Tribunai:	
None			D. C	
Decision of Tribunal			Reference number	
Summary of conditions of lie Electrical Works, HMO - Elec N		HMO - Fire M	andatory conds, HMO - Fire Notices	1, HMO -

Electrical Works, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Fire Notices 1, 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, Other Fire Works, Structural Fire Works



Licence No.

2015/05519/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

15A Preston Street Brighton BN1 2HN

Ward

		vvaru	Rege	ПСУ
Name & Address of Lice	nce Holder			
		ester West Sussex PO19 1RP		
Name & Address of Pers	on Managing			
,				
Property Description				
Short description of license	d HMO (No of storey	rs, etc)		
Property Type = SHARED HC	OUSE, No of Units = 1	, Occupancy = 3, No of Storey	s = 4	
Number of Rooms	Total Numbe	er of Rooms 3		
a) Sleeping 3	b)	Living Rooms 1		
Number of Self Contained F	lats:	Number of Non S	Self Cont. Flats:	0
Shared Amenities		escription		
a) Kitchen	1			
b) Bathrooms/Showers b) W.C.s	3 4			
o) vv.o.s				
Licence Details				
_				
Commencement date:	08/02/2016	Duration of lice	ence:	01/11/2020
Maximum number of persor	ns or households pe	rmitted to occupy HMO unde	er conditions of	licence:
	_			
Households 3	Persons 3			
Information referred to a	residential proper	ty tribunal or Lands Tribu	nal:	
None		,		
Decision of Tribunal		Reference	ce number	
0				
Summary of conditions of l i HMO - Elec Mandatory conds		ory conds, HMO - Furniture Ma	ndatory 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.

2015/05558/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

18 New England Road Brighton BN1 3TU

Ward

Preston Park

Name & Address of Licence	Holdor		
Ms Nicola Legat, 99 Mortlake Roa	a Kew London IVV9 4AA		
Name 9 Adduses of Dayson I	Anna win w		
Name & Address of Person N	5 5		
John Hilton Ltd, 100 Church Stree	t Brighton BN1 1UJ		
.			
Property Description			
Short description of licensed HI	MO (No of storeys, etc)		
Property Type = SHARED HOUSE	E, No of Units = 1, Occupa	ancy = 3, No of Storeys = 2	
Number of Rooms	Total Number of Roo	oms 4	
a) Sleeping	b) Living F	Rooms	
Number of Self Contained Flats	. 0	Number of Non Self Cont. Flat	s: 0
Shared Amenities N	umber Description	on	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	05/04/2016	Duration of licence:	01/11/2020
	00/01/2010		V 11 11 20 20
Maximum number of persons or	r households permitted	to occupy HMO under conditions	of licence:
Households 3 Pe	ersons 3		
i iouseiioius 5 Pe	J J		
Information referred to a resi	idential property tribu	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	

Summary of conditions of licence

Electrical Works, HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 3, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Fire Notices 1, 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, Structural Fire Works



Licence No.

2015/05565/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

12 Stafford Road Brighton BN1 5PF

Ward

Preston Park

Name & Address of Licence Holder	
Investsave Ltd, 98-100 Reigate Road Brighton East Sussex BN1 5AG	
Name & Address of Person Managing	
My Lets Ltd, Ameila 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 = 2	
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	
,	
b) Bathrooms/Showers 2	
b) Bathrooms/Showers 2 c) W.C.s 2 Licence Details	04/44/0000
b) Bathrooms/Showers 2 2 2	01/11/2020
b) Bathrooms/Showers 2 c) W.C.s 2 Licence Details	
b) Bathrooms/Showers c) W.C.s Licence Details Commencement date: 05/04/2016 Duration of licence: Maximum number of persons or households permitted to occupy HMO under conditions of li	
b) Bathrooms/Showers c) W.C.s Licence Details Commencement date: 05/04/2016 Duration of licence:	
b) Bathrooms/Showers c) W.C.s Licence Details Commencement date: 05/04/2016 Duration of licence: Maximum number of persons or households permitted to occupy HMO under conditions of li	
b) Bathrooms/Showers c) W.C.s Licence Details Commencement date: 05/04/2016 Duration of licence: Maximum number of persons or households permitted to occupy HMO under conditions of li Households 6 Persons 6	
b) Bathrooms/Showers c) W.C.s Licence Details Commencement date: 05/04/2016 Duration of licence: Maximum number of persons or households permitted to occupy HMO under conditions of li Households 6 Persons 6 Information referred to a residential property tribunal or Lands Tribunal:	

HMO - Elec Mandatory conds, HMO - Fire Blanket, 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, Other Fire Works



Licence No.

2015/05568/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

12 Belle Vue Gardens Brighton BN2 0AA

Ward

East Brighton

Name & Address of Licen	ce Holder		
Mrs Dalla Jenney, 20 Circus S	treet London Greater Lond	on SE10 8SN	
Name & Address of Perso	n Managing		
Duran antico Dana animatia n			
Property Description	d LIMO (No of otomore, etc.		
Short description of license			
Property Type = SHARED HO	USE, No of Units = 1, Occu	upancy = 4, No of Storeys = 3	
Number of Rooms	Total Number of R	dooms 7	
a) Sleeping 4	b) Livino	Rooms 1	
,	,		
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number Descrip	tion	
a) Kitchen	1		
) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
			_
Commencement date:	10/03/2016	Duration of licence:	01/11/2020
Maximum number of person	e or households normitte	ed to occupy HMO under conditions	of licence:
waxiiiiaiii iiaiiibei oi persoii	s or nousenoids permitte	to occupy this under conditions	of ficerice.
Households 0	Persons 4		
		and and and Tribunal	
nformation referred to a	residential property trii	ounar or Lands Tribunai:	
None		Def	
Decision of Tribunal		Reference number	
Summary of conditions of li	cence	landatawa sanda LIMO. Euroitura Mar	

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.

2015/05576/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

60A Denmark Villas Hove BN3 3TJ

Ward

Goldsmid

Name & Address of Licen	ice Holder		
Mr Alex Smith, 31 Ainsworth A	Avenue Brighton East Su	ussex BN2 7BG	
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, C	Occupancy = 3, No of Storeys = 2	
Number of Rooms	Total Number o	of Rooms 4	
a) Sleeping 3	b) Li	iving Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities		cription	
a) Kitchenb) Bathrooms/Showers	1		
c) W.C.s	2		
-,			
Licence Details			
	00/04/0040	¬ ⊏	0.4.4.4.100.00
Commencement date:	06/01/2016	Duration of licence:	01/11/2020
Maximum number of person	is or households perm	nitted to occupy HMO under conditions of l	licence:
Households 0	Persons 3		
nousenoius	reisons 3		
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		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 - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Loft Insulation, Structural Fire Works



Licence No.

2015/05691/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

12A Granville Road Hove BN3 1TG

Ward

Goldsmid

Name & Address of Lice	nce Holder			
MTM Property Services, 108A		ghton East Su	ssex BN2 4AE	
		<u> </u>		
Name & Address of Pers	on Managing			
,				
Property Description				
Short description of license	d HMO (No of st	oreys, etc)		
Property Type = SHARED HC	USE, No of Units	s = 1, Occupan	cy = 4, No of Storeys = 3	
Number of Rooms	Total Nu	mber of Room	ns 5	
a) Sleeping 4		b) Living Ro		
a) Sieeping		b) Living IXO	OIIIS I	
Number of Self Contained F	late:	0	Number of Non Self Cont. Flats:	1
Number of Self Contained F	iats.		Number of Non Sen Cont. Flats.	I
Shared Amenities	Number	Description		
a) Kitchen	1			
b) Bathrooms/Showers	2			
c) W.C.s	2			
Licence Details				
Commencement date:	02/02/20	016	Duration of licence:	01/11/2020
Maximum number of persor	ns or household:	s permitted to	occupy HMO under conditions of	licence:
	——————————————————————————————————————			
Households 0	Persons	4		
Information referred to a	residential pro	porty tribun	al or Lands Tribunal:	
None	residential pro	perty tribuin	ar or Lanus Tribunai.	
Decision of Tribunal			Reference number	
Summary of conditions of li Fire Alarm, HMO - Elec Mand		O - Fire Blanke	t, HMO - Fire Mandatory conds, HMC) -

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, Other Fire works



Licence No.

2015/05711/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

115A Portland Road Hove BN3 5DP

Ward

Westbourne

Name & Address of Licence Holder		
Meadowswell Ltd, C/o 12 Kingsway House 134-140	Church Road Hove RN3 2DI	
ivicadowswell Etd, 6/6 12 Kingsway Flouse 154-140	Ondien Road Flove BING 2DE	
Name & Address of Person Managing		
Jonathan Rolls Managing Agents, 244 Eastern Road	I Brighton BN2 5TA	
Property Description		
Short description of licensed HMO (No of storeys	s, etc)	
Property Type = SHARED HOUSE, No of Units = 1,	Occupancy = 3, No of Storeys = 3	
Number of Rooms Total Number a) Sleeping b) I	of Rooms 4 Living Rooms	
Number of Self Contained Flats: 0	Number of Non Self Cont. Flats:	0
Shared Amenities Number Des a) Kitchen b) Bathrooms/Showers c) W.C.s	scription	
Licence Details		
Commencement date: 14/01/2016	Duration of licence:	01/11/2020
Maximum number of persons or households per	mitted to occupy HMO under conditions of	licence:
Households 3 Persons 3		
Information referred to a residential property	y 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, Management/Repairs, Other Fire Works, Structural Fire Works, Ventilation



Licence No.

2015/05727/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

10 Lower Market Street Hove BN3 1AT

Ward

Brunswick And Adelaide

Name & Address of Licen	ce Holder
Mr Simon Jansen, 71 Chris Pu	
	-
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 = 4, No of Storeys = 4
Number of Rooms	Total Number of Rooms 6
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	2
c) W.C.s	2
Licence Details	
Commencement date:	06/01/2016 Duration of licence : 01/11/2020
Commonication data.	Surdiction of Hospitals
Maximum number of person	s or households permitted to occupy HMO under conditions of licence:
Households 0	Persons 4
•	
Information referred to a i	residential property tribunal or Lands Tribunal:
None	
Decision of Tribunal	Reference number
Summary of conditions of lic	cence

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.

2015/05733/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

6 Ferndale Road Hove BN3 6EU

Ward

Goldsmid

Name & Address of Licence Holder		
Ms Angela Vaughan, 137 Shirley Drive Hove East Sussex BN3 6UJ		
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 = 4, No o	of Storeys = 2	
Number of Rooms Total Number of Rooms 6		
a) Sleeping 4 b) Living Rooms	1	
a) Sleeping b) Living Rooms	1	
N. J. C. CO. KO. A. C. J. F. A.	- CN	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 1 2		
Licence Details		
Commencement date: 03/02/2016 Duration	on of licence:	01/11/2020
Maximum number of persons or households permitted to occupy HN	MO under conditions of li	cence:
Households 0 Persons 4		
Information referred to a residential property tribunal or Land	ds Tribunal:	
None		
Decision of Tribunal F	Reference number	
Summary of conditions of licence	HMO - Eurnituro Mondoto	ary conde

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.

2015/05764/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 1 47 Lyndhurst Road Hove BN3 6FB

Ward

Goldsmid

Name & Address of Licenc	e Holder		
Mr Simon Jansen, 71 Chris Pull	en Way London N7 9FG		
Name & Address of Persor	n Managing		
,			
D (D) (
Property Description	11110 (A) (- (- (- (- (- (- (- (- (
Short description of licensed			
Property Type = SHARED HOU	SE, No of Units = 1, Occup	pancy = 3, No of Storeys = 3	
Number of Rooms	Total Number of Ro	oms 4	
a) Sleeping	b) Living	Rooms	
Number of Self Contained Fla	ts : 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number Descript	on	
a) Kitchen	1		
b) Bathrooms/Showers c) W.C.s	2		
C) W.O.3	2		
Licence Details			
Commencement date:	06/01/2016	Duration of licence:	01/11/2020
Maximum number of persons	or households permitted	to occupy HMO under conditions	of licence:
Haveahalda 0	Domono 2		
Households 0	Persons 3		
Information referred to a re	esidential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	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, Structural Fire Works



Licence No.

2015/05765/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 3 77 Denmark Villas Hove BN3 3TH

Ward

Goldsmid

Name & Address of Licer	ice Holder		
Mr Trevor Wickson, 20 Kingst	on Way Shoreham-by-sea	a West Sussex BN43 6YA	
Name & Address of Perso	on Managing		
,			
•			
Property Description			
Short description of license	d HMO (No of storevs. e	tc)	
-		cupancy = 8, No of Storeys = 2	
Property Type - STIANED TIC	OSE, NO OI OIIIS - 7, OC	cupancy – 8, NO of Storeys – 2	
Number of Rooms	Total Number of	Rooms 12	
a) Sleeping 7	b) Livi	ng Rooms	
a) 5.65pg	J, =		
N 1 1 O - 11 O 1 - 1 1 E	1.1.	N	4.
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number Descr	iption	
a) Kitchen b) Bathrooms/Showers	2		
c) W.C.s	2		
0) **.0.0			
Licence Details			
Commencement date:	19/01/2016	Duration of licence:	01/11/2020
Maximum number of persor	s or households permit	ted to occupy HMO under conditions	of licence:
Households 0	Persons 8		
		ı	
Information referred to a	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 - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural fire works



Licence No.

2015/05776/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

19 Beaconsfield Road Brighton BN1 4QH

Ward

Preston Park

Name & Address of Licen	ce Holder		
Mrs Fiona Glare, 23 Cissbury	Crescent Saltdean BN2 8F	N	
Name & Address of Perso	on Managing		
		ston East Success BN2 3HD	
Kendrick Property Services Ltd	J, 10-12 Lewes Road Brigi	IIOII EASI SUSSEX DINZ SITP	
Property Description			
Short description of license	d HMO (No of storeys, etc	(:)	
Property Type = SHARED HO	USE, No of Units = 1, Occ	upancy = 5, No of Storeys = 2	
Number of Rooms	Total Number of F	Rooms 6	
a) Sleeping 5	D) LIVIII	g Rooms 1	
Number of Calf Contained El	lete: 0	Number of New Colf Court Flotes	4
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number Descrip	ation	
a) Kitchen	1	NION .	
b) Bathrooms/Showers	1		
c) W.C.s	2		
Licence Details			
2	0.4/00/0040	D	04/44/0000
Commencement date:	04/02/2016	Duration of licence:	01/11/2020
Maximum number of person	s or households permitte	ed to occupy HMO under conditions of I	licence:
Households 0	Persons 5		
Tiouconoluc			
Information referred to a	residential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Mandatory conds, HMO - Fire	oards 2, HMO - Elec Mand Notices 1, HMO - Furniture	atory conds, HMO - Fire Blanket, HMO - Fe Mandatory conds, HMO - Gas Mandatory	y conds,

Fire Alarm, Fire EI / GI / Cupboards 2, 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 - Repairs Bathroom 17, HMO - Repairs Bathroom 9, HMO - Repairs Electrics 4, HMO - Repairs Floors 5, HMO - Repairs Ventilation 2, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Other Fire Works, Other Fire works





Licence No.

2015/05779/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

5 Wilbury Grove Hove BN3 3JQ

Ward

Central Hove

Name & Address of Licence	Holder	
Eastbrook Properties Limited, 2nd	d Floor Hygeia House 66 College Road Harrow Middlesex HA1 1	BE
Name & Address of Person	Managing	
Mr Timothy Sheppard, 18 Onslow	Road Hove BN3 6TA	
Property Description		
Short description of licensed H	MO (No of storeys, etc)	
Property Type = SHARED HOUS	E, No of Units = 1, Occupancy = 3, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 4	
a) Sleeping 3	b) Living Rooms 1	
Number of Self Contained Flats	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:	29/03/2016 Duration of licence:	01/11/2020
Maximum number of persons o	r households permitted to occupy HMO under conditions of	licence:
Households 0 P	ersons 3	
Information referred to a res	idential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licen	CE	

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.

2015/05781/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 2 4 Abbey Road Brighton BN2 1HS

Ward

East Brighton

Name & Address of Licer	ice Holder		
Millmead Properties Ltd, 50 W	est Street Chichester PO19	IRP	
Name & Address of Person			
Mr William Pointet, 50 West S	treet Chichester PO19 1RP		
Property Description			
Short description of license	d HMO (No of storeys, etc)		
Property Type = SHARED HC	OUSE, No of Units = 1, Occupa	ancy = 3, No of Storeys = 2	
Number of Rooms	Total Number of Roo	oms 3	
a) Sleeping 3	b) Living R	Rooms 1	
a, clooping	2) Living 1		
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	nts: 1
Number of Self Contained i	iats.	Number of Non Sen Cont. 1 is	1
Shared Amenities	Number Description	ın	
a) Kitchen	1	···	
b) Bathrooms/Showers	1		
c) W.C.s	2		
Licence Details			
Commencement date:	08/02/2016	Duration of licence:	01/11/2020
Maximum number of person	s or households permitted t	to occupy HMO under conditions	s of licence:
Households 0	Persons 3		
Information referred to a	residential property tribu	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	cence		
HMO - Elec Mandatory conds	, HMO - Fire Mandatory conds	, HMO - Fire Test Certificates, HM	
Mandatory conds, HMO - Gas	Mandatory conds, HMO - Lice	ensing Bathroom 4, HMO - Propert	y Chges

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Fire Test Certificates, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Bathroom 4, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Bathroom 16, HMO - Repairs Ventilation 2, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs



Licence No.

2015/05783/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO) Deans Cottage 10 Marlborough Mews Brighton BN1 3EB

Ward

Regency

ame & Address of Licen			
s Janet Bray, 69 Seafield Ro	ad Hove BN3 2TN		
ame & Address of Perso	n Managing		
roperty Description	d LIMO (No. of otoro		
hort description of licensed	-		
operty Type = SHARED HO	USE, No of Units =	1, Occupancy = 3, No of Storeys = 2	
umber of Rooms	Total Numb	per of Rooms 4	
Sleeping 3	ŀ	b) Living Rooms 1	
Clooping		o, Living Rooms	
umber of Self Contained Fl	late	0 Number of Non Self Cont. Flats:	0
umber of Sen Contained in	ats.	Number of Non Self Cont. Flats.	0
hared Amenities	Number D	Description	
Kitchen	1		
Bathrooms/Showers	1		
W.C.s	2		
cence Details			
cence Details			
ommencement date:	06/01/2016	Duration of licence:	01/11/2020
aximum number of person	s or households pe	ermitted to occupy HMO under conditions of	licence:
ouseholds 3	Persons 3	3	
	residential prope	rty tribunal or Lands Tribunal:	
formation referred to a	Poraditial prope		
formation referred to a l	rootaonitai propo		

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.

2015/05789/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

4 Stone Street Brighton BN1 2HB

Ward

Regency

			Walu	regency
Name & Address of Lice	nce Holder			
Mr John Lake, 7 Longlands G	lade Worthing \	West Sussex BN	14 9NR	
Name & Address of Pers	on Managing			
1				
Property Description				
Short description of license	ed HMO (No of	storeys, etc)		
Property Type = SHARED HC	OUSE, No of Un	nits = 1, Occupar	ncy = 4, No of Storeys = 3	
Number of Rooms	Total N	Number of Roon	ns 4	
	Iotain			
a) Sleeping 4		b) Living Ro	ooms 1	
Number of Self Contained F	-lats:	0	Number of Non Self Con	t. Flats:
Tambor or com comamour				1
Shared Amenities	Number	Description	1	
a) Kitchen	1			
o) Bathrooms/Showers	1			
c) W.C.s	1			
Licence Details				
Commencement date:	29/03/	/2016	Duration of licence:	01/11/2020
Maximum number of persor	ns or househol	lds permitted to	occupy HMO under condi	lions of licence:
Households 0	Persons	4		
Information referred to a	residential p	roperty tribun	al or Lands Tribunal:	
None				
Decision of Tribunal			Reference numb	er
Summary of conditions of I		IMO Fine Maria	latam, aanada LIMO . Furmitur	- Mandatan , aanda

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.

2015/05813/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

First And Second Floor Flat Bathurst 2 Clarence Square Brighton RN1 2FD Regency

Ward

lame & Address of Licen	ce Holder		
Ir Alf Abrahams, 76 Hangleto	n Way Hove East Sussex B	N3 8EQ	
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 = 3, No of Storeys = 2	
Number of Rooms	Total Number of Ro	ooms 4	
a) Sleeping 3	b) Living	Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats:	1
Dhawad Awaru!#!aa	Name have a December	·	
Shared Amenities a) Kitchen	Number Descript	ion	
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	15/04/2016	Duration of licence:	01/11/2020
Johnnencement date.	13/04/2010	buration of incence.	01/11/2020
Maximum number of person	s or households permitted	to occupy HMO under conditions of	licence:
Households 3	Persons 3		
iousciloius 5	0		
nformation referred to a	residential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li		ds, HMO - Furniture Mandatory conds, H	IMO - Gas

Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Loft Insulation, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



Licence No.

2015/05821/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

3 Sudeley Place Brighton BN2 1HF

Ward

East Brighton

lame & Address of Licen	ce Holder		
Irs Lynne Nally, 3 Sudeley Pla	ace Brighton E Sussex BN2	! 1HF	
lame & Address of Perso	n Managing		
Property Description			
hort description of licensed	HMO (No of storeys, etc)		
roperty Type = SHARED HO			
Toperty Type – STIANED TIO	JSE, NO OF OFFICE - 1, Occu	paricy = 3, No or Storeys = 3	
lumber of Rooms	Total Number of Ro	ooms 3	
) Sleeping 3	b) Living	Rooms 1	
lumber of Self Contained Fl	ats: 0	Number of Non Self Cont. Flats:	1
hared Amenities	Number Descript	tion	
) Kitchen	1		
) Bathrooms/Showers	1		
) W.C.s	1		
icence Details			
		_	
Commencement date:	08/04/2016	Duration of licence:	01/11/2020
lavimum number of person	s or households normitte	d to occupy HMO under conditions of	liconco:
		Tto occupy rimo under conditions of	icerice.
louseholds 3	Persons 3		
nformation referred to a r	esidential property trib	ounal or Lands Tribunal:	
lone			
ecision of Tribunal		Reference number	
Summary of conditions of lic		nket, HMO - Fire Mandatory conds, HMC) -
ire Alami, milo - Elec Mande		LIMO Dranarty Chara Mandatany anna	ia LIMO

Furniture Mandatory 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.

2015/05883/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 5
Hartley Lodge
32 Montpelier Road
Brighton
RN1 2LO

Ward

rd Regency

Name & Address of Licen	ce Holder		
Mr Ashley Bennett, Hartley Loc	lge 32 Montpelier	r Road Brighton East Sussex BN1 2LQ	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	HMO (No of sto	oreys, etc)	
Property Type = SHARED HOU	JSE, No of Units :	= 1, Occupancy = 3, No of Storeys = 2	
7 71	,	, , , , ,	
Number of Rooms	Total Num	nber of Rooms 4	
a) Sleeping 3		b) Living Rooms 1	
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			
Commencement date:	15/04/201	16 Duration of licence:	01/11/2020
	10/0 1/20 1		0111112020
Maximum number of persons	or households	permitted to occupy HMO under conditions of li	icence:
Households 3	Persons	3	
I I OU JEI I OU J	i Graona		
Information referre <u>d to a r</u>	esidential prop	perty tribunal or Lands Tribunal:	
None		•	
Decision of Tribunal		Reference number	
Summary of conditions of lice HMO - Flec Mandatory conds.		latory 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.

2015/05885/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO) Flat 4 51 Lansdowne Street Hove BN3 1FT

Ward

Brunswick And Adelaide

		<u> </u>	
Name & Address of Licen	ce Holder		
Mr Ashley Bennett, 51 Lansdo	wne Street Hove East Su	ssex BN3 1FT	
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 Occ	cupancy = 3, No of Storeys = 2	
Troporty Type Office 2010		supurity 6, No of Storeys 2	
Number of Rooms	Total Number of	Rooms 4	
a) Sleeping 3	b) Livi	ng Rooms 1	
	-,		
N			
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Flat	s: 1
Shared Amenities	Number Descri	ption	
a) Kitchen	0		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Licence Details			
Commencement date:	15/04/2016	Duration of licence:	01/11/2020
Maximum number of person	s or households permit	ted to occupy HMO under conditions	of licence:
Households 3	Persons 3		
nousellolus 3	reisolis 3		
Information referred to a	residential property tr	ibunal or Lands Tribunal:	
None	obligation of the state of the	ibanai or Earrao-Fribaniai.	
		Reference number	
Decision of Tribunal		Reference number	
Summary of conditions of lie			
HMO - Elec Mandatory conds,	-	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



Licence No.

2015/05886/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

12B Eaton Grove	
Hove	
BN3 3PH	

Ward

Goldsmid

Name & Address of Licen	ce Holder	
Mr Derek Millward, De Kamp	1, 8551 PD Woudsend, The Netherlands	
Name & Address of Perso	n Managing	
Whitlock & Heaps, 65 Sackville	e Road Hove East Sussex BN3 3WE	
Property Description		
Short description of license	d HMO (No of storeys, etc)	
Property Type = SHARED HO	USE, No of Units = 1, Occupancy = 3, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 5	
a) Sleeping 3	b) Living Rooms 1	
Number of Self Contained F	ats: 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:	15/04/2016 Duration of licence:	01/11/2020
Maximum number of person	s or households permitted to occupy HMO under condition	ons of licence:
Households 0	Persons 3	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference numbe	er
Summary of conditions of lie	cence	
	HMO - Fire Locks, HMO - Fire Mandatory conds, HMO - Fur	niture Mandatory

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 - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



Licence No.

2015/05906/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

First Floor And Second Floor Flat 30 York Road Hove

Ward

RN3 1DI

Brunswick And Adelaide

Name & Address of Licence Holder
M & P Properties Ltd, 108A Lewes Road Brighton BN2 4AE
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 = 4, No of Storeys = 2
Number of Rooms Total Number of Rooms 5
a) Sleeping 4 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 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
J) W.C.5
Licence Details
Commencement date: 17/03/2016 Duration of licence: 01/11/2020
Duration of ficence.
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Households 4 Persons 4
nformation referred to a residential property tribunal or Lands Tribunal:
None
Decision of Tribunal Reference number
Summary of conditions of licence Fire Alarms, HMO - Flee Mandatory conds, HMO - Fire Blanket, HMO - Fire Doors 4, HMO - Fire Mandatory

conds, HMO - Elec Mandatory conds, HMO - Fire Blanket, 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, Management/Repairs



Licence No.

2015/05908/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Maisonette 97 Sackville Road Hove BN3 3WF

Ward

Goldsmid

Name & Address of Licence	e Holder			
Westfield Investments Ltd, Bartte	elot House Bartte	elot Court Bar	ttelot Road Horsham RH12 1DQ	
Name & Address of Person	Managing			
Mr Colin Brace, The Paddock Lo	ndon Road Hass	socks BN6 9N	NA	
Property Description				
Short description of licensed l	HMO (No of stor	reys, etc)		
Property Type = SHARED HOUS	SE, No of Units =	4, Occupano	cy = 4, No of Storeys = 2	
Number of Rooms	Total Num	ber of Room	s 5	
a) Sleeping		b) Living Roo	oms	
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	1			
Licence Details				
Commencement date:	29/02/201	6	Duration of licence:	01/11/2020
Commencement date.	29/02/201	O	Duration of ficerice.	01/11/2020
Maximum number of persons	or households į	permitted to	occupy HMO under conditions of	f licence:
Have abolds 4	D	4		
Households 4	Persons	4		
Information referred to a re-	sidential prop	ertv tribuna	al or Lands Tribunal:	
None	,	,		
Decision of Tribunal			Reference number	
	andatory conds, I		larm Systems 6, HMO - Fire Blanke IO - Gas Mandatory conds, HMO -	

Electrical Works, 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 - General Electrical 1, 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.

2015/05914/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

First Floor 47 Blatchington Road Hove BN3 3YJ

Ward

Central Hove

Name & Address of Lice	nce Holder		
Ms Laura Dwyer-Smith, 26 Ho	ove Park Way Hove East Sus	sex BN3 6PT	
Name & Address of Pers	on Managing		
D L Property Services Ltd, 2	Ashford Road Brighton BN1 6	LJ	
Property Description			
Short description of license	ed HMO (No of storeys, etc)		
Property Type = SHARED HO	OUSE, No of Units = 3, Occup	ancy = 3, No of Storeys = 3	
Number of Rooms	Total Number of Ro	oms 4	
a) Sleeping	b) Living I	Rooms	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats	s: 1
Shared Amenities	Number Description	on	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Licence Details			
Commencement date:	19/01/2016	Duration of licence:	01/11/2020
Maximum number of person	ns or households nermitted	to occupy HMO under conditions o	of licence:
		to occupy rimo under conditions (or necince.
Households 3	Persons 3		
Information referred to a	residential property tribu	inal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of L	icence		

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.

2015/05929/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

10A Wilbury Crescent Hove BN3 6FL

Ward

Goldsmid

Name & Address of Licer	ice Holder		
Mr Ian Jones, 9 Vallance Gard	lens Hove BN3 2DB		
Name & Address of Person			
MTM Property Services Ltd, 1	08A Lewes Road Brighton B	N2 4AE	
Property Description			
Short description of license	d HMO (No of storeys, etc)		
Property Type = SHARED HC	-		
	<u> </u>	•	
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	ts: 0
Number of Self Contained F	dis.	Number of Non Sen Cont. Fia	is. 0
Shared Amenities	Number Descript	ion	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	04/02/2016	Duration of licence:	01/11/2020
Commencement date.	04/02/2010	Duration of licence.	01/11/2020
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 trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	m, HMO - Elec Mandatory co	onds, HMO - Fire Blanket, HMO - Fire conds, HMO - Gas Mandatory conds	

Fire - Under Stairs 2, 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 - Licensing Kitchen 1, 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, Ventilation



Licence No.

2015/05938/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

First Floor Flat 38 New England Road Brighton BN1 4GG

Ward

Preston Park

Name & Address of Licence F	older		
Mr David Druiff, 20 Powis Square B	righton East Sussex BN1 3HG		
Name & Address of Person M	anaging		
Property Plus Lettings Ltd, 10 The I	Drive Hove BN3 3JA		
D (D) (
Property Description	O (No. of a town and a)		
Short description of licensed HM			
Property Type = SHARED HOUSE	No of Units = 1, Occupancy = 3	3, No of Storeys = 2	
Number of Rooms	Total Number of Rooms	4	
a) Sleeping 3	b) Living Rooms	1	
, , , ,	, 0		
Number of Self Contained Flats:	0 N ui	mber of Non Self Cont. Flats:	1
			<u> </u>
Shared Amenities Nu	mber Description		
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	2		
Licence Details			
Licence Details			
Commencement date:	06/02/2017 E	Ouration of licence:	01/11/2020
Maximum number of persons or	households permitted to occu	py HMO under conditions of lie	cence:
	•	.,	
Households 3 Per	sons 3		
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 - Fire Doors 5, HMO - Fire Emerger conds, HMO - Gas Mandatory cond	O - Fire Alarm Systems 3, HMO ncy Lighting 1, HMO - Fire Mand	datory conds, HMO - Furniture Ma	andatory

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



Licence No.

2015/06023/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

23A 23 Salisbury Road Hove BN3 3AE

Ward

Brunswick And Adelaide

Name & Address of Licen	ce Holder			
Mr David Ewart, 23 Salisbury I	Road Hove East Sussex BN3 3AE			
Name & Address of Perso	on Managing			
Pembertons (Brighton) Limited	d, 44-46 Old Steine Brighton East Sussex BN1 1NH			
D				
Property Description Short description of licenses	d HMO (No of storous ata)			
-				
Property Type = SHARED HO	USE, No of Units = 1, Occupancy = 4, No of Storeys = 2			
Number of Rooms	Total Number of Rooms 5			
a) Sleeping 4	b) Living Rooms			
Number of Self Contained Fl	Number of Self Contained Flats: 0 Number 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:	29/03/2016 Duration of licence:	01/11/2020		
	26/36/2010	0111112020		
Maximum number of person	s or households permitted to occupy HMO under conditions of	of licence:		
Households 4	Persons 4			
	residential property tribunal or Lands Tribunal:			
None				
Decision of Tribunal	Reference number			
Decision of Tribunal	TOO TO			

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.

2015/06025/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

94A Portland Road Hove BN3 5DN

Ward

Westbourne

Name & Address of Licer	ice Holder		
Heathercrest Enterprises Ltd,	C/o 12 Kingsway House 134	-140 Church Road Hove East Sussex	BN3 2DL
Name & Address of Person	on Managing		
Jonathan Rolls Managing Age	ents, 244 Eastern Road Brigh	ton BN2 5TA	
Property Description			
Short description of license	d HMO (No of storeys, etc)		
Property Type = SHARED HC	OUSE, No of Units = 1, Occup	ancy = 3, No of Storeys = 3	
Number of Rooms	Total Number of Ro	oms 4	
a) Sleeping 3	b) Living	Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats	:: 0
Shared Amenities	Number Descripti	on	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
Commencement date:	10/06/2016	Duration of licence:	01/11/2020
	10/00/2010		0 11 11/2020
Maximum number of persor	is or households permitted	to occupy HMO under conditions o	f licence:
Households 3	Persons 3		
Tiouscrioius	1 0130113		
Information referred to a	residential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	cence		
Carriar & Cr Committee of the			

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory 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.

2015/06036/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

5 Dyke Road Drive Brighton BN1 6AJ

Ward

Preston Park

Name & Address of Licen	ce Holder		
Mr David Symons, 110A St Ja	mes's Street Brighton E	ast Sussex BN2 1TH	
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storevs.	etc)	
·		occupancy = 5, No of Storeys = 2	
Topolty Type Office	00 <u>0</u> , 110 01 01 110 0, 0	5, 110 5, 100 5, 5, 5, 5	
Number of Rooms	Total Number of	of Rooms 6	
a) Sleeping 5	b) Li	ving Rooms 1	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number Desc	cription	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	2		
Licence Details			
_			
Commencement date:	29/02/2016	Duration of licence:	01/11/2020
Maximum number of person	s or households perm	itted to occupy HMO under conditions	of licence:
Households 5	Persons 5	7	
Tiouseriolus 5	0		
Information referred to a	residential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie	rence		
Electrical works, HMO - Elec N	Mandatory conds, HMO	- Fire Mandatory conds, HMO - Furniture	

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.

2015/06043/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

First Floor And Second Floor Flat 74 Highdown Road Hove BN3 6FB

Ward

ard Goldsmid

Name & Address of Licen	ice Holder		
Mr David Sargeant, 50 Shaftes	sbury Road Brighton Ea	st Sussex BN1 4NF	
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, C	Occupancy = 4, No of Storeys = 2	
Number of Rooms	Total Number o	of Rooms 4	
a) Sleeping 3		iving Rooms 1	
a) Sieeping	b) L	Wing Rooms	
Normalis and Colf Countries of F	1-4	Normalism of New Oalf Court Flates	4
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number Desc	cription	
a) Kitchen	1 Desi	Cription	
b) Bathrooms/Showers	2		
c) W.C.s	2		
o,o.c			
Licence Details			
Commencement date:	28/04/2016	Duration of licence:	01/11/2020
Maximum number of person	s or households perm	nitted to occupy HMO under conditions of	licence:
Households 3	Persons 4		
Information referred to a	residential property	tribunal or Lands Tribunal:	
None	residential property	tribuliar of Larius Tribuliar.	
Decision of Tribunal		Reference number	
		Neicicile number	
Summary of conditions of lie		nds, HMO - Fire Alarm Systems 3, HMO - Fi	re Blanket
		1, HMO - Fire General 1, HMO - Fire Manda	

Fire EI / GI / Cupboards 1, HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 3, HMO - Fire Blanket, HMO - Fire Doors 1, HMO - Fire Emergency Lighting 1, HMO - Fire General 1, HMO - Fire Mandatory conds, HMO - Fire Notices 1, 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



Licence No.

2015/06046/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 2 1 Hampton Place Brighton BN1 3DA

Ward

Regency

Name & Address of Licen	ce Holder		
Ms Natasha Hay, 1 Hampton F	Place Brighton East Sussex BN1 3	BDA	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	l HMO (No of storeys, etc)		
Property Type = Not Assigned	, No of Units = 4, Occupancy = 4,	No of Storeys = 3	
Number of Rooms	Total Number of Rooms	5	
a) Sleeping 4	b) Living Room	ns 1	
Number of Self Contained FI	ats: 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			
Commencement date:	22/02/2016	Duration of licence:	01/11/2020
Maximum number of person	s or households permitted to oc	ccupy HMO under conditions of I	icence:
Households 4	Persons 4		
Information referred to a	esidential property tribunal	or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic	cence		
Electrical works, Enlargement	of bedrooms, HMO - Elec Mandate	ory conds, HMO - Fire Blanket, HM iture Mandatory conds, HMO - Gas	

Electrical works, Enlargement of bedrooms, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Glazing / Windows 3, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, 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, Other fire works, Structural fire doors, Structural fire works, electrical work



Licence No.

2015/06055/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Upper Flat 32 Chesham Road Brighton BN2 1NB

Ward

East Brighton

Name & Address of Licen	ce Holder		
Ian Dunkerton, 19 Old London	Road Brighton East Sus	sex BN1 8XR	
Name & Address of Perso	n Managing		
	<u> </u>	Saletan DNO OLID	
Kendrick Property Services Ltd	1, 10 - 12 Lewes Road Br	ignton BN2 3HP	
Property Description			
Short description of license	d HMO (No of storeys, e	tc)	
Property Type = SHARED HO	USE, No of Units = 1, Oc	cupancy = 4, No of Storeys = 3	
Number of Decree	Total Number of	Daama 5	
Number of Rooms	Total Number of		
a) Sleeping 3	b) Livi	ng Rooms 1	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number Descr	intion	
a) Kitchen	1 Descr	iption	
b) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
Commencement date:	12/05/2016	Duration of licence:	01/11/2020
Maximum number of nerson	e or households normit	ted to occupy HMO under conditions of li	iconco:
maximum number of person			icence.
Households 4	Persons 4		
Information referred to a	residential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Mandatory conds, HMO - Fire	Alarm, HMO - Elec Mano Notices 1, HMO - Furnitu	datory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Gas Mandatory	conds,

Enlargement of Bedroom, 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 - Licensing Bathroom 4, 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.

2015/06056/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

29 New England Road Brighton BN1 3TU

Ward

Preston Park

Name & Address of Licence Holder			
Mr Stephen Pavey, Spruce Investments Limited 15-17 Pound Lane Epsom Surrey KT19 8RY			
Name 9 Address of Descent Messarine			
Name & Address of Person Managing			
Brand Vaughan Ltd, 117-118 Western Road Hove East Sussex BN3 1DB			
Property Description			
Short description of licensed HMO (No of storeys, etc)			
Property Type = SHARED HOUSE, No of Units = 4, Occupancy = 4, No of Storeys = 3			
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 a) Kitchen b) Bathrooms/Showers c) W.C.s Number Description 1 2			
Licence Details			
Commencement date: 08/04/2016 Duration of licence:	01/11/2020		
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
Households 0 Persons 4			
Information referred to a residential property tribunal or Lands Tribunal:			
None			
None Decision of Tribunal Reference number			

Fire Alarm, 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, Structural Fire works



Licence No.

2015/06061/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

10 Princes Square Hove BN3 4GE

Ward

Westbourne

Name & Address of Licen		
Mr Joseph Kerridge, 33 Simor	s Walk Englefield Green Surrey TW20 9SJ	
Name & Address of Perso	on Managing	
Maille & Address of Perso	л манауну 	
,		
Property Description		
Short description of license	d HMO (No of storeys, etc)	
Property Type = SHARED HO	USE, No of Units = 1, Occupancy = 4, No of Storeys = 2	
. , , , ,		
Number of Rooms	Total Number of Rooms 9	
a) Sleeping 4	b) Living Rooms 1	
Number of Self Contained F	ats: 0 Number of Non Self Cont. Flat	s: 1
Shared Amenities	Number Description	
a) Kitchen b) Bathrooms/Showers	2	
c) W.C.s	4	
,		
Licence Details		
Commencement date:	10/02/2016 Duration of licence:	01/11/2020
commencement date.	Datation of necinee.	01/11/2020
Maximum number of person	s or households permitted to occupy HMO under conditions	of licence:
Households 0	Persons 4	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lie Fire Alarms, HMO - Elec Mand	cence datory conds, HMO - Fire Mandatory conds, HMO - Furniture Man	datory conds,

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, Ventilation



Licence No.

2015/06076/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Maisonette 152 Church Road Hove BN3 2DL

Ward

Central Hove

Name & Address of Licence	e Holder		
Mr Ashley Bennett, 152 Church		x BN3 2DL	
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed I	HMO (No of storeys, e	tc)	
Property Type = SHARED HOUS			
Number of Rooms	Total Number of	Rooms 5	
a) Sleeping 4	b) Livii	ng Rooms 1	
Number of Self Contained Flat	ts: 0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number Descri	intion	
a) Kitchen	1	ption	
b) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
Commencement date:	30/09/2016	Duration of licence:	01/11/2020
Maximum number of persons	or households permit	ted to occupy HMO under conditions of li	cence:
Households 4 I	Persons 4		
Tiousenoius 7	4		
Information referred to a re	sidential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
- Fire Doors 7, HMO - Fire Gene	IMO - Fire Alarm Syster eral 1, HMO - Fire Mand	ns 3, HMO - Fire Blanket, HMO - Fire Doors atory conds, HMO - Furniture Mandatory co	nds,

HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 3, HMO - Fire Blanket, HMO - Fire Doors 1, HMO - Fire Doors 7, HMO - Fire General 1, 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



Licence No.

2015/06094/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

15 Port Hall Place Brighton BN1 5PN

Ward

Preston Park

Name & Address of Licence	e Holder	
Ms Katherine Evans, Shortbridg	ge Lodge Mill Hill Shortbridge Nr Uckfield East Sussex TN22 3YH	
Name & Address of Persor	n Managing	
1		
D (D) (
Property Description	LIMO (No of storous sto)	
Short description of licensed	• ,	
Property Type = SHARED HOU	JSE, No of Units = 1, Occupancy = 4, No of Storeys = 2	
Number of Rooms	Total Number of Rooms 4	
a) Sleeping 3	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 c) W.C.s	1	
0) W.O.3		
Licence Details		
Commencement date:	29/03/2016 Duration of licence:	01/11/2020
Maximum number of persons	or households permitted to occupy HMO under conditions of I	icence:
Households 0	Persons 4	
ilouseilolus 0	reisons 4	
Information referred to a re	esidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lice Additional Facilities, Electrical V	ence Vorks , Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mand	datory

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.

2015/06155/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat At 115 Sackville Road Hove BN3 3WF

Ward

Goldsmid

Name & Address of Licer	ice Holder		
Mr Narendra Patel, 29 Cobton	Drive Hove BN3 6WF		
Name & Address of Perso	on Managing		
Home James Lets, 134-140 C	hurch Road Hove BN3 6W	/F	
Property Description			
Short description of license	d HMO (No of storeys, et	c)	
Property Type = SHARED HC	USE, No of Units = 1, Occ	cupancy = 4, No of Storeys = 3	
Number of Rooms	Total Number of I	Rooms 4	
a) Sleeping 4	b) Livir	ng Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number Descri	ption	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
_			
Commencement date:	16/05/2017	Duration of licence:	01/11/2020
Maximum number of person	s or households permitt	ed to occupy HMO under conditions of I	icence:
Households 4	Persons 4		
Information referred to a	residential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	, HMO - Fire Blanket, HMC) - Fire Doors 3, HMO - Fire Mandatory con	,

HMO - Elec Mandatory conds, HMO - Fire Blanket, 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 - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



Licence No.

2015/06166/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

27 Beaconsfield Road Brighton BN1 4QH

Ward

Preston Park

Name & Address of Licer	ice Holder		
Mrs Bridget Hicks, C/o Leade	s Ltd 119 - 120 Western R	oad Brighton East Sussex BN1 2AD	
Name & Address of Pers	on Managing		
Leaders Ltd, Becket House 6	Littlehampton Road Worthi	ng BN13 1QE	
Property Description			
Short description of license	d HMO (No of storeys, et	c)	
Property Type = SHARED HC	USE, No of Units = 1, Occ	upancy = 3, No of Storeys = 3	
Number of Rooms a) Sleeping 3	Total Number of F b) Livin	Rooms 5 g Rooms 2	
Number of Self Contained F	lats: 0	Number of Non Self Cont. FI	ats: 1
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Descrip	otion	
Licence Details			
Commencement date:	10/02/2016	Duration of licence:	01/11/2020
Maximum number of persor	s or households permitte	ed to occupy HMO under condition	s of licence:
Households 0	Persons 3		
Information referred to a	residential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li Fire - Under Stairs 2, Fire Ala		conds, HMO - Fire Blanket, HMO - F	ire Mandatory

Fire - Under Stairs 2, 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, Structural Fire works



Licence No.

2015/06186/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

11 Ferndale Road Hove BN3 6EU

Ward

Goldsmid

Name & Address of Licer	ice Holder		
Dr Robert Tudor-Williams, 50	Grove Way Esher Surrey K	T10 8HL	
Name & Address of Person	on Managing		
,			
Property Description			
Property Description Short description of license	d HMO (No of storous, etc	١	
•	•	•	
Property Type = SHARED HC	USE, NO OF UNITS = 1, OCCU	ipancy = 5, No of Storeys = 2	
Number of Rooms	Total Number of R	ooms 7	
a) Sleeping 5	b) Living	Rooms 1	
, , , , , , , , , , , , , , , , , , , ,	,		
Number of Self Contained F	lats: 0	Number of Non Self Cont. F	lats: 1
Shared Amenities	Number Descrip	tion	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Licence Details			
Commencement date:	14/01/2016	Duration of licence:	01/11/2020
		14	
Maximum number of persor	is or nousenoids permitte	d to occupy HMO under condition	S OT IICENCE:
Households 0	Persons 5		
Information referred to a	residential property trib	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li			
HMO - Elec Mandatory conds	, HMO - Fire Mandatory cor	ids, HMO - Furniture Mandatory con-	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, Management/Repairs, Other Fire Works, Structural Fire Works



Licence No.

2015/06219/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

8 Cooksbridge Road Brighton BN2 5HH

			Ward	East Brig	ghton
Name & Address of Licen	ce Holder				
Star Property Investment Mar			siness Centre 325-32	27 Old Shoreham	n Road
Name & Address of Perso	n Managi	ng			
Mr Billy Edwell, Unit E9 Knoll E	3usiness Ce	entre 325-327 Old SI	noreham Road Hove	BN3 7GS	
Property Description		• • • • •			
Short description of licensed	oN) OMH t	of storeys, etc)			
Property Type = BEDSIT, No o	of Units = 5,	Occupancy = 5, No	of Storeys = 2		
Number of Rooms	Tota	al Number of Room	s 6		
a) Sleeping 5		b) Living Ro			
a) Glooping		b) Living 1 to	5/110 <u>-</u>		
Number of Self Contained Fl	ate:	0	Number of Non Se	olf Cont Flate:	1
Number of Sen Contained in	ats.		Number of Non Se	ii Cont. i lats.	ı
Shared Amenities	Number	Description			
a) Kitchen	1				
b) Bathrooms/Showers	2				
c) W.C.s	2				
Lieuwe Betelle			_		_
Licence Details					
Commencement date:	26/	/01/2016	Duration of licer	nce:	01/11/2020
Maximum number of person	s or house	holds permitted to	occupy HMO under	conditions of li	cence.
	3 Of House		occupy rimo unuci	conditions of it	conce.
Households 0	Persons	5			
Information referred to a	residentia	l property tribuna	al or Lands Tribun	al:	
None					
Decision of Tribunal			Reference	number	
Summary of conditions of lie		Mandatory conds	HMO - Furniture Mand	datory 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 -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



Licence No.

2015/06247/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

13 Montpelier Place Brighton BN1 3BF

Ward

Brunswick And Adelaide

Name & Address of Licer	ice Holder		
Mr Pratap Joshi, Parkton Lodo	ge Rest Home 286 Dyke R	oad Brighton East Sussex BN1 5BA	
Name & Address of Perso	on Managing		
1			
Property Description			
Short description of license	d HMO (No of storeys, etc	;)	
Property Type = SHARED HC	USE, No of Units = 1, Occi	upancy = 3, No of Storeys = 2	
Number of Rooms	Total Number of R	Rooms 3	
a) Sleeping 3	Β) Είνιη	g Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats:	1
Observat Association	Noveles Descrip	Al a re	
Shared Amenities a) Kitchen	Number Descrip	otion	
b) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
Commencement date:	28/04/2016	Duration of licence:	01/11/2020
Maximum number of person	s or households permitte	ed to occupy HMO under conditions of I	icence:
Households 3	Persons 3		
Information referred to a	residential property tri	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li HMO - Elec Mandatory conds		s 3, HMO - Fire Blanket, HMO - Fire Doors	s 1, HMO

- Fire Doors 7, 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



Licence No.

2015/06261/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

9 St Johns Road Hove BN3 2FB

Ward

Brunswick And Adelaide

Name & Address of Licen	ice Holder	
Mr Simeon Bowes, 17 Montpe	lier Road Brighton East Sussex BN1 2LQ	
Name & Address of Perso		
Brand Vaughan Ltd, 110 St Ge	eorges Road Brighton East Sussex BN2 1EA	
Property Description		
Short description of licensed	d HMO (No of storeys, etc)	
•	USE, No of Units = 1, Occupancy = 6, No of Storeys = 2	
Troporty Type – STIAILED TIO	OGE, NO OF OTHER - 1, Occupancy - 0, NO OF Otorcys - 2	
Number of Rooms	Total Number of Rooms 7	
a) Sleeping 6	b) Living Rooms	
Number of Self Contained Fl	lats: 0 Number of Non Self Cont. Fla	ats: 1
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	2 2	
c) W.C.s		
Licence Details		
0	47/00/0040	04/44/0000
Commencement date:	17/02/2016 Duration of licence:	01/11/2020
Maximum number of person	s or households permitted to occupy HMO under conditions	s of licence:
Households 0	Persons 6	
TIOUS U	1 0130113	
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	L. 11140

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory 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 Work



Licence No.

2015/06282/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 3 3 Montpelier Place Brighton BN1 3BF

Ward

Regency

Name & Address of Licen	ce Holder		
Millmead Properties Ltd, 50 W	est Street Chichester	West Sussex PO19 1RP	
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 = 3, No of Storeys = 2	
Number of Rooms	Total Number	of Rooms 5	
a) Sleeping 3	b) L	iving Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number Des	scription	
a) Kitchen	1		
o) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
Commencement date:	08/02/2016	Duration of licence:	01/11/2020
Maximum number of nersen	o or bougebolde new	witted to eccury UNO under conditions of l	iaanaa
waximum number of person	s or nousenoids pern	nitted to occupy HMO under conditions of I	icence:
Households 0	Persons 3		
nformation referred to a	residential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	cence		
		IMO - 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, Structural Fire Door



Licence No.

2015/06294/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

1A Campbell Road Brighton BN1 4QD

Ward

Preston Park

Name & Address of Licence	e Holder		
Mr Simeon Bowes, 17 Montpelle	er Road Brighton East S	ussex BN1 2LQ	
Name & Address of Person	n Managing		
Brand Vaughan Ltd, 110 St Geo	orges Road Brighton Eas	st Sussex BN2 1EA	
Property Description			
Short description of licensed	HMO (No of storeys, et	tc)	
Property Type = SHARED HOU	SE, No of Units = 1, Occ	cupancy = 4, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 5	
a) Sleeping 4	b) Livii	ng Rooms 1	
Number of Self Contained Fla	ts : 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	1		
Licence Details			
Commencement date:	17/02/2016	Duration of licence:	01/11/2020
Commoncomone dato.	11702/2010	Burdion of hooned.	0111112020
Maximum number of persons	or households permitt	ted to occupy HMO under conditions	of licence:
Households 0	Persons 4		
nousenolus	reisolis 4		
Information referred to a re	esidential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
0			
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, Other Fire Work



Licence No.

2015/06297/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

105 Queensway Brighton BN2 0FA

Ward

East Brighton

			Walu	Last Dit	giitori
Name & Address of Licer	nce Holder				
Mr Simeon Bowes, 17 Montpe		iton East Susse	ex BN1 2LQ		
Name & Address of Pers	on Managing				
Brand Vaughan Ltd, 110 St G	eorges Road B	righton East Su	ıssex BN2 1EA		
Property Description					
Short description of license	d HMO (No of	storeys, etc)			
Property Type = SHARED HC	USE, No of Un	its = 1, Occupa	ancy = 6, No of Storeys = 2		
Number of Rooms	Total N	lumber of Roc	oms 7		
	Totalit				
a) Sleeping 6		b) Living F	ROOMS		
Number of Self Contained F	(late)	0	Number of Non Self C	Cont Flate:	1
Number of Self Contained F	iais.		Number of Non Sen C	Joint. Flats.	ı
Shared Amenities	Number	Description	on		
a) Kitchen	2	•			
b) Bathrooms/Showers	2				
c) W.C.s	2				
Licence Details					
License Details					
Commencement date:	17/02/	/2016	Duration of licence	:	01/11/2020
Maximum number of persor	ıs or househol	lds permitted f	to occupy HMO under co	nditions of li	cence:
	г				
Households 0	Persons	6			
Information referred to a	residential p	roperty tribu	nal or Lands Tribunal:		
None					
Decision of Tribunal			Reference nu	ımber	
Summary of conditions of li			LINO Francisture Mandata		10. 000

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory 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 Work



Licence No.

2015/06356/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Top Floor 20 Bedford Place Brighton BN1 2PT

Ward

Regency

Name & Address of Licence Mr Bruce Cecil, C/o Homelets 4		1 2PA	
Name & Address of Person Homelets (Brighton) Ltd, 47 Nor		N.	
Property Description Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOU	SE, No of Units = 1, Occupand	cy = 4, No of Storeys = 4	
Number of Rooms a) Sleeping 4	Total Number of Room b) Living Roo		
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 1 1		
Licence Details			
Commencement date:	07/06/2016	Duration of licence:	01/11/2020
Maximum number of persons	or households permitted to	occupy HMO under conditions of	licence:
Households 4	Persons 4		
Information referred to a re	sidential property tribuna	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
HMO - Furniture Mandatory con- Property Chges Mandatory cond	IMO - Fire Blanket, HMO - Fire ds, HMO - Gas Mandatory cor ls, HMO - Property Maint Man O - Repairs Steps etc 6, HMO	e Mandatory conds, HMO - Fire Noticends, HMO - Licensing Bathroom 4, Hdatory conds, HMO - Repairs Bathro - Repairs Ventilation 3, HMO - Rubbanagement / Repairs	MO - om 17,



Licence No.

2015/06370/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

6 Portland Mews Brighton BN2 1EQ

Ward

East Brighton

Name & Address of Licence	e Holder	
Mr Arthur Wood, 2379 Harbour	Oaks Drive Longboat Key Florida USA 34228	
Name & Address of Person	n Managing	
Leaders Ltd, Becket House 6 Li	ttlehampton Road Worthing West Sussex BN13 1QE	
Property Description		
Short description of licensed	HMO (No of storeys, etc)	
Property Type = SHARED HOU	SE, No of Units = 4, Occupancy = 4, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 4	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		
c) W.C.s	2	
Licence Details		
Licence Details		
Commencement date:	23/02/2016 Duration of licence:	01/11/2020
Maximum number of persons	or households permitted to occupy HMO under conditions of	liconco:
maximum number of persons	or nouseholds permitted to occupy rimo under conditions or	incerice.
Households 4	Persons 4	
lusta	a i dandi al umana ata taiba a al angle Taiba angle	
	esidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lice	ence Flec Mandatory conds. HMO - Fire Mandatory conds. HMO - Furn	ituro
FILE AIGHTS, FILE DOOLS, FIND -	EIEC IVIANUALUI V CUNUS. MIVIO - FITE IVIANUALUI V CUNUS. MIVIO - FUM	ILUI C

Fire Alarms, 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, Management/Repairs, Other fire works, Structural fire works



Licence No.

2015/06390/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 4 8 Walpole Terrace Brighton BN2 0EB

Ward

Queen's Park

Name & Address of Licence Holder	
Mrs Janet Tait, 8 Hillbrow Road Brighton East Sussex BN1 5JP	
Name & Address of Person Managing	
Mr Anthony Uden, C/o Undens Estate Agent 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 = 4, No of Storeys = 2)
Troperty Type – or Mike Bitte oct., No or office – 1, Occupancy – 4, No or otoreys – 2	•
Number of Rooms Total Number of Rooms 4	
a) Sleeping b) Living Rooms 1	
Number of Self Contained Flats: 0 Number of Non Self C	Cont. Flats:
Shared Amenities Number Description	
a) Kitchen 1	
b) Bathrooms/Showers 1	
c) W.C.s	
Licence Details	
Commencement date: 03/03/2016 Duration of licence	91/11/2020
Commencement date. 03/03/2010 Duration of licence	01/11/2020
Maximum number of persons or households permitted to occupy HMO under co	nditions of licence:
Households 4 Persons 4	
11000110110	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference nu	ımber
Summary of conditions of licence	Harris Manual Atama and a la

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.

2015/06440/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

4 Paston Place Brighton BN2 1HA

Ward

East Brighton

Name & Address of Licen	ce Holder		
SAFRE S.A., 0222 25 Oxley W	/alk Singapore 23859	95	
Name & Address of Perso	n Managing		
S J Lettings Ltd, 52 Lewes Roa	ad Brighton BN2 3HW	V	
Property Description			
Short description of licensed	l HMO (No of storey	rs, etc)	
Property Type = SHARED HO	USE, No of Units = 5,	, Occupancy = 5, No of Storeys = 2	
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	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
License Betails			
Commencement date:	07/03/2016	Duration of licence:	01/11/2020
Maximum number of persons	s or households pei	rmitted to occupy HMO under conditions of I	licence:
Households 5	Persons 5		
	rasidantial nuanam	to taile and and a Taile and	
	residentiai properi	ty tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	HMO - Fire Mandato	ry conds, HMO - Furniture Mandatory conds, H HMO - Property Chges Mandatory conds, HMO	

HMO - Elec Mandatory conds, 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.

2015/06444/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

118 Westbourne Street Hove BN3 5FA

Ward

Westbourne

Name & Address of Licenc	e Holder		
Mr Ashley Bennett, 118 Westbo	urne Street Hove Eas	st Sussex BN3 5FA	
Name & Address of Persor	Managing		
1			
Property Description			
Short description of licensed	HMO (No of storeys	s, etc)	
Property Type = SHARED HOU	SE, No of Units = 1, 0	Occupancy = 3, No of Storeys = 2	
Number of Rooms	Total Number	of Rooms 5	
a) Sleeping 4		Living Rooms 1	
a) Sieeping 4	b) L	Living Rooms	
Number of Solf Contained Ele	ts: 0	Number of New Solf Cont. Flate	: 1
Number of Self Contained Fla	.s. 0	Number of Non Self Cont. Flats	. <u>I</u>
Shared Amenities	Number Des	scription	
a) Kitchen	1 Des	Scription	
b) Bathrooms/Showers	1		
c) W.C.s	1		
L'acces Details			
Licence Details			
Commencement date:	30/09/2016	Duration of licence:	01/11/2020
Maximum number of persons	or households pern	nitted to occupy HMO under conditions of	flicence:
Households 3	Persons 3		
nformation referred to a re	sidential property	/ tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	- Elec Mandatory co	onds, HMO - Fire Alarm Systems 3, HMO - Fi	

Fire EI / GI / Cupboards 1, HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 3, HMO - Fire Doors 1, HMO - Fire Doors 7, 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



Licence No.

2015/06449/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

17 Castle Street	
Brighton	
BN1 2HD	

Ward

	Regency
Name & Address of Licence Holder	
	guero Drighton DN4 2DA
Mr & Mrs Richard & Amanda Smith, C/o Homelets 47 Norfolk Sc	quare Brighton BNT ZPA
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	v = 3, No of Storeys = 3
Number of Rooms Total Number of Rooms	4
a) Sleeping b) Living Room	ms 1
Number of Self-Contained Flate.	Number of New Colf Cont. Flate:
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	
Commencement date: 20/04/2016	Duration of licence: 01/11/2020
Maximum number of persons or households permitted to or	ccupy HMO under conditions of licence:
Households 3 Persons 3	
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, H	HMO - Fire Mandatory conds, HMO -

Furniture Mandatory 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, Other Fire works



Licence No.

2015/06458/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

1 Iden Close Brighton BN2 5GT

Ward

East Brighton

Name & Address of Licen	ce Holder		
Mrs Tara Whittington, 38 Hend	don Street Brighton East	Sussex BN2 0EG	
Name & Address of Perso	on Managing		
(
Property Description			
Short description of license	d HMO (No of storeys,	etc)	
Property Type = Not Assigned	, No of Units = 7, Occup	pancy = 8, No of Storeys = 2	
Number of Rooms	Total Number o	of Rooms 9	
a) Sleeping 7		ving Rooms 1	
a) Sieeping	D) Liv	ving Rooms	
N 1		N	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ats: 1
Shared Amenities	Number Desc	cription	
a) Kitchen	1 Desc	прион	
o) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	28/01/2016	Duration of licence:	01/11/2020
	20/01/2010		01111/2020
Maximum number of person	s or households permi	itted to occupy HMO under conditions	of licence:
Households 0	Persons 8		
	3		
Information referred to a	residential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li		- Fire Mandatory conds, HMO - Furnitur	a Mandatory

Electrical Works, HMO - Elec Mandatory conds, 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.

2015/06469/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 3 32 Bedford Square Brighton BN1 2PL

Ward

Regency

Name & Address of Licen	ce Holder		
Mrs Jacqueline Sinclair, C/o Ho		are Brighton BN1 2PA	
· · · · · · · · · · · · · · · · · · ·	·	<u> </u>	
Name & Address of Perso	n Managing		
Homelets (Brighton) Ltd, 47 No	orfolk Square Brighton E	BN1 2PA	
Property Description			
Short description of licensed	I HMO (No of storeys,	etc)	
Property Type = SHARED HO	JSE, No of Units = 1, C	occupancy = 4, No of Storeys = 2	
Number of Rooms	Total Number o	of Rooms 4	
a) Sleeping 4		ving Rooms 1	
a) clooping	5) 2.	ving recome	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Flats	s: 1
Trained of Contained 1		Number of Non Con Contain had	, <u> </u>
Shared Amenities	Number Desc	cription	
a) Kitchen	1	•	
b) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
Commencement date:	07/06/2016	Duration of licence:	01/11/2020
Maximum number of persons	s or households perm	itted to occupy HMO under conditions o	of licence:
Households 4	Persons 4		
Information referred to a r	esidential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	MO - Elec Mandatory c	onds, HMO - Fire Mandatory conds, HMO Gas Mandatory conds, HMO - Property Ch	

Electrical Works, Fire Alarm, 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 - Repairs Ventilation 3, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



Licence No.

2015/06474/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO) 20 Fonthill Road Hove BN3 6HD

Ward

Goldsmid

Number of Rooms		er of Rooms 6	
a) Sleeping 4	b	b) Living Rooms 1	
Number of Self Contained F	lats:	0 Number of Non Self Co	ont. Flats: 1
Shared Amenities	Number D	Description	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
•	02/09/2016	Duration of licence:	01/11/2020
Commencement date:			
Maximum number of person		ermitted to occupy HMO under con	ditions of licence:
Maximum number of person	ns or households pe		ditions of licence:
Maximum number of person Households 4	Persons 4	1	ditions of licence:
Maximum number of person Households 4 Information referred to a	Persons 4		ditions of licence:
Maximum number of person Households 4	Persons 4	1	
Maximum number of person			ditions of licence:

- Fire Doors 5, HMO Fire Mandatory conds, HMO Fire Notices 1, 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



Licence No.

2015/06479/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

32 Cowfold Road Brighton BN2 5EN

Ward

East Brighton

lame & Address of Licence Holder
star Racing Ltd, Unit E9 Knoll Business Centre 325-327 Old Shoreham Road Hove BN3 7GS
lame & Address of Person Managing
Ir Billy Edwell, Unit E9 Knoll Business Centre 325-327 Old Shoreham Road Hove BN3 7GS
Nucusarius Descutinations
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 6, Occupancy = 6, No of Storeys = 2
lumber of Rooms 7
) Sleeping b) Living Rooms 1
lumber of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1
Shared Amenities Number Description
) Kitchen 0
) Bathrooms/Showers 2
) W.C.s 2
icence Details
04/44/9999
Commencement date: 24/05/2016 Duration of licence: 01/11/2020
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
louseholds 6 Persons 6
nformation referred to a residential property tribunal or Lands Tribunal:
lone
Pecision of Tribunal Reference number
Summary of conditions of licence Additional facilities, Electrical works, Gas certificates, HMO - Elec Mandatory conds, 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, Loft Insulation, Structural Fire works, Structural fire works



Licence No.

2015/06533/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

10B Cambridge Grove Hove BN3 3ED

Ward

Goldsmid

Name & Address of Licence Holder	
Mr Guy Frazier, 10 Clayton Avenue Hassocks West Sussex BN6 8HB	
Name & Address of Person 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 = 3, No of Storeys = 3	
Number of Rooms Total Number of Rooms 4	
a) Sleeping b) Living Rooms 1	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1	
Shared Amenities Number Description 1 b) Bathrooms/Showers 1 c) W.C.s Description	
Licence Details	
Commencement date: 29/02/2016 Duration of licence: 01/11/202	.0
Maximum number of persons or households permitted to occupy HMO under conditions of licence:	
Households 3 Persons 3	
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	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory 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 Work



Licence No.

2015/06534/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

116 Osborne Road Brighton BN1 6LU

Ward

Preston Park

Name & Address of Licen		
Mrs Rachel Morarjee, Flat 1-1	43 Qijiayuan Diplomatic Compound 9 Jianguomenwai Avenue Beijin	g China
Name & Address of Perso	on Managing	
Parks Lettings, 107 Queens R	oad Brighton East Sussex BN1 3XF	
Property Description		
Short description of license	d HMO (No of storeys, etc)	
Property Type = SHARED HO	USE, No of Units = 4, Occupancy = 4, No of Storeys = 3	
Name to a f Danier	Total Number of Beams 6	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 4	b) Living Rooms 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	1 2	
C) VV.O.S		
Licence Details		
Commencement date:	07/03/2016 Duration of licence:	01/11/2020
Maximum number of person	s or households permitted to occupy HMO under conditions of li	conco:
maximum number of person	s of flousefiolds permitted to occupy filmo under conditions of h	cence.
Households 4	Persons 4	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lie		
	latory conds, HMO - Fire Blanket, HMO - Fire Emergency Lighting 1, Fire doors, HMO - Furniture Mandatory conds, HMO - Gas Mandatory	

Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Emergency Lighting 1, HMO - Fire Mandatory conds, HMO - Fire doors, 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, HMO- Fire doors, HMO-Fire doors, Management/Repairs



Licence No.

2015/06535/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Ground Floor 40 New England Road Brighton BN1 4GG

Ward

Preston Park

Name & Address of Lice	nce Holder		
Mr Matthew Sorokin, 77A Ru	tland Road Hove I	East Sussex BN3 5FE	
Name & Address of Pers	on Managing		
Geneva Investment Group Lt	d, 77A Rutland Ro	oad Hove BN3 5FE	
Daniel Description			
Property Description	nd HMO (No of st	torque atc)	
Short description of license	•	•	
Property Type = SHARED H	JUSE, NO OF UNITS	s = 1, Occupancy = 3, No of Storeys = 2	
Number of Rooms	Total Nu	mber of Rooms 4	
a) Sleeping 3		b) Living Rooms 1	
Number of Self Contained I	Flats:	0 Number of Non Self Cont. Flats:	1
Shared Amenities	Number	Description	
a) Kitchenb) Bathrooms/Showers	3		
c) W.C.s	2		
Licence Details			
Commencement date:	24/02/20	016 Duration of licence:	01/11/2020
Massinassus assumbass of source			
waximum number of perso	ns or nousenoid:	s permitted to occupy HMO under conditions of I	icence:
Households 0	Persons	3	
Information referred to a	residential pro	porty tribunal or Landa Tribunal	
None	residential pro	operty tribunal or Lands Tribunal:	
Decision of Tribunal		Reference number	
Summary of conditions of I Fire Alarm, HMO - Elec Mand		O - Fire Mandatory conds. HMO - Fire Notices 1. HM	O -

Fire Alarm, 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 - Repairs Ventilation 2, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Other Fire works



Licence No.

2015/06597/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

168 Westbourne Street Hove BN3 5FB

Ward

Westbourne

Name & Address of Licen	ce Holder		
	Road Hove East Sussex BN3 2TN		
•			
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	• • • •		
Property Type = SHARED HO	USE, No of Units = 1, Occupancy = 3, No of	Storeys = 2	
Number of Rooms	Total Number of Rooms 5		
a) Sleeping	b) Living Rooms		
,	, 0		
Number of Self Contained FI	ats: 0 Number of	Non Self Cont. Flat	s: 1
Shared Amenities	Number Description		
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
		,	
Commencement date:	21/03/2016 Duration	of licence:	01/11/2020
Maximum number of person	s or households permitted to occupy HM0	O under conditions of	of licence:
Households 3	Persons 3		
nousellolus 3	Persons 3		
Information referred to a I	esidential property tribunal or Lands	Tribunal:	
None			
Decision of Tribunal	Re	eference number	
Summary of conditions of lic	ence		

Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - General 2, HMO - General 6, HMO - General Electrical 1, HMO - General Planning, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Heating, Management/Repairs, Other fire works, Structural fire works, Ventilation



Licence No.

2015/06598/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

1 Brooker Street Hove BN3 3YX

Ward

Central Hove

Name & Address of Licence Hold	er	
Hammerton Settlement, Prestbury Quar		
Name & Address of Person Mana	ging	
,		
Property Description		
Short description of licensed HMO (N		
Property Type = SHARED HOUSE, No	of Units = 1, Occupancy = 4, No of Storeys = 2	
Number of Rooms To	otal Number of Rooms 5	
a) Sleeping	b) Living Rooms	
, , , , ,	, <u> </u>	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flat	s: 1
Shared Amenities Number	er Description	
a) Kitchen 1		
b) Bathrooms/Showers 1		
c) W.C.s2		
Licence Details		
Commencement date:	Duration of licence:	01/11/2020
Maximum number of persons or house	seholds permitted to occupy HMO under conditions	of licence:
Haveabalds A Barran		
Households 4 Person	s 4	
Information referred to a resident	ial property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	

Fire - Under Stairs 1, HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 3, HMO - Fire Mandatory conds, HMO - Furniture Mandatory 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.

2015/06600/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat C 50 Denmark Villas Hove BN3 3TE

Ward

Goldsmid

N 0.411 (11		
Name & Address of Licen		
Mrs Alex Thompson, C/o Home	elets (Brighton) Ltd 47 Norfolk Square Brighton East Susse	ex BN1 2PA
Name O Address of Dame	- Managhan	
Name & Address of Perso		
Homelets (Brighton) Ltd, 47 No	orfolk Square Brighton BN1 2PA	
Branarty Description		
Property Description Short description of licensed	HMO (No of storous atc)	
•	• • •	
Property Type = SHARED HO	USE, No of Units = 1, Occupancy = 3, No of Storeys = 2	
Number of Rooms	Total Number of Rooms 4	
a) Sleeping 3	b) Living Rooms 1	
Number of Self Contained Fl	ats: 0 Number of Non Self Co	nt. Flats:
Number of Sen Contained Fi	ats. 0 Number of Non Sen Co.	III. Fiais.
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Commencement date:	07/06/2016 Duration of licence:	01/11/2020
Commencement date.	Duration of ficence.	01/11/2020
Maximum number of person	s or households permitted to occupy HMO under cond	litions of licence:
Households 3	Persons 3	
nousellolus 3	reisons	
Information referred to a r	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference num	ber
Summary of conditions of lie	20000	
Summary of conditions of lic	cence story conds_HMO - Fire Blanket_HMO - Fire Mandatory co	ands HMO - Fire

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, Management / Repairs



Licence No.

2015/06602/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 4
3 Bedford Place
Brighton
BN1 2PT

Ward

Regency

Name & Address of Licen	ce Holder		
Mr Mike Foottit, C/o 47 Norfolk	Square Brighton Bl	N1 2PA	
Name & Address of Perso	n Managing		
Homelets (Brighton) Ltd, 47 No	orfolk Square Brighto	on BN1 2PA	
Property Description			
Short description of license	d HMO (No of store	eys, etc)	
Property Type = SHARED HO	USE, No of Units =	1, Occupancy = 3, No of Storeys = 2	
Number of Rooms	Total Number	er of Rooms 4	
a) Sleeping 3	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	1		
c) W.C.s	1		
License Details			
Licence Details			
Commencement date:	07/06/2016	Duration of licence:	01/11/2020
M			
Maximum number of person	s or nousenoias pe	ermitted to occupy HMO under conditions of	ilcence:
Households 3	Persons 3	3	
Information referred to a	residential prope	rty tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lie	cence		
Electrical Works, HMO - Elec I	Mandatory conds, HI	MO - Fire Blanket, HMO - Fire Mandatory conds HMO - Gas Mandatory conds, HMO - Property	

Electrical Works, 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



Licence No.

2015/06609/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

			ward	Regei	ncy
Name & Address of Lice	nce Holder				
Ms Christine Park, 5 Gundre	da Road Lewes	East Sussex BN	7 1PT		
Name & Address of Pers		DNA ALIII			
Graves, Son & Pilcher, 51 Ol	a Steine Brighto	N RN1 1HO			
Property Description					
Short description of license	ed HMO (No of	storeys, etc)			
Property Type = SHARED He	OUSE, No of Un	its = 1, Occupand	cy = 4, No of Store	ys = 3	
Number of Rooms	Total N	lumber of Room	ıs 5		
a) Sleeping 4		b) Living Roo			
a, clooping		b) Living ite	<u> </u>		
Number of Self Contained	Flats:	0	Number of Non	Self Cont. Flats:	0
			1		
Shared Amenities	Number	Description			
a) Kitchen	1				
b) Bathrooms/Showers	2				
c) W.C.s	3				
Licence Details					
Commencement date:	29/02/	2016	Duration of lie	cence:	01/11/2020
Maximum number of perso	no or househol	do normittad to	accury HMO una	lor conditions of li	ioonoo
maximum number of perso	iis or nousenor	us permitted to	occupy rivio und	ier conditions of i	icerice.
Households 4	Persons	4			
Information referred to a	residential p	roperty tribuna	al or Lands Trib	unal:	
None					
Decision of Tribunal			Referer	ice number	
Summary of conditions of HMO - Flec Mandatory condi		andatory conds. I	HMO - Furniture M	andatory 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, Other Fire Work



Licence No.

2015/06620/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

23 New England Road Brighton BN1 3TU

Ward

Preston Park

Name & Address of Licence Holder					
Mr Mark Wickenden, 47 Norfolk Square Brighton East Sussex 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 = 3, No of Storeys = 2					
Number of Rooms Total Number of Rooms 4					
a) Sleeping b) L	ving Rooms 1				
Number of Self Contained Flats: 0	Number of Non Self Cont. Flats: 1				
Shared Amenities Number Des	cription				
a) Kitchen 1					
b) Bathrooms/Showers 1					
c) W.C.s					
Licence Details					
Licence Details					
Commencement date: 07/06/2016	Duration of licence: 01/11/2020				
Maximum number of persons or households permitted to occupy HMO under conditions of licence:					
Households 3 Persons 3					
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 - Fire					

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 - Repairs Bathroom 16, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural Fire Works



Licence No.

2015/06642/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 5 Preston Lodge 10 Little Preston Street Brighton RN1 2HO Regency

Ward

Name & Address of Licen	ce Holder				
Mr Gerald Cole, 47 Norfolk Square Brighton East Sussex BN1 2PA					
Name & Address of Person Managing					
Homelets (Brighton) Ltd, 47 No	orfolk Square Brighton I	BN1 2PA			
B (B) (
Property Description					
Short description of licensed HMO (No of storeys, etc)					
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 4, No of Storeys = 2					
Number of Rooms Total Number of Rooms 4					
a) Sleeping 4	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				
Licence Details					
Commencement date:	07/06/2016	Duration of licence:	01/11/2020		
Maximum number of persons or households permitted to occupy HMO under conditions of licence:					
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

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, Management / Repairs, Structural Fire Works



Licence No.

2015/06653/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

First Floor And Second Floor Flat 6 Connaught Road Hove RN3 3WB

Ward

Central Hove

Name O Address of Lance Halden	
Name & Address of Licence Holder	
Mr Cavan Kane, C/o Homelets 47 Norfolk Square E	righton BN1 2PA
Name & Address of Person Managing	
	- DN4 2DA
Homelets (Brighton) Ltd, 47 Norfolk Square Brighto	1 BN I ZPA
Property Description	
Short description of licensed HMO (No of store)	rs, etc)
Property Type = SHARED HOUSE, No of Units = 1	
Troporty Type Critical Treeses, No or office T	o, no or otoroya
Number of Rooms Total Number	r of Rooms 4
a) Sleeping b)	Living Rooms 1
Number of Self Contained Flats:	Number of Non Self Cont. Flats: 1
Shared Amenities Number De	escription
a) Kitchen 1	·
b) Bathrooms/Showers 1	
c) W.C.s	
Licence Details	
·	
Commencement date: 07/06/2016	Duration of licence: 01/11/2020
Maximum number of persons or households pe	rmitted to occupy HMO under conditions of licence:
Households 3 Persons 3	
riouseriolus 3 Feisolis 3	
Information referred to a residential proper	ty tribunal or Lands Tribunal:
None	
Decision of Tribunal	Reference number
	y conds, HMO - Fire Blanket, HMO - Fire Mandatory datory conds, HMO - Gas Mandatory conds, HMO -

Electrical Works, 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 - Repairs Ventilation 2, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire works, Structural Fire works



Licence No.

2015/06696/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 4 1 Palmeira Avenue Hove BN3 3GA

Ward

Brunswick And Adelaide

Name & Address of Licen	ice Holder		
Mr John Hill, 4 Shirley Avenue			
Name & Address of Perso	on Managing		
Mr Harry Young, 44 Valley Dri	ve Brighton East Sussex B	N1 5FA	
Property Description			
Short description of license	-		
Property Type = SHARED HO	USE, No of Units = 1, Occi	upancy = 3, No of Storeys = 2	
Number of Rooms	Total Number of R	Rooms 5	
a) Sleeping 3	b) Livin	g Rooms 1	
-,	-,	5	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats	: 0
Shared Amenities	Number Descrip	otion	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
Commencement date:	22/06/2016	Duration of licence:	01/11/2020
Maximum number of person	s or households permitte	ed to occupy HMO under conditions of	f licence:
Households 3	Persons 3		
Information referred to a	residential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of liv Elec cert, Gas certificates, HM		re Doors 3, HMO - Fire Doors 5, HMO - F	Fire

Elec cert, Gas certificates, HMO - Fire Blanket, HMO - Fire Doors 3, HMO - Fire Doors 5, 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, Ventilation



Licence No.

2015/06705/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat A 91 Sackville Road Hove BN3 3WF

Ward

Goldsmid

Name & Address of Licen	ce Holder			
Ms Karen Bradfield, 91 Sackvil	lle Road Hove East	st Sussex BN3	3 3WF	
Name & Address of Perso	n Managing			
G K White Estate Agents, 165	Lewes Road Bright	nton BN2 3LD		
Property Description				
Short description of licensed	HMO (No of store	reys, etc)		
Property Type = SHARED HO	USE, No of Units =	= 1, Occupano	cy = 4, No of Storeys = 2	
Number of Rooms		ber of Room		
a) Sleeping 4		b) Living Roo	oms 1	
Number of Self Contained Fl	ats:	0	Number of Non Self Cont. Flats:	0
Shared Amenities	Number I	Description		
a) Kitchen	1			
b) Bathrooms/Showers	1			
c) W.C.s	1			
Licence Details				
Commencement date:	01/03/2016	6	Duration of licence:	01/11/2020
Maximum number of persons	s or households p	permitted to	occupy HMO under conditions of I	icence:
Households 4	Persons	4		
Houselloids 4	reisons	4		
Information referred to a r	esidential prope	erty tribuna	l or Lands Tribunal:	
None				
Decision of Tribunal	of Tribunal Reference number			
Summary of conditions of lic	cence			
Additional Facilities, HMO - Ele	ec Mandatory cond		e Mandatory conds, HMO - Furniture erty Chges Mandatory conds, HMO -	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 - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Work



Licence No.

2015/06728/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

64A Beaconsfield Road Brighton BN1 4QJ

Ward

Preston Park

Name & Address of Licence Holder
Mr Rupert Radcliffe-Genge, 2 Royal Crescent Mews Brighton BN2 1AW
Name & Address of Person Managing
Sure Property Solutions, 31 Upper St James' Street Brighton BN2 2JN
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 4, No of Storeys = 2
Number of Rooms Total Number of Rooms 4
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 1
b) Bathrooms/Showers 1
c) W.C.s
Licence Details
Commencement date: 01/03/2016 Duration of licence: 01/11/2020
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
——————————————————————————————————————
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 Enlargement of Bedrooms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture

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, Structural Fire Work, Ventilation



Fire Works, Ventilation

Licence No.

2015/06734/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 3 17 York Villas Brighton BN1 3TS

Ward

Preston Park

Name & Address of Licen	ce Holder			
17 York Villas Brighton Ltd, 17	York Villas Brighton East	Sussex BN1 3TS		
Name & Address of Perso	n Managing			
Gerald Peck, Flat 2 17 York Vi	llas Brighton East Sussex	BN1 3TS		
Duna antic Dana sintia a				
Property Description	LIMO (No of otomove of	-1		
Short description of licensed	•	•		
Property Type = SHARED HOL	JSE, No of Units = 1, Occ	supancy = 3, No of Storeys = 3		
Number of Rooms	Total Number of I	Rooms 4		
a) Sleeping 3	b) Livir	ng Rooms 1		
Number of Self Contained Fla	ats: 0	Number of Non Self Cont. Fla	ats: 0	
Shared Amenities	Number Descri	ption		
a) Kitchen	1			
b) Bathrooms/Showers	2			
c) W.C.s	2			
Licence Details				
License Betaile				
Commencement date:	15/06/2016	Duration of licence:	01/11/2020	
Maximum number of persons	e or households permitt	ed to accury HMO under conditions	of licence:	
maximum number of persons	or nouseholds permitt	ed to occupy HMO under conditions	of licelice.	
Households 3	Persons 3			
		bunal and anda Tuibunali		
Information referred to a r	esidential property tr	bunal or Lands Tribunal:		
None				
Decision of Tribunal		Reference number		
Summary of conditions of lic				
		nds, HMO - Fire General 1, HMO - Fire		
		al 1, HMO - General 6, HMO - Genera ty Maint Mandatory conds, HMO - Rub		
Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Works, Other Fire works, Structural				



Licence No.

2015/06749/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

70 Bennett Road Brighton BN2 5JL

Ward

East Brighton

Name & Address of Licen	ce Holder			
Mrs Jane Moore, 31The Moun	t Leatherhead Sur	rey KT22 9EE	}	
Name & Address of Perso	n Managing			
S J Lettings Ltd, 52 Lewes Ro	ad Brighton BN2 3	HW		
December 19 Control of the control o				
Property Description		4 .		
Short description of license	•	-		
Property Type = SHARED HO	USE, No of Units :	= 1, Occupano	cy = 3, No of Storeys = 2	
Number of Rooms	Total Num	ber of Room	s 4	
a) Sleeping 3		b) Living Roo	oms 1	
		3		
Number of Self Contained FI	ate:	0	Number of Non Self Cont. Flats:	1
Number of Sen Somanieu i	ats.	U	Number of Non Gen Gont. Flats.	ı
Shared Amenities	Number	Description		
a) Kitchen	1	2000pt		
b) Bathrooms/Showers	1			
c) W.C.s	1			
,				
Licence Details				
Commencement date:	10/02/201	16	Duration of licence:	01/11/2020
Maximum number of person	s or households	permitted to	occupy HMO under conditions of li	cence:
Households 0	Persons	3		
Information referred to a	residential pror	erty tribuna	al or Lands Tribunal:	
None	residential prop	orty tribune	ii or Lands Tribunai.	
Decision of Tribunal			Reference number	
			1010101100 Hullingt	
HMO - Gas Mandatory conds,	atory conds, HMO HMO - Licensing	Loft Insulation	ory conds, HMO - Furniture Mandator , HMO - Property Chges Mandatory o lation 3, HMO - RubbishRecyc Manda	onds,

conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Other Fire Works, Structural Fire Work



Licence No.

2015/06753/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

22A Sillwood Street Brighton BN1 2PS

Ward

Regency

Name & Address of Licen	ce Holder		
Mr Ashley Bennett, 22A Sillwo	od Street Brighton East S	Sussex BN1 2PS	
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 = 3, No of Storeys = 2	
Number of Rooms	Total Number of	Rooms 4	
a) Sleeping	b) Liv	ing Rooms	
Number of Self Contained Fi	lats: 0	Number of Non Self Cont. Flats	:: 1
Shared Amenities		ription	
a) Kitchen b) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
		1	
Commencement date:	30/09/2016	Duration of licence:	01/11/2020
Maximum number of person	s or households permi	tted to occupy HMO under conditions o	f licence:
	_	 -	
Households 3	Persons 3		
Information referred to a	residential property t	ribunal or Lands Tribunal:	
None	residential property t	Hounar of Lanas Tribunar.	
Decision of Tribunal		Reference number	
		Noticioned number	
Summary of conditions of lie	cence		

HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 3, HMO - Fire Blanket, HMO - Fire Doors 1, HMO

- Fire Doors 7, HMO Fire Emergency Lighting 1, 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



Licence No.

2016/00009/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO) 2 Old Shoreham Road Brighton BN1 5DD

Ward

Preston Park

Name & Address of Licenc	e Holder			
Ms Veronica Johnson, 76 Harb	our View Road Omo	okoroa 3114	ļ	
Name & Address of Persor	5 5			
Pembertons, 108 Dyke Road Br	ighton East Sussex	BN1 3TE		
Dunanta Danadatian				
Property Description	LIMO (No of stanson	4-\		
Short description of licensed	` -	•		
Property Type = SHARED HOU	SE, No of Units = 1,	, Occupanc	y = 3, No of Storeys = 2	
Number of Rooms	Total Numbe	r of Rooms	3 4	
a) Sleeping 3	b)	Living Roo	ms 1	
Number of Self Contained Fla	ts:	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				
Commencement date:	05/06/2017		Duration of licence:	01/11/2020
Maximum number of persons	or households per	rmitted to c	occupy HMO under conditions of I	icence:
	•			
Households 3	Persons 3			
Information referred to a re	sidential proper	ty tribunal	or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
- Fire Doors 7, HMO - Fire Gene	HMO - Fire Alarm Sy eral 1, HMO - Fire G	Blazing / Wir	MO - Fire Blanket, HMO - Fire Doors dows 4, HMO - Fire Mandatory cond O - Property Chaes Mandatory cond	ds, HMO -

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



Licence No.

2016/00012/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

60 Argyle Road Brighton BN1 4QB

Ward

Preston Park

Name & Address of Licer	ce Holder
Mr Simon Farncombe, 36A Ne	w England Road Brighton East Sussex BN1 4GG
Name & Address of Person	n Managing
,	
Property Description	
Short description of license	HMO (No of storays, atc.)
•	
Property Type = SHARED HC	USE, 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
Number of Self Contained F	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	
Commencement date:	08/11/2016 Duration of licence : 01/11/2020
Maximum number of person	s or households permitted to occupy HMO under conditions of licence:
Households 4	Persons 4
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	;ence , HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO -

Electrical Reports, 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, Other fire works, Structural Fire Works



Licence No.

2016/00022/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO) First Floor And Second Floor Flat 14 Goldstone Villas Hove RN3 3RO

Ward

Goldsmid

Mr Warner Cohn, 27 Brangwyn Way Brighton East Sussex BN1 8XA Name & Address of Person Managing
Name & Address of Person Managing
Name & Address of Person Managing
,
Duanauty Dagavintian
Property Description Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 3, No of Storeys = 2
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 2
c) W.C.s
Licence Details
Commencement date: 05/04/2016 Duration of licence: 01/11/2020
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Households 3 Persons 3
Households 3 Persons 3
Information referred to a residential property tribunal or Lands Tribunal:
None
None Decision of Tribunal Reference number

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.

2016/00037/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

21 Reading Road Brighton BN2 5NE

Ward

East Brighton

Name & Address of Licence Holder
Mr Darren Turner, 198 Station Road Leicester Leicestershire LE3 8GT
Name & Address of Person Managing
SJ Lettings Ltd, Brighton Forum 52 Lewes Road Brighton BN2 3HW
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 4, Occupancy = 4, No of Storeys = 2
Number of Rooms Total Number of Rooms 4
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
D (1 - 51)
Commencement date: 05/04/2016 Duration of licence: 01/11/2020
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Havrachalda A Barrana A
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 Fire Alarm, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Fire Notices 1, HMO -

Fire Alarm, 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 - Repairs Ventilation 2, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire works, Structural Fire Works



Licence No.

2016/00048/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

126 Osborne Road Brighton BN1 6LU

Ward

Preston Park

Name & Address of Licer	nce Holder		
Mr Nigel Trinder, 6 Friar Walk		BN1 6NJ	
<u> </u>			
Name & Address of Person	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys	s, etc)	
Property Type = SHARED HC	USE, No of Units = 1,	Occupancy = 5, No of Storeys = 2	
Number of Rooms	Total Number	of Rooms 6	
a) Sleeping 5	D)	Living Rooms 1	
Number of Calf Cantainad F	lata.	Number of New Self-Cont. Flate	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats	:1
Shared Amenities	Number De	scription	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
Commencement date:	05/10/2016	Duration of licence:	01/11/2020
Maximum number of nersor	is or households ner	mitted to occupy HMO under conditions of	flicence:
			nicence.
Households 5	Persons 5		
Information referred to a	rocidontial propert	y tribunal or Landa Tribunal	
None	residentiai propert	y tribunal or Lands Tribunal:	
Decision of Tribunal		Reference number	
		ixereferice number	
Summary of conditions of li		onds, HMO - Fire Mandatory conds, HMO - F	urniture

Fire EI / GI / Cupboards 1, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Bathroom 1, HMO - Licensing Loft Insulation, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



Licence No.

2016/00051/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

37 Argyle Road Brighton BN1 4QB

Ward

Preston Park

Name & Address of Licence		
Mr Leslie Gritton, 142 Woodland	Way West Wickham Kent BR4 9LU	
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 = 4, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 5	
a) Sleeping 4	b) Living Rooms 1	
Number of Self Contained Flats	S: 0 Number of Non Self Cont. Fla	ts: 1
Shared Amenities 1	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	1	
c) W.C.s	1	
License Deteile		
Licence Details		
Commencement date:	28/04/2016 Duration of licence:	01/11/2020
Maximum number of persons of	or households permitted to occupy HMO under conditions	of licence:
		o. noonoo.
Households 0 P	ersons 4	
	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, Other Fire Work



Licence No.

2016/00056/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 3 19 Salisbury Road Hove BN3 3AD

Ward

Brunswick And Adelaide

Name & Address of Licence Holder
Mr David Muncaster, Cobbs Cottage Chalkers Lane Hurstpierpoint West Sussex BN6 9LP
Name & Address of Person Managing
Brand Vaughan Ltd, 117-118 Western Road Hove East Sussex BN3 1DB
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 3, No of Storeys = 2
No. 1 of Control of Co
Number of Rooms Total Number of Rooms 4
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 3 b) W.C.s 3
c) W.C.s 3
Licence Details
Commencement date: 21/03/2016 Duration of licence: 01/11/2020
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Households 3 Persons 3
Information referred to a residential property tribunal or Lands Tribunal:
None
Decision of Tribunal Reference number
Summary of conditions of licence Electrical Reports, HMO - Elec Mandatory conds, HMO - Fire Doors, HMO - Fire precautions, HMO - Furniture Mandatory 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



Licence No.

2016/00090/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Third Floor 59 Brunswick Place Hove BN3 1NE

Ward

Brunswick And Adelaide

Name & Address of Licen	ce Holder		
Ms Katharine Hancock, Löwer	ızahnweg 36 Köln Widde	rsdorf Germany 50859	
Name & Address of Perso	on Managing		
Brices Limited, Top Floor 18 C	hesham Road Brighton E	3N2 1NB	
Property Description			
Short description of license	d HMO (No of storeys, e	tc)	
Property Type = SHARED HO	USE, No of Units = 1, Oc	cupancy = 3, No of Storeys = 2	
Number of Rooms	Total Number of	Rooms 4	
a) Sleeping 3	b) Livi	ng Rooms 1	
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Fla	ats: 1
Shared Amenities	Number Descr	iption	
a) Kitchen	1	•	
b) Bathrooms/Showers	1		
c) W.C.s	2		
Licence Details			
Commencement date:	14/04/2016	Duration of licence:	01/11/2020
Johnnencement date.	14/04/2010	buration of needles.	01/11/2020
Maximum number of person	s or households permit	ted to occupy HMO under conditions	s of licence:
Ueweehelde 0	Damana 2		
Households 0	Persons 3		
Information referred to a	residential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
0			
Summary of conditions of li ctions of lictions of lic		Mandatory conds, HMO - Furniture Ma	ndatory conds.
		Andatory conds HMO - Property Main	

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.

2016/00132/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

62 Goldstone Road Hove BN3 3RH

Ward

Goldsmid

N 0 4 1 1 C1 1			
Name & Address of Licen			
Mr Benjamin Stevens, Mulberr	y House 16 Fairacres Co	obham Surrey K111 2JW	
Nama ⁹ Address of Daves	n Managing		
Name & Address of Perso		bhara Ourres KT44 O IIM	
Mr Benjamin Stevens, Mulberr	y House to Fairacres Co	briam Surrey KTTT 25W	
Property Description			
Short description of licensed	ાં HMO (No of storeys, લ	etc)	
-		cupancy = 4, No of Storeys = 3	
	.,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Number of Rooms	Total Number of	Rooms 5	
a) Sleeping 4	b) Liv	ing Rooms 1	
Number of Self Contained FI	ats: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number Descr	iption	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	2		
Licence Details			
Commencement date:	23/03/2016	Duration of licence:	01/11/2020
Maximum number of person	e or housaholds normit	ted to occupy HMO under conditions	of licence:
Maximum number of person	s of flousefloids perfille	ted to occupy rivio under conditions	of ficerice.
Households 0	Persons 4		
IC		dhanal an Landa Tabanah	
	residential property t	ribunal or Lands Tribunal:	
None		Defendance where	
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, Other Fire Work



Licence No.

2016/00136/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

First Floor And Second Floor Flat 188 Ditchling Road Brighton BN1 6.IF

Ward

Hollingdean And Stanmer

Name & Address of Licen	ice Holder		
Ars Sallie Greene, First Floor	And Second Floor Flat 1	88 Ditchling Road Brighton East Sussex	BN1 6JE
Name & Address of Perso	on Managing		
Property Description			
Short description of license	d HMO (No of storeys,	etc)	
roperty Type = SHARED HC	USE, No of Units = 3, O	ccupancy = 3, No of Storeys = 2	
lumber of Rooms	Total Number o	f Rooms 4	
a) Sleeping 3	b) Liv	ving Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number Desc	ription	
a) Kitchen	1		
) Bathrooms/Showers	1		
) W.C.s	1		
inner Deteile			
icence Details			
Commencement date:	25/04/2016	Duration of licence:	01/11/2020
laximum number of person	is or households perm	itted to occupy HMO under conditions	of licence:
louseholds 3	Persons 3		
nformation referred to a	residential property	tribunal or Lands Tribunal:	
one			
ecision of Tribunal		Reference number	
	HMO - Elec Mandatory	conds, HMO - Fire Mandatory conds, HM	

Electrical Works, Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, 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, Structural Fire Works



Licence No.

2016/00150/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Basement Flat 15 Bedford Place Brighton BN1 2PT

Ward

Regency

Name & Address of Licence Holder	
Miss Sara Harris, 22 Anchor Street Coltishall Norfolk NR12 7AQ	
Name & Address of Person Managing	
Leaders Ltd, 119-120 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 = 4, No of Storeys = 2	
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: 16/06/2017 Duration of licence:	01/11/2020
Duration of ficence.	01/11/2020
Maximum number of persons or households permitted to occupy HMO under conditions o	of licence:
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	iro Dlonkot

Fire EI / GI / Cupboards 1, HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 3, HMO - Fire Blanket, HMO - Fire Doors 1, HMO - Fire Doors 3, HMO - Fire Doors 5, HMO - Fire Doors 7, 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



Licence No.

2016/00162/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

185 Preston Drove	
Brighton	
BN1 6FN	

Ward

Preston Park

Name & Address of Licen	ce Holder		
Ms Stephanie Barrientos, 45 B	rooklawn Drive Manchest	er M20 3GY	
Name & Address of Perso			
Leaders, 290 Ditchling road Br	ighton BN1 6FJ		
Property Description			
Short description of licensed	I HMO (No of storeys, et	c)	
Property Type = SHARED HO	USE, No of Units = 1, Occ	cupancy = 4, No of Storeys = 4	
Number of Rooms	Total Number of	Rooms 5	
a) Sleeping 4	b) Livir	ng Rooms 2	
Number of Self Contained FI	ats: 0	Number of Non Self Cont. Fla	ts: 1
Number of Sen Contained Fi	ats.	Number of Non Sen Cont. Fia	15.
Shared Amenities a) Kitchen	Number Descri	ption	
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	16/08/2016	Duration of licence:	01/11/2020
Maximum number of person	s or households permitt	ed to occupy HMO under conditions	of licence:
Households 4	Persons 4		
Information referred to a i	residential property tr	ibunal or Lande Tribunal	
None	esidential property tr	ibulial of Lalius Hibulial.	
Decision of Tribunal		Reference number	
Summary of conditions of lic HMO - Elec Mandatory conds, - Fire Doors 3, HMO - Fire Doo conds, HMO - Furniture Manda	HMO - Fire Alarm System ors 5, HMO - Fire Doors 7 atory conds, HMO - Gas N	ns 3, HMO - Fire Blanket, HMO - Fire D , HMO - Fire General 1, HMO - Fire Ma //andatory conds, HMO - Property Chge RubbishRecyc Mandatory conds, HMO	ndatory es Mandatory



Licence No.

2016/00169/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

92A Preston Drove Brighton BN1 6LB

Ward

Preston Park

Name & Address of Licence	e Holder
Mr Syed Zarin Shah, 218 Ditchlii	ng Road Brighton East Sussex BN1 6JE
Name & Address of Person	Managing
S J Lettings Ltd, 52 Lewes Road	Brighton BN2 3HW
Property Description	
Short description of licensed I	
Property Type = SHARED HOUS	SE, No of Units = 1, Occupancy = 3, No of Storeys = 4
Number of Rooms	Total Number of Rooms 4
a) Sleeping 3	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	1
c) W.C.s	1
Licence Details	
Commencement date:	05/04/2016 Duration of licence : 01/11/2020
Maximum number of persons	or households permitted to occupy HMO under conditions of licence:
Households 3 I	Persons 3
Information referred to a re	sidential property tribunal or Lands Tribunal:
None	
Decision of Tribunal	Reference number
Furniture Mandatory conds, HM0	nce Irds 1, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - O - Gas Mandatory conds, HMO - Licensing Bathroom 4, HMO - Property Property Maint Mandatory conds. HMO - Repairs Steps etc 7, HMO -

Repairs Ventilation 2, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Structural Fire Works



Licence No.

2016/00185/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

66 Seafield Road Hove BN3 2TN

Ward

Central Hove

Name & Address of Licence	Holder		
Ms Janet Bray, 69 Seafield Road			
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 = 3, No of Storeys = 3	
Number of Rooms	Total Number of Ro	ooms 4	
a) Sleeping	b) Living		
a) Sieeping	b) Living	Rooms	
Number of Self Contained Flats	:: 0	Number of Non Self Cont. Flat	s: 0
Number of Self Contained Flats	. 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:	10/03/2016	Duration of licence:	01/11/2020
Maximum number of persons of	r households nermitter	I to occupy HMO under conditions	of licence:
		. to occupy time under conditions	
Households 4 P	ersons 3		
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.

2016/00194/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

67 Seafield Road Hove BN3 2TN

Ward

Central Hove

Name & Address of Licer	nce Holder		
Ms Janet Bray, 69 Seafield Ro			
•			
Name & Address of Person	on Managing		
,			
D			
Property Description	d LING (No. of atomore, ato)		
Short description of license		0.11	
Property Type = SHARED HC	JUSE, No of Units = 1, Occup	pancy = 3, No of Storeys = 3	
Number of Rooms	Total Number of Ro	oms 4	
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) Kitchenb) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	10/03/2016	Duration of licence:	01/11/2020
	10/00/2010		0111112020
Maximum number of persor	s or households permitted	to occupy HMO under conditions	of licence:
Households 3	Persons 3		
Information referred to a	residential 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



Licence No.

2016/00197/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

91 Montpelier Road Brighton BN1 3BE

Ward

Regency

Dr Margaret Stroebe, 90 Maliebaan Utrecht Country: THE NETHERLANDS 3581 CX Name & Address of Person Managing Pier Associates Ltd, T/a Just Lets 7 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 = 4, No of Storeys = 3 Number of Rooms	Name & Address of Licence Holder
Pier Associates Ltd, T/a Just Lets 7 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 = 4, No of Storeys = 3 Number of Rooms	Dr Margaret Stroebe, 90 Maliebaan Utrecht Country: THE NETHERLANDS 3581 CX
Pier Associates Ltd, T/a Just Lets 7 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 = 4, 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 = 4, No of Storeys = 3 Number of Rooms Total Number of Rooms 7 a) Sleeping 4 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 2 Licence Details Commencement date: 08/04/2016 Duration of licence: 01/11/2020 Maximum number of persons or households permitted to occupy HMO under conditions of licence: 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 Fire Alarm, Fire El / Gl / Cupboards 2, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Fire Notices 1, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds,	
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	Pier Associates Ltd, T/a Just Lets 7 Church Road Hove East Sussex BN3 2BB
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	Property Description
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 4, No of Storeys = 3 Number of Rooms 7 a) Sleeping 4 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 2 Licence Details Commencement date: 08/04/2016 Duration of licence: 01/11/2020 Maximum number of persons or households permitted to occupy HMO under conditions of licence: 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 Fire Alarm, Fire El / Gl / Cupboards 2, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Gas Mandatory conds,	
Number of Rooms 7 a) Sleeping 4 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 2 Licence Details Commencement date: 08/04/2016 Duration of licence: 01/11/2020 Maximum number of persons or households permitted to occupy HMO under conditions of licence: 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 Fire Alarm, Fire El / Gl / Cupboards 2, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Fire Notices 1, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Gas Mandatory conds,	
a) Sleeping 4 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 2 Licence Details Commencement date: 08/04/2016 Duration of licence: 01/11/2020 Maximum number of persons or households permitted to occupy HMO under conditions of licence: 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 Fire Alarm, Fire El / Gl / Cupboards 2, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Gas Mandatory conds,	
Number of Self Contained Flats: 0	
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s Licence Details Commencement date: 08/04/2016 Duration of licence: 01/11/2020 Maximum number of persons or households permitted to occupy HMO under conditions of licence: 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 Fire Alarm, Fire El / Gl / Cupboards 2, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Fire Notices 1, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds,	a) Sleeping 4 b) Living Rooms 1
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s Licence Details Commencement date: 08/04/2016 Duration of licence: 01/11/2020 Maximum number of persons or households permitted to occupy HMO under conditions of licence: 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 Fire Alarm, Fire El / Gl / Cupboards 2, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Gas Mandatory conds,	
a) Kitchen b) Bathrooms/Showers c) W.C.s Licence Details Commencement date: 08/04/2016 Duration of licence: 01/11/2020 Maximum number of persons or households permitted to occupy HMO under conditions of licence: 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 Fire Alarm, Fire El / Gl / Cupboards 2, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Gas Mandatory conds,	Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1
a) Kitchen b) Bathrooms/Showers c) W.C.s Licence Details Commencement date: 08/04/2016 Duration of licence: 01/11/2020 Maximum number of persons or households permitted to occupy HMO under conditions of licence: 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 Fire Alarm, Fire El / Gl / Cupboards 2, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Gas Mandatory conds,	Sharod Amonitios Number Description
b) Bathrooms/Showers c) W.C.s Licence Details Commencement date: 08/04/2016 Duration of licence: 01/11/2020 Maximum number of persons or households permitted to occupy HMO under conditions of licence: 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 Fire Alarm, Fire EI / GI / Cupboards 2, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Fire Notices 1, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds,	·
Licence Details Commencement date: 08/04/2016 Duration of licence: 01/11/2020 Maximum number of persons or households permitted to occupy HMO under conditions of licence: 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 Fire Alarm, Fire El / Gl / Cupboards 2, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Gas Mandatory conds,	
Commencement date: 08/04/2016 Duration of licence: 01/11/2020 Maximum number of persons or households permitted to occupy HMO under conditions of licence: 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 Fire Alarm, Fire EI / GI / Cupboards 2, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Gas Mandatory conds,	
Commencement date: 08/04/2016 Duration of licence: 01/11/2020 Maximum number of persons or households permitted to occupy HMO under conditions of licence: 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 Fire Alarm, Fire EI / GI / Cupboards 2, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Gas Mandatory conds,	
Maximum number of persons or households permitted to occupy HMO under conditions of licence: 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 Fire Alarm, Fire El / Gl / Cupboards 2, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Fire Notices 1, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds,	Licence Details
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 Fire Alarm, Fire EI / GI / Cupboards 2, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Fire Notices 1, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds,	Commencement date: 08/04/2016 Duration of licence: 01/11/2020
Information referred to a residential property tribunal or Lands Tribunal: None Decision of Tribunal Reference number Summary of conditions of licence Fire Alarm, Fire EI / GI / Cupboards 2, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Fire Notices 1, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds,	Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Information referred to a residential property tribunal or Lands Tribunal: None Decision of Tribunal Reference number Summary of conditions of licence Fire Alarm, Fire EI / GI / Cupboards 2, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Fire Notices 1, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds,	Havrahalda A Barrana A
None Decision of Tribunal Reference number Summary of conditions of licence Fire Alarm, Fire EI / GI / Cupboards 2, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Fire Notices 1, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds,	Households 4 Persons 4
Decision of Tribunal Reference number Summary of conditions of licence Fire Alarm, Fire El / Gl / Cupboards 2, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Fire Notices 1, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds,	Information referred to a residential property tribunal or Lands Tribunal:
Summary of conditions of licence Fire Alarm, Fire El / Gl / Cupboards 2, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Fire Notices 1, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds,	None
Fire Alarm, Fire EI / GI / Cupboards 2, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Fire Notices 1, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds,	Decision of Tribunal Reference number
HMO - Licensing Loft Insulation, 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, Other Fire works, Structural Fire Works	Fire Alarm, Fire EI / GI / Cupboards 2, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Fire Notices 1, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Loft Insulation, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Bathroom 17, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt

Structural Fire works, Ventilation





Licence No.

2016/00232/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

28 Henley Road Brighton BN2 5NA

Ward

East Brighton

Name & Address of Licen	ce Holder		
Mr A Cooke, 24 Queensway B	righton East Sussex BN2	0FB	
Name & Address of Perso	on Managing		
The Property Shop, 50 St Jam		Succes BN2 10C	
The Property Shop, 50 St Jain	es's Street Brighton East	Sussex DIV2 TQG	
Property Description			
Short description of license	d HMO (No of storeys, et	c)	
Property Type = Not Assigned	, No of Units = 1, Occupa	ncy = 4, No of Storeys = 2	
Number of Rooms	Total Number of	Rooms 5	
a) Sleeping 4	b) Livir	ng 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 Descri	ption	
Licence Details			
Commencement date:	06/10/2016	Duration of licence:	01/11/2020
Maximum number of person	s or households permitt	ed to occupy HMO under conditions o	of licence:
Households 4	Persons 4		
Information referred to a	residential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Fire Doors 3, HMO - Fire Door	/orks, Fire alarms, HMO - rs 5, HMO - Fire General 1	Elec Mandatory conds, HMO - Fire Door , HMO - Fire Mandatory conds, HMO - F	Fire Notices

Additional Facilities, Electric Works, Fire alarms, HMO - Elec Mandatory conds, HMO - Fire Doors 1, HMO - Fire Doors 3, HMO - Fire Doors 5, HMO - Fire General 1, HMO - Fire Mandatory conds, HMO - Fire Notices 1, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - General 1, HMO - General 6, HMO - General Electrical 1, HMO - General Electrical 2, HMO - Licensing Kitchen 6, HMO - Licensing Loft Insulation, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Works





Licence No.

2016/00236/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

153 Dyke Road Hove BN3 1TJ

Ward

Goldsmid

		Trai a	2011110
N. 0 4 1 1			
Name & Address of Licence			
Ms Christina Fullerton, The North	Bothy Loseley Park Guildfo	ord GU3 1HS	
Name & Address of Person	Managing		
Pembertons (Brighton) Ltd, 108 I	Dyke Road Brighton East Sus	ssex BN1 3TE	
Property Description			
Short description of licensed H	IMO (No of storeys, etc)		
Property Type = SHARED HOUS	SE, No of Units = 1, Occupan	cy = 3, No of Storeys = 3	
Number of Rooms	Total Number of Room	ns 5	
a) Sleeping 3	b) Living Ro	oms 1	
Number of Self Contained Flats	s : 0	Number of Non Self Cont. Flats	s: 1
		ı	
Shared Amenities	Number Description		
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
Commencement date:	20/07/2016	Duration of licence:	01/11/2020
Commencement date.	20/07/2010	Duration of ficerice.	01/11/2020
Maximum number of persons of	or households permitted to	occupy HMO under conditions of	of licence:
Households 3 F	Persons 3		
Information referred to a res	sidential property tribun	al or Lands Tribunal:	
None	property tribune	ar or Earras Tribailai.	
Decision of Tribunal		Reference number	
Decision of Hibunal		Reference number	
Summary of conditions of lice		e Mandatory conds HMO - Furnitu	iro.
COVER - FIRE MANGARON COMOS H	.v.v. , = E11 E 1 / 1/11 S 1 E11/11 / 1 - E11	E MADUAIDIV COIDS DIVID - FIRMIN	. =

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.

2016/00275/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

134 Holland Road Hove BN3 1JR

Ward

Goldsmid

Name & Address of Licenc	e Holder		
Mr Sirus Taghan, 47 Norfolk Sq	uare Brighton East Sus	ssex BN1 2PA	
Name & Address of Persor	Managing		
,			
Property Description			
Short description of licensed	HMO (No of storoys	otc)	
•		•	
Property Type = SHARED HOU	SE, No of Units = 1, O	ccupancy = 3, No of Storeys = 3	
Number of Rooms	Total Number o	f Rooms 4	
a) Sleeping 3 b) Living Rooms 1			
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number Desc	ription	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	2		
Licence Details			
Commencement date:	25/04/2016	Duration of licence:	01/11/2020
Maximum number of persons	or households permi	itted to occupy HMO under conditions of	licence:
	-	· ·	
Households 3	Persons 3		
Information referred to a re	sidential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice Fire Alarm, HMO - Elec Mandate	ory conds, HMO - Fire	Blanket, HMO - Fire Doors 3, HMO - Fire M	andatory

Fire Alarm, HMO - Elec Mandatory conds, HMO - Fire Blanket, 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 - Repairs Electrics 10, HMO - Repairs Ventilation 3, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Loft Insulation, Management / Repairs



Licence No.

2016/00278/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 1 Kings Mansions 54 - 55 Kings Road Brighton RN1 1NA

Ward

Regency

Name & Address of Licen	ce Holder		
Ms Susan Gibson, Co/ 47 Nor	folk Square Brighton East	t Sussex BN1 2PA	
Name & Address of Perso	on Managing		
Homelets (Brighton) Ltd, 47 N		J1 2DA	
Homelets (Brighton) Ltd, 47 N	oriolk Square Brighton Br	NI ZFA	
Property Description			
Short description of license	d HMO (No of storeys, e	tc)	
Property Type = SHARED HO	USE, No of Units = 1, Oc	cupancy = 4, No of Storeys = 2	
Number of Rooms	Total Number of	Rooms 5	
a) Sleeping 4	b) Livi	ng Rooms 1	
Number of Self Contained F	lats: 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:	16/06/2016	Duration of licence:	01/11/2020
Maximum number of person	s or households permit	ted to occupy HMO under conditions o	of licence:
Households 4	Persons 4		
Information referred to a	residential property tı	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
conds, HMO - Gas Mandatory	Mandatory conds, HMO - conds, HMO - Property C	Fire Mandatory conds, HMO - Furniture Chges Mandatory conds, HMO - Property	Maint

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 Ceilings 1, HMO - Repairs Floors 7, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Heating, Management / Repairs, Other fire works, Ventilation



Licence No.

2016/00280/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

22 Southdown Avenue Brighton BN1 6EG

Ward

Preston Park

Name & Address of Licence Holder	
Mr James Catchpole, Hallgarth Farm House Hallgarth Manor High Pittington Durham D	DH6 1AB
Name & Address of Person Managing	
Sure Property Solutions Ltd, 31 Upper St James's Street Brighton BN2 1JN	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 2	
Number of Rooms Total Number of Rooms 6	
a) Sleeping 5 b) Living Rooms 1	
Number of Oak Oastein of Flate.	Name Flater 0
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 Number 1 1 c) W.C.s	
Licence Details	
Commencement date: 05/05/2016 Duration of licence	: 01/11/2020
Maximum number of persons or households permitted to occupy HMO under co	nditions of licence:
Households 5 Persons 5	
nouselloius 5 Persons 5	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference nu	ımber
Summary of conditions of licence Additional Facilities, Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory	v 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, Loft Insulation, Other Fire work, Ventilation



Licence No.

2016/00283/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Maisonette 35 Western Street Brighton BN1 2PG

Ward

Regency

lame & Address of Lice	nce Holder		
Ars Helen Franklin, Yew Tree	Cottage 3 High Street Silv	verstone Northamptonshire NN12 8US	
Name & Address of Pers	on Managing		
Property Decembring			
Property Description Short description of license	nd HMO (No of storous, at	c)	
•	•		
горепу туре = SHARED но	JUSE, NO OF UNITS = 4, OCC	supancy = 4, No of Storeys = 3	
Number of Rooms	Total Number of F	Rooms 5	
a) Sleeping 4	b) Livin	ng Rooms 1	
Number of Self Contained F	Flats: 0	Number of Non Self Cont. Flats:	0
	L		
Shared Amenities	Number Descrip	ption	
a) Kitchen	1		
) Bathrooms/Showers	1		
e) W.C.s	2		
icence Details			
Commencement date:	18/04/2016	Duration of licence:	01/11/2020
Maximum number of persor	ns or households permitte	ed to occupy HMO under conditions of I	icence:
lavaahalda 4	Damana 4		
Households 4	Persons 4		
nformation referred to a	residential property tri	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	s, HMO - Elec Mandatory c	conds, HMO - Furniture Mandatory conds, I	HMO -

Electrical Reports, Fire Alarms, HMO - Elec Mandatory conds, HMO - Furniture Mandatory 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- Fire Mandatory conds, Management /Repairs, Management/Repairs, Other fire works, Structural fire works



Licence No.

2016/00293/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

29 Blatchington Road Hove BN3 3YL

Ward

Central Hove

Nama O Addusas aflicanas Ilaid		
Name & Address of Licence Hold		
Mr Stuart Cullen, 47 Norfolk Square Brig	gnton East Sussex BN1 2PA	
Name & Address of Person Mana	aina	
Name & Address of Ferson Mana	99	
1		
Property Description		
Short description of licensed HMO (N	lo of storeys, etc)	
·	of Units = 1, Occupancy = 4, No of Storeys = 2	
Topolty Type Office Discount Topolty Type	of Since 1, Coodpanity 1, the of Cloreye 2	
Number of Rooms To	otal Number of Rooms 5	
a) Sleeping 4	b) Living Rooms 1	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats	s: 1
Shared Amenities Number	er Description	
a) Kitchen 1		
b) Bathrooms/Showers 1		
c) W.C.s		
Licence Details		
Commencement date: 2	20/04/2016 Duration of licence:	01/11/2020
Marrian and a second and a second and a second		ef lineman.
maximum number of persons or nous	seholds permitted to occupy HMO under conditions o	or licence:
Households 4 Persons	s 4	
Information referred to a resident	ial property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence Electrical Works, Fire Alarm, HMO - Ele	c Mandatory conds, HMO - Fire Blanket, HMO - Fire Doc	ors 7, HMO -

Electrical Works, Fire Alarm, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Doors 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 Ventilation 3, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural Fire Works



Licence No.

2016/00299/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

1 Eaton Road		
Hove		
BN3 3AF		

Ward

Goldsmid

Name & Address of Licer	nce Holder		
Ms Sandra Hill, Sussex Count	y Cricket Ground Eato	n Road Hove East Sussex BN3 3AN	
Name & Address of Perso	on Managing		
Mr Ian Waring, Sussex County	y Cricket Ground Eator	Road Hove East Sussex BN3 3AN	
Property Description	d LIMO (No of storous	ots)	
Short description of license	` ,	,	
Property Type = SHARED HC	OUSE, No of Units = 1, C	ccupancy = 3, No of Storeys = 2	
Number of Rooms	Total Number of	of Rooms 5	
a) Sleeping	b) Li	ving Rooms	
Noneber of Oalf Oantained F	1-4	Name have of Nam Oak Oant Fla	4
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number Desc	cription	
a) Kitchen	1	, iption	
b) Bathrooms/Showers	1		
c) W.C.s	2		
Licence Details			
Commencement date:	10/06/2016	Duration of licence:	01/11/2020
Maximum number of person	is or households perm	itted to occupy HMO under conditions	of licence:
Households 3	Persons 3		
Information referred to a	residential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	, HMO - Fire Blanket, HN	MO - Fire Mandatory conds, HMO - Fire N	

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

Mandatory conds



Licence No.

2016/00302/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 1 51-52 Grand Parade Brighton BN2 9QA

Ward

Queen's Park

Name & Address of Licen	ce Holder	
	47 Norfolk Square Brighton East Sussex BN1 2PA	
Name & Address of Perso	n Managing	
Homelets (Brighton) Ltd, 47 No	rfolk Square Brighton BN1 2PA	
Property Description		
Short description of licensed	HMO (No of storeys, etc)	
Property Type = SHARED HOL	JSE, No of Units = 1, Occupancy = 3, No of Storeys = 2	
Number of Rooms	Total Number of Rooms 4	
a) Sleeping 3	b) Living Rooms 1	
Number of Self Contained Fla	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:	07/06/2016 Duration of licence:	01/11/2020
Maximum number of persons	or households permitted to occupy HMO under conditions of	licence:
Households 3	Persons 3	
	esidential property tribunal or Lands Tribunal:	
None Decision of Tribunal	Deference	
Decision of Tribunal	Reference number	
	ence landatory conds, HMO - Fire Alarm Systems 7, HMO - Fire Blanket Fire Notices 1, HMO - Furniture Mandatory conds, HMO - Gas Mand	

Electrical Works, HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 7, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Fire Notices 1, 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, Other Fire works



Licence No.

2016/00310/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

18 Castle Street Brighton BN1 2HD

Ward

		waru	Regency
Name & Address of Licenc	e Holder		
Mr Antony Bartolo, 56 Bramber		on N12 One	
Mi Antony Bartolo, 30 Bramber	Toda North Finciney Lond	JII IN 12 SHE	
Name & Address of Persor	Managing		
Ms Tracy Green, 53 Goldstone		N3 7BB	
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOU	SE, No of Units = 1, Occur	pancy = 3, No of Storeys = 3	
Number of Rooms	Total Number of Ro	oms 3	
a) Sleeping 3	b) Living	Rooms 1	
Number of Self Contained Fla	ts: 0	Number of Non Self Con	t. Flats:
Shared Amenities	Number Descripti	ion	
a) Kitchen	1		
b) Bathrooms/Showers c) W.C.s	1		
c) w.o.s			
Licence Details			
Commencement date:	19/04/2016	Duration of licence:	01/11/2020
Maximum number of persons	or households permitted	to occupy HMO under condi	tions of licence:
-		.,	
Households 3	Persons 3		
Information referred to a re	sidential property trib	unal or Lands Tribunal:	
None	property trib		
Decision of Tribunal		Reference numb	oer
Summary of conditions of lice Electrical Works, Fire Alarms, H Mandatory conds, HMO - Gas N	MO - Elec Mandatory cond		

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



Licence No.

2016/00333/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

36 Westbourne Street Hove BN3 5PG

Ward

Westbourne

Short description of license Property Type = SHARED HO	•	•	ancy = 4. No of Storeys = 3	
riopolity Typo Climited Tit	, , , , , , ,	7, 000apo	1,110 01 0101030	
Number of Rooms	Total	Number of Roo	oms 5	
a) Sleeping 4		b) Living R	Rooms 1	
Number of Self Contained F	lats:	0	Number of Non Self Cont. Flats:	0
Shared Amenities	Number	Descriptio	on	
a) Kitchenb) Bathrooms/Showers	1	_		
c) W.C.s	1	_		
,				
Licence Details				
Commencement date:	30/0	06/2016	Duration of licence:	01/11/2020
Commencement date:	20/0	10/2016	Duration of ficence:	01/11/2020
Maximum number of person	ns or househ	olds permitted t	to occupy HMO under conditions of	licence:
Households 4	Persons	4		
Houselloius 4	Persons	4		
Information referred to a	residential	property tribu	nal or Lands Tribunal:	
None				

HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 3, HMO - Fire Blanket, HMO - Fire Doors 3, HMO - Fire Doors 5, HMO - Fire General 1, HMO - Fire Mandatory conds, HMO - Fire Notices 1, 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



Licence No.

2016/00335/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

44A Stanmer Park Road Brighton BN1 7JJ

Ward

Hollingdean And Stanmer

Name & Address of Licen	ce Holder		
Mrs Lesley Wheen, 107 Surre	nden Road Brighton East	Sussex BN1 6WB	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, et	tc)	
Property Type = SHARED HO	USE, No of Units = 1, Occ	cupancy = 4, No of Storeys = 2	
Number of Rooms	Total Number of	Rooms 4	
a) Sleeping 4	b) Livir	ng Rooms 1	
Number of Self Contained F	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			
Commencement date:	11/02/2016	Duration of licence:	01/11/2020
	11/02/2010	2 a. a 3 3 3.	0 11 11 12 02 0
Maximum number of person	s or households permitt	ted to occupy HMO under conditions	of licence:
Households 4	Persons 4		
110436110143 4	1 6130113 4		
Information referred to a	residential <u>property tr</u>	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	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, Management/ Repairs, Other Fire Works, Structural Fire Works



Licence No.

2016/00376/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat B 29 Old Shoreham Road Brighton BN1 5DQ

Ward

Preston Park

Nama P Address of Lines	aca Haldar		
Name & Address of Licer		2004	
Mr Robert Carlyon, 87 St Phili	ps Rd Cambridge CB1 3	;DA	
Name & Address of Person	on Managing		
		DNA OTE	
Pembertons (Brighton) Ltd, 10	18 Dyke Road Brighton B	JN1 31E	
Property Description			
Short description of license	d HMO (No of storeys,	etc)	
-		occupancy = 3, No of Storeys = 2	
Number of Rooms	Total Number of	of Rooms 3	
a) Sleeping 3	b) Liv	ving Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number Desc	cription	
a) Kitchen	1	•	
o) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
Commencement date:	02/08/2016	Duration of licence:	01/11/2020
	02/00/2010		
Maximum number of persor	ıs or households permi	itted to occupy HMO under conditions of	licence:
Households 3	Persons 3		
iouseiloius 3	1 6130113		
Information referred to a	residential property t	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li		ems 3, HMO - Fire Doors 1, HMO - Fire Doo	rs 7. 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



Licence No.

2016/00384/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

59 Sillwood Street Brighton BN1 2PS

Ward

Regency

Name & Address of Licence Holder Ms Susan Gibson, C/o 47 Norfolk Square Brighton East Sussex 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 = 3, No of Storeys = 3 Number of Rooms A) Sleeping Total Number of Rooms A) Sleeping Description Number of Self Contained Flats: Number of Self Contained Flats: Number of Non Self Cont. Flats: Shared Amenities A) Kitchen B) Bathrooms/Showers C) W.C.s Licence Details Commencement date: 18/07/2016 Duration of licence: 18/07/2016 Duration of licence: 19/07/2016 Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households Persons Information referred to a residential property tribunal or Lands Tribunal: None Decision of Tribunal Reference number Summary of conditions of licence Additional Expertings Sheetings Morks HMO - Fire Managatory conds HMO - Fire Blanket HMO -	
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 = 3, No of Storeys = 3 Number of Rooms Total Number of Rooms a) Sleeping b) Living Rooms Total Number of Non Self Cont. Flats: Number of Self Contained Flats: Description kitchen b) Bathrooms/Showers c) W.C.s Licence Details Commencement date: 18/07/2016 Duration of licence: Households Persons Persons Information referred to a residential property tribunal or Lands Tribunal: None Decision of Tribunal Reference number Summary of conditions of licence	Name & Address of Licence Holder
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 = 3, No of Storeys = 3 Number of Rooms	Ms Susan Gibson, C/o 47 Norfolk Square Brighton East Sussex BN1 2PA
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 = 3, No of Storeys = 3 Number of Rooms Total Number of Rooms 4 a) Sleeping 3 b) Living Rooms 1 Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1 Shared Amenities Number Description a) Kitchen b) Bathrooms/Showers 1 c) W.C.s 1 Licence Details Commencement date: 18/07/2016 Duration of licence: 01/11/2020 Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households 3 Persons 3 Information referred to a residential property tribunal or Lands Tribunal: None Decision of Tribunal Reference number Summary of conditions of licence	
Property Description Short description of licensed HMO (No of storeys, etc) Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 3, No of Storeys = 3 Number of Rooms	Name & Address of Person Managing
Short description of licensed HMO (No of storeys, etc) Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 3, No of Storeys = 3 Number of Rooms	Homelets (Brighton) Ltd, 47 Norfolk Square Brighton BN1 2PA
Short description of licensed HMO (No of storeys, etc) Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 3, No of Storeys = 3 Number of Rooms	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 3, No of Storeys = 3 Number of Rooms	Property Description
Number of Rooms	Short description of licensed HMO (No of storeys, etc)
a) Sleeping 3 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 1 Licence Details Commencement date: 18/07/2016 Duration of licence: 01/11/2020 Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households 3 Persons 3 Information referred to a residential property tribunal or Lands Tribunal: None Decision of Tribunal Reference number Summary of conditions of licence	Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 3, No of Storeys = 3
a) Sleeping 3 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 1 Licence Details Commencement date: 18/07/2016 Duration of licence: 01/11/2020 Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households 3 Persons 3 Information referred to a residential property tribunal or Lands Tribunal: None Decision of Tribunal Reference number Summary of conditions of licence	
Number of Self Contained Flats: O	
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s Licence Details Commencement date: 18/07/2016 Duration of licence: 01/11/2020 Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households 3 Persons 3 Information referred to a residential property tribunal or Lands Tribunal: None Decision of Tribunal Reference number Summary of conditions of licence	a) Sleeping b) Living Rooms 1
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s Licence Details Commencement date: 18/07/2016 Duration of licence: 01/11/2020 Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households 3 Persons 3 Information referred to a residential property tribunal or Lands Tribunal: None Decision of Tribunal Reference number Summary of conditions of licence	
a) Kitchen b) Bathrooms/Showers c) W.C.s Licence Details Commencement date: 18/07/2016 Duration of licence: 01/11/2020 Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households 3 Persons 3 Information referred to a residential property tribunal or Lands Tribunal: None Decision of Tribunal Reference number Summary of conditions of licence	Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1
a) Kitchen b) Bathrooms/Showers c) W.C.s Licence Details Commencement date: 18/07/2016 Duration of licence: 01/11/2020 Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households 3 Persons 3 Information referred to a residential property tribunal or Lands Tribunal: None Decision of Tribunal Reference number Summary of conditions of licence	
b) Bathrooms/Showers c) W.C.s Licence Details Commencement date: 18/07/2016 Duration of licence: 01/11/2020 Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households 3 Persons 3 Information referred to a residential property tribunal or Lands Tribunal: None Decision of Tribunal Reference number Summary of conditions of licence	·
Commencement date: 18/07/2016 Duration of licence: 01/11/2020 Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households 3 Persons 3 Information referred to a residential property tribunal or Lands Tribunal: None Decision of Tribunal Reference number Summary of conditions of licence	· — — — — — — — — — — — — — — — — — — —
Commencement date: 18/07/2016 Duration of licence: 01/11/2020 Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households 3 Persons 3 Information referred to a residential property tribunal or Lands Tribunal: None Decision of Tribunal Reference number Summary of conditions of licence	·
Commencement date: 18/07/2016 Duration of licence: 01/11/2020 Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households 3 Persons 3 Information referred to a residential property tribunal or Lands Tribunal: None Decision of Tribunal Reference number Summary of conditions of licence	,
Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households 3 Persons 3 Information referred to a residential property tribunal or Lands Tribunal: None Decision of Tribunal Reference number Summary of conditions of licence	Licence Details
Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households 3 Persons 3 Information referred to a residential property tribunal or Lands Tribunal: None Decision of Tribunal Reference number Summary of conditions of licence	
Households 3 Persons 3 Information referred to a residential property tribunal or Lands Tribunal: None Decision of Tribunal Reference number Summary of conditions of licence	Commencement date: 18/07/2016 Duration of licence: 01/11/2020
Information referred to a residential property tribunal or Lands Tribunal: None Decision of Tribunal Reference number Summary of conditions of licence	Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Information referred to a residential property tribunal or Lands Tribunal: None Decision of Tribunal Reference number Summary of conditions of licence	Householde 2 Persons 2
None Decision of Tribunal Reference number Summary of conditions of licence	nouseriolus 3 Persons 3
Decision of Tribunal Reference number Summary of conditions of licence	Information referred to a residential property tribunal or Lands Tribunal:
Summary of conditions of licence	None
	Decision of Tribunal Reference number
Mandatory conds, HMO - Fire Notices 1, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds,	Additional Facilities, Electrical Works, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire

Additional Facilities, Electrical Works, 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 - Repairs Doors 1, HMO - Repairs Stairs 1, HMO - Repairs Ventilation 3, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Mangement / Repairs



Licence No.

2016/00395/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

12 Hamilton Road Brighton BN1 5DL

Ward

Preston Park

Name & Address of Licence Ho		
Mr Frank Crown, 47 Norfolk Square	Brighton East Sussex BN1 2PA	
Name & Address of Person Ma		
Homelets (Brighton) Ltd, 47 Norfolk	Square Brighton BN1 2PA	
Dronouty Description		
Property Description Short description of licensed HMC	O (No of storage atc)	
•	•	
Property Type = SHARED HOUSE,	No of Units = 1, Occupancy = 3, No of Storeys = 2	
Number of Rooms	Total Number of Rooms 4	
a) Sleeping 3	b) Living Rooms	
, , ,	, ,	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	1
rumber of den domained Flats.	Number of Non-Sen Sont. Flats.	'
Shared Amenities Nur	mber Description	
	1	
b) Bathrooms/Showers	1	
c) W.C.s	1	
Licence Details		
Commencement date:	08/06/2016 Duration of licence:	01/11/2020
Maximum number of persons or h	nouseholds permitted to occupy HMO under conditions of	licence:
Households 3 Pers	sons 3	
Information referred to a resident	ential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence		
	conds, HMO - Fire Blanket, HMO - Fire Mandatory conds, HMC) -

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, Loft Insulation, Other Fire Works, Structural Fire works



Licence No.

2016/00504/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

41 Exeter Street Brighton BN1 5PH

Ward

Preston Park

Name & Address of Lice			
Mrs Mary Dolores Bridgewood	d, 30 The Strand Topsham	Devons EX3 0AY	
Name & Address of Pers	on Managing		
,			
D			
Property Description		`	
Short description of license	•	•	
Property Type = SHARED HC	OUSE, No of Units = 1, Occ	supancy = 4, No of Storeys = 2	
Number of Rooms	Total Number of F	Rooms 4	
a) Sleeping 4	h) I ivir	ng Rooms 1	
a) 5.55pg	5, 2	ig i toome	
Number of Self Contained F	Flats: 0	Number of Non Self Cont. Flats:	0
Number of Self Contained i	iats.	Number of Non Sen Sont. Flats.	0
Shared Amenities	Number Descrip	otion	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
Licence Details			
Commencement date:	30/03/2016	Duration of licence:	01/11/2020
Maximum number of persor	ns or households permitte	ed to occupy HMO under conditions of	licence:
Households 4	Persons 4		
Information referred to a	residential property tri	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li Electrical Works, Fire Alarms,		nds, HMO - Fire Mandatory conds, HMO -	Furniture

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



Licence No.

2016/00506/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

68 Coventry Street Brighton BN1 5PQ

Ward

Preston Park

Name & Address of Licence Holder		
Mrs Mary Dolores Bridgewood, 30 The St	rand Topsham Devon EX3 0AY	
Name & Address of Person Managi	ing	
,		
Property Description		
Short description of licensed HMO (No	of storeys, etc)	
Property Type = SHARED HOUSE, No of	Units = 1, Occupancy = 4, No of Storeys = 2	
Number of Rooms Total	al Number of Rooms 4	
a) Sleeping 4	b) Living Rooms 1	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	0
Number of Self Contained Flats.	Number of Non Sen Cont. Flats.	0
Shared Amenities Number	Description	
a) Kitchen 1		
b) Bathrooms/Showers 1		
c) W.C.s		
Licence Details		
Commencement date: 30	/03/2016 Duration of licence:	01/11/2020
	Datation of houses.	01/11/2020
Maximum number of persons or house	holds permitted to occupy HMO under conditions of li	cence:
Households 4 Persons	4	
Information referred to a residentia	l property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence	Alarms HMO - Flec Mandatory conds HMO - Fire Mand	aton.

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.

2016/00511/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO) 62 Rugby Place Brighton BN2 5JA

Ward

East Brighton

Name & Address of Lice	nce Holder		
Mr Ian Harrison, 5 Merlewood	Bracknell RG12 9PA		
Name & Address of Pers	on Managing		
Property Description			
Short description of license	d HMO (No of storeys,	etc)	
Property Type = SHARED HC	OUSE, No of Units = 1, O	ccupancy = 4, No of Storeys = 3	
Normalian of Document	Tatal Namela	f Daama - F	
Number of Rooms	Total Number o		
a) Sleeping 4	b) Liv	ving Rooms 1	
Number of Self Contained F	flats: 0	Number of Non Self Cont. Fl	ats: 1
Shared Amenities	Number Desc	ription	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	3		
Licence Details			
Commencement date:	27/04/2016	Duration of licence:	01/11/2020
Maximum number of person	se or households norm	itted to occupy HMO under condition	s of licence:
waxiiiluiii iluiiibei oi persoi	is of flousefloids perfil	itted to occupy Himo under condition	s of ficerice.
Households 4	Persons 4		
nformation referred to a	residential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li			
		conds, HMO - Fire Mandatory conds, Hl	MO - Furniture

Mandatory 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.

2016/00549/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO) 71A Preston Road Brighton BN1 4QE

Ward

Preston Park

Name & Address of Licen	ce Holder		
Mr Roger Kay, 87 Church Roa	d Hove BN3 2BB		
Name & Address of Perso	n Managing		
Pier Associates Ltd, T/a Just L	5 5	Hove BN3 2BB	
Tiel Associates Liu, 17a sust L	ets of Charch Noad I	10VE DI43 2DD	
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 = 2	
Number of Rooms	Total Number	of Rooms 7	
a) Sleeping 6	b) ¹	Living Rooms 1	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Flat	es: 1
Shared Amenities	Number Des	scription	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	02/02/2016	Duration of licence:	01/11/2020
Commencement date.	02/02/2010	Duration of licence.	01/11/2020
Maximum number of person	s or households per	mitted to occupy HMO under conditions	of licence:
Households 6	Persons 6		
		tuibal au l auda Tuibal.	
None	residentiai propert	y tribunal or Lands Tribunal:	
Decision of Tribunal		Reference number	
Decision of Hibarial		Veletelice liquiber	
HMO - Fire Mandatory conds,	IMO - Elec Mandatory HMO - Furniture Mand	conds, HMO - Fire Blanket, HMO - Fire Blo datory conds, HMO - Gas Mandatory conds ory conds, HMO - Property Maint Mandatory	, HMO -

HMO - Repairs Floors 5, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Other fire works



Licence No.

2016/00559/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

20 Highdown Road Hove BN3 6EE

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			
Pier Associates Ltd, T/as Jus	t Lets 87 Church Road Hove East Sussex BN3 2BB			
Property Description				
Short description of license	ed HMO (No of storeys, etc)			
Property Type = SHARED HO	DUSE, No of Units = 1, Occupancy = 4, No of Storeys = 2			
	,,,,,,			
Number of Rooms	Total Number of Rooms 5			
a) Sleeping 4	b) Living Rooms			
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	1			
Licence Details				
Commencement date:	08/04/2016 Duration of licence:	01/11/2020		
Commencement date.	00/04/2010 Duration of licence.	01/11/2020		
Maximum number of person	ns or households permitted to occupy HMO under condition	ons of licence:		
Haveahalda 4	D			
Households 4	Persons 4			
Information referred to a	residential property tribunal or Lands Tribunal:			
None	recruential property tribunal of Eurice Tribunal.			
Decision of Tribunal	Reference number	•		
Summary of conditions of I	icence latory conds, HMO - Fire Blanket, HMO - Fire Mandatory conds	- HMO		
- FILE MIAITH, FIVIO - FIEC MAND	atory conus, rnvio - rne bianket, rivio - rne iviandatory cond:	5, I IIVIU -		

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, Structural Fire works



Licence No.

2016/00566/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

14 Walpole Road Brighton BN2 0EA

Ward

East Brighton

Name & Address of Licence	e Holder		
Mr Tim Laurence, Hoffman Inst	itute Box 72 Quay House	e River Road Arundel BN18 9DF	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys, e	etc)	
Property Type = SHARED HOU	JSE, No of Units = 1, Oc	ccupancy = 4, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 5	
a) Sleeping 4	b) Livi	ing Rooms 1	
Number of Self Contained Fla	ats: 0	Number of Non Self Cont. Flat	ts: 1
Shared Amenities	Number Descr	ription	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	15/04/2016	Duration of licence:	01/11/2020
commonocation duto.	10/0 1/2010	Baration of hoones.	01/11/2020
Maximum number of persons	or households permit	ted to occupy HMO under conditions	of licence:
Households 0	Persons 4]	
nousenoius	reisolis 4		
Information referred to a re	esidential proper <u>ty t</u> ı	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Commence of actualities and the			
Summary of conditions of lic	ence		

Fire - Under Stairs 2, 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, Other Fire works, Structural Fire Works



Licence No.

2016/00575/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

95 Ditchling Rise Brighton BN1 4QP

Ward

Preston Park

Name & Address of Licen	ce Holder			
Ms Geraldine Garner, 47 Carv	er Road London SE24	4 9LS		
Name & Address of Perso	n Managing			
Ms Geraldine Garner, 47 Carv	er Road London SE24	4 9LS		
Property Description				
Short description of licensed	d HMO (No of storeys	s, etc)		
Property Type = SHARED HO	USE, No of Units = 1,	Occupanc	y = 4, No of Storeys = 2	
		•	•	
Number of Rooms	Total Number	r of Rooms	5	
a) Sleeping 4	b) ¹	Living Roo	ms 1	
Number of Self Contained FI	ats: 0)	Number of Non Self Cont. Flats:	1
Shared Amenities	Number Des	scription		
a) Kitchen	1			
b) Bathrooms/Showers	1			
c) W.C.s	1			
Licence Details				
Licence Details				
Commencement date:	20/07/2016		Duration of licence:	01/11/2020
Maximum number of person	s or households per	mitted to	occupy HMO under conditions of I	icence:
Households 4	Persons 4			
Information referred to a	residential propert	y tribuna	l 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 - Licensing Loft Insulation, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



Licence No.

2016/00581/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

104B Church Road	
Hove	
BN3 2EB	

Ward

Central Hove

Name & Address of Licen	ce Holder	
Olivia Trading Ltd, Timbers Ro	ookery Way Haywards Heath West Sussex RH16 4RE	
Name & Address of Perso	on Managing	
Pier Associates Ltd, T/as Just	Lets 87 Church Road Hove East Sussex BN3 2BB	
Property Description		
Short description of licensed	d HMO (No of storeys, etc)	
Property Type = SHARED HO	USE, No of Units = 1, Occupancy = 4, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 5	
a) Sleeping 4	b) Living Rooms 1	
a) Sieeping	b) Living Rooms	
N	N	
Number of Self Contained FI	lats: 0 Number of Non Self Cont. Flats: 1	
Chaved Amenities	Number Description	
Shared Amenities a) Kitchen	Number Description	
b) Bathrooms/Showers	1	
c) W.C.s	1	
Licence Details		
Commencement date:	02/06/2016 Duration of licence: 01/11/202	20
Commencement date.	Duration of ficence.	0
Maximum number of person	s or households permitted to occupy HMO under conditions of licence:	
Households 4	Persons 4	
Tiouconorus 1		
Information referred to a I	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Mandatory conds, HMO - Gas	cence HMO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property - Repairs Ventilation 3, HMO - Repairs Windows 3, HMO - RubbishRecyc	

Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Otehr Fire Works, Other Fire works



Licence No.

2016/00613/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

104D Church Road Hove BN3 2EB

Ward

Central Hove

Name & Address of Licen	e Holder		
Olivia Trading Ltd, Timbers Ro		/est Sussex RH16 4RE	
<u> </u>			
Name & Address of Perso	n Managing		
Pier Assoicates Ltd, T/as Just I	ets 87 Church Road Hove Ea	st Sussex BN3 2BB	
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOU	JSE, No of Units = 1, Occupar	icy = 4, No of Storeys = 3	
Number of Rooms	Total Number of Roor	ns 5	
a) Sleeping 4	b) Living Ro	ooms 1	
a) clooping	5) <u>Living</u> 10		
Number of Self Contained Fla	uts: 0	Number of Non Self Cont. Flats:	1
			•
Shared Amenities	Number Description	1	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
Commencement date:	02/06/2016	Duration of licence:	01/11/2020
Maximum number of persons	or households permitted to	occupy HMO under conditions of I	icence:
Have abolds 4	B 4		
Households 4	Persons 4		
Information referred to a r	esidential property tribun	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic HMO - Elec Mandatory conds,		re 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 3, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Other Fire Works



Licence No.

2016/00636/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

22 Clarendon Road Hove BN3 3WS

Ward

Goldsmid

Name & Address of Licer			
Mr Ashley Bennett, 22 Claren	don Road Hove East Suss	sex BN3 3WS	
Name 9 Address of Days	an Mananina		
Name & Address of Pers	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storevs. e	tc)	
•	•	cupancy = 4, No of Storeys = 3	
Troporty Typo OrnateDire	7002, 110 01 011110 1, 00	ouparity 1, 140 of otology	
Number of Rooms	Total Number of	Rooms 5	
a) Sleeping 3	b) Livi	ng Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats	: 1
Shared Amenities	Number Descr	iption	
a) Kitchen b) Bathrooms/Showers	1		
c) W.C.s	1		
-,			
Licence Details			
Commencement date:	30/09/2016	Duration of licence:	01/11/2020
Commencement date.	30/09/2010	Duration of licence.	01/11/2020
Maximum number of persor	ns or households permit	ted to occupy HMO under conditions o	f licence:
Households 4	Persons 4		
	1 0.00		
Information referred to a	residential property to	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li		ms 3, HMO - Fire Blanket, HMO - Fire Do	ors 1, HMO

HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 3, HMO - Fire Blanket, HMO - Fire Doors 1, HMO - Fire Doors 7, 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



Licence No.

2016/00642/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

25 Old Shoreham Road Brighton BN1 5DQ

Ward

Preston Park

Name & Address of Lice	nce Holder		
Mr Alexander Whitehead, 37	Lincoln Street Brighton Bl	N2 9UG	
Name & Address of Lice	nce Holder		
Mr Elliot Whitehead, 14 Galat	ea Square London SE15	3PL	
Name & Address of Pers	on Managing		
,			
Dunnauty Denovintion			
Property Description Short description of license	nd HMO (No of storous /	nto)	
-	-		
Property Type = SHARED HC	JUSE, NO OI UTIILS = 1, OC	ccupancy = 4, No of Storeys = 3	
Number of Rooms	Total Number of	f Rooms 4	
a) Sleeping 4	b) Liv	ring Rooms 1	
Number of Self Contained F	Flats: 0	Number of Non Self Cont. Fla	ats: 1
Shared Amenities	Number Descr	ription	
a) Kitchen	1		
b) Bathrooms/Showers c) W.C.s	2		
C) W.O.3	2		
Licence Details			
	4044040	1	24444222
Commencement date:	12/10/2016	Duration of licence:	01/11/2020
Maximum number of person	ns or households permi	tted to occupy HMO under conditions	of licence:
Households 4	Persons 4	7	
		_	
Information referred to a	residential property t	ribunal or Lands Tribunal:	
None			
		conds, HMO - Furi rityrer Marcelatoryboo nd , HMO - General Electrical 1, HMO - Ge	
SultiMary is to singition and the second of	ide Me - Property Chges I	Mandatory conds, HMO - Property Main - Tenant Agrmnt Mandatory conds, Othe	t Mandatory



Licence No.

2016/00652/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

23A Western Road Hove BN3 1AF

Ward

Brunswick And Adelaide

Name & Address of Licen	ce Holder			
Mr Paul Sweetman, 78 Lawrer	nce Road Hove Ea	ast Sussex BN	13 5QD	
Name & Address of Perso	n Managing			
Priors, 90 Western Road Hove	East Sussex BN	13 1GG		
December 1				
Property Description				
Short description of licensed	•			
Property Type = SHARED HO	USE, No of Units	= 3, Occupan	cy = 3, No of Storeys = 3	
Number of Rooms	Total Nur	mber of Room	s 4	
a) Sleeping 3		b) Living Ro	oms 1	
a) 5.55pg		b) Living ite		
Number of Self Contained Fl	lete:	0	Number of Non Self Cont. Flats:	1
Number of Sen Contained Fi	als.	U	Number of Non Sen Cont. Flats.	I
Shared Amenities	Number	Description		
a) Kitchen	1	Description		
b) Bathrooms/Showers	1			
c) W.C.s	1			
0, 11.0.0				
Licence Details				
Commencement date:	26/04/20)16	Duration of licence:	01/11/2020
Maximum number of person	s or households	permitted to	occupy HMO under conditions of I	icence:
Households 3	Persons	3		
Information referred to a	residential proj	perty tribuna	al or Lands Tribunal:	
None	,	,, ,		
Decision of Tribunal			Reference number	
Summary of conditions of lie Electrical Works, Electrical wo		HMO - Elec Ma	andatory conds, HMO - Fire Mandato	ry conds,
HMO - Furniture Mandatory co	onds, HMO - Gas	Mandatory cor	nds, HMO - General Electrical 1, HM0	•
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 fire works



Licence No.

2016/00655/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

83 Havelock Road Brighton BN1 6GL

Ward

Preston Park

Name & Address of Licenc	e Holder		
Mr Martin Greenhalgh, 18 Fernd	ale Road Burgess H	ill West Sussex RH15 0HG	
Nove O Address of Deves	Managina		
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys	s, etc)	
Property Type = SHARED HOU	SE, No of Units = 1,	Occupancy = 4, No of Storeys = 2	
Number of Rooms	Total Number		
a) Sleeping 4	b) L	_iving Rooms1	
Number of Self Contained Flat	ts: 0	Number of Non Self Cont. F	lats: 1
Shared Amenities	Number Des	scription	
a) Kitchen	1 Des	scription	
b) Bathrooms/Showers	1		
c) W.C.s	1		
Lianna Dataila			
Licence Details			
Commencement date:	17/05/2017	Duration of licence:	01/11/2020
Maximum number of persons	or households nerr	mitted to occupy HMO under condition	s of licence:
Households 4	Persons 4		
Information referred <u>to a re</u>	sidential property	y tribunal or Lands Tribunal:	_
None			
Decision of Tribunal		Reference number	
		y conds, HMO - Furniture Mandatory con	ds, HMO - Gas

HMO - Elec Mandatory conds, 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



Licence No.

2016/00656/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

28 Lorna Road Hove BN3 3EN

Ward

Goldsmid

Name & Address of Licence	Holder		
Mrs Susan Hammond, 14 Grasme	ere Street Mount Saint	Thomas NSW Australia, 2500	
Name & Address of Person I	Managing		
Parks Letting, 107 Queens Road I	Brighton East Sussex	BN1 3XF	
Property Description			
Short description of licensed HI	MO (No of storeys, e	tc)	
Property Type = SHARED HOUSE	E, No of Units = 3, Oce	cupancy = 3, No of Storeys = 2	
Number of Rooms	Total Number of	Rooms 4	
a) Sleeping 3	b) Livi	ng Rooms 1	
Number of Self Contained Flats	. 0	Number of Non Self Cont. Flats:	1
Shared Amenities N	umber Descri	iption	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	2		
Licence Details			
,	1		
Commencement date:	02/06/2016	Duration of licence:	01/11/2020
Maximum number of persons of	r households permiti	ted to occupy HMO under conditions of	licence:
Households 3 Pe	ersons 3		
Information referred to a res	idential property tr	ibunal or Lands Tribunal:	
None	naoritiai property ti	nounal of Edition Historian.	
Decision of Tribunal		Reference number	
Summary of conditions of licentifications of Licentifications and Stairs 2, Fire Alarm, I		y conds, HMO - Fire Blanket, HMO - Fire M	andatory

Fire - Under Stairs 2, 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 - Licensing Kitchen 6, 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



Licence No.

2016/00664/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

128 Holland Road Hove BN3 1JR

Ward

Goldsmid

Name & Address of Licen	ice Holder		
Mr Sirus Taghan, 47 Norfolk S	quare Brighton East Sussex	BN1 2PA	
Name & Address of Perso	on Managing		
ı			
Property Description			
Short description of license	d HMO (No of storeys, etc)) 	
Property Type = SHARED HO	USE, No of Units = 1, Occur	pancy = 4, No of Storeys = 4	
. , , , ,	· · ·		
Number of Rooms	Total Number of Ro	ooms 5	
a) Sleeping 4	b) Living	Rooms 1	
Number of Self Contained F	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	2		
Licence Details			
Commencement date:	07/06/2016	Duration of licence:	01/11/2020
Johnnencement date.	01700/2010	baration of nechec.	01/11/2020
Maximum number of person	s or households permitted	d to occupy HMO under conditions	of licence:
Households 4	Persons 4		
nouseriolus 4	Persons 4		
Information referred to a	residential property trib	unal or Lands Tribunal:	
None	,		
Decision of Tribunal		Reference number	
Summary of conditions of lie		ors 8, HMO - Fire Mandatory conds, H	M∩ - Fire
		ons o, fillo - File Manualory Conus, file Mandatory conds. HMO - Gas Mand	

Fire Alarm, HMO - Elec Mandatory conds, HMO - Fire Doors 8, HMO - Fire Mandatory conds, HMO - Fire Notices 1, HMO - Fire Recessed Lighting, HMO - Furniture Mandatory 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, Other Fire Works



Licence No.

2016/00668/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

36 Temple Street Brighton BN1 3BH

Ward

		vvaru	Rege	ПСУ
Name & Address of Licence	e Holder			
Mrs Julie Yeoman, 13 Belle Vue		XON RG9 1JQ		
	•			
Name & Address of Person	Managing			
Hamptons International Limited,	Hamptons International Hea	ad Office 7th Floor U	K House 180 Oxfo	rd Street
Duamanti Dagarintian				
Property Description Short description of licensed I	HMO (No of storeys, etc)			
Property Type = SHARED HOUS	•	ncv = 3 No of Store	ave = A	
Troporty Type – OFFARED FIOOR	JE, No or Office – 1, Occupa	110y = 3, 140 01 01010		
Number of Rooms	Total Number of Room	ms 4		
a) Sleeping 3	b) Living R	ooms 1		
		¬	0.150 (=1.4	
Number of Self Contained Flat	s : 0	Number of Non	Self Cont. Flats:	1
Shared Amenities	Number Description	n		
a) Kitchen	1			
b) Bathrooms/Showers	1			
c) W.C.s	1			
Licence Details				
0	44/04/0040	Downstian of the		04/44/0000
Commencement date:	14/04/2016	Duration of li	cence:	01/11/2020
Maximum number of persons	or households permitted t	o occupy HMO und	der conditions of I	icence:
Households 3 F	Persons 3			
Information referred to a re	sidential property tribur	nal or Lands Trib	unal:	
None				
Decision of Tribunal		Referei	nce number	
Summary of conditions of lice Electrical Works, Fire Alarms, HI Mandatory conds, HMO - Gas M	MO - Elec Mandatory conds,			

Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Loft Insulation, Management/Repairs, Ventilation



Licence No.

2016/00682/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 1 27 Bloomsbury Place Brighton BN2 1DB

Ward

East Brighton

			<u> </u>
Nama O Addusas aflican	an Haldan		
Name & Address of Licen			
Mr Howard Alexander, Flat 12	A 13-14 Kings Garde	ens Hove East Sussex BN3 2PG	
Name O Address of Dame	Managailan		
Name & Address of Perso	<u> </u>		
Mr Spencer Watkins, 27 Bloon	nsbury Place Brighton	n East Sussex BN2 1DB	
Duran antia Daranin tian			
Property Description	LUMO (No of otomor	4-)	
Short description of licensed	•	•	
Property Type = SHARED HO	USE, No of Units = 1,	Occupancy = 4, No of Storeys = 2	
Number of Rooms	Total Number	r of Rooms 6	
a) Sleeping 4		Living Rooms 1	
a) Sieeping	D)	Living Rooms	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities		escription	
a) Kitchen b) Bathrooms/Showers	2		
c) W.C.s	2		
,			
icence Details			
Commencement date:	12/06/2017	Duration of licence:	01/11/2020
Maximum number of person	s or households per	rmitted to occupy HMO under conditions of	licence:
Households 4	Persons 4		
nformation referred to a	residential propert	ty tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	HMO - Fire Locks, HI	MO - Fire Mandatory conds, HMO - Furniture N	

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



Licence No.

2016/00684/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

79 Wilson Avenue Brighton BN2 5PA

Ward

Fast Brighton

		Trai a	
Name & Address of Licen	ice 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 HO	USE, No of Units = 6, Occ	upancy = 6, No of Storeys = 2	2
		_	
Number of Rooms	Total Number of F		
a) Sleeping 6	b) Livin	ng Rooms 2	
Number of Self Contained F	lats: 0	Number of Non Self	Cont. Flats: 1
Shared Amenities	Number Descrip	ption	
a) Kitchen	2		
o) Bathrooms/Showers c) W.C.s	2 2		
3) VV.C.S			
_icence Details			
Commencement date:	18/04/2016	Duration of licence	e: 01/11/2020
Maximum number of person	s or households permitte	ed to occupy HMO under co	onditions of licence:
		,	
Households 6	Persons 6		
unformaction unformed to a	usaidantial mususantu tui	ihal au lauda Tuihal	
	residential property tri	ibunal or Lands Tribunal:	
None		D-f	
Decision of Tribunal		Reference n	umper
Summary of conditions of li HMO - Elec Mandatory conds		nds, HMO - Furniture Mandat	tory 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.

2016/00747/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

14 Clifton Mews Clifton Hill Brighton BN1 3HR

Ward

Regency

Name & Address of Licence Holde	er	
Mr Peter Dorey, 15 Clifton Hill Brighton E	East Sussex BN1 3HQ	
Name & Address of Person Manag		
Mr Anthony Uden Trading As Uden Esta	te Agents, 88 Dyke Road Brighton East Sussex BN1 3JD	
Property Description		
Short description of licensed HMO (N		
Property Type = SHARED HOUSE, No o	of Units = 1, Occupancy = 4, No of Storeys = 3	
Number of Rooms To	otal Number of Rooms 5	
a) Sleeping 4	b) Living Rooms 1	
a) Clooping	b) Living Roome	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	1
Number of Self Contained Flats.	Number of Non Sen Sont. Hats.	ı
Shared Amenities Numbe	r Description	
a) Kitchen 1		
b) Bathrooms/Showers 2		
c) W.C.s		
License Details		
Licence Details		
Commencement date: 2	5/04/2016 Duration of licence:	01/11/2020
Maximum number of persons or hous	seholds permitted to occupy HMO under conditions of li	icence:
Households 4 Persons	5 4	
Information referred to a residenti	ial 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.

2016/00766/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 3 48 Springfield Road Brighton BN1 6DA

Ward

Preston Park

Name & Address of Licen	ce Holder			
Mrs C Webb, 2 Barnfield Gard	ens Ditchling West S	ussex BN	6 8UE	
Name & Address of Perso	on Managing			
Tanat-Jones Company (Mana	gement) Limited, 49 I	Norfolk Sc	quare Brighton BN1 2PA	
Property Description				
Short description of license	d HMO (No of storey	s, etc)		
Property Type = SHARED HO	USE, No of Units = 1,	Occupar	ncy = 3, No of Storeys = 2	
Number of Rooms	Total Numbe	r of Roon	ns 3	
a) Sleeping 3	b)	Living Ro	ooms 1	
			_	_
Number of Self Contained Fl	ats:)	Number of Non Self Cont. Flats:	0
Shared Amenities	Number De	scription	1	
a) Kitchen	1			
b) Bathrooms/Showers c) W.C.s	1			
C) VV.O.S	ı			
Licence Details				
Commencement date:	09/06/2016		Duration of licence:	01/11/2020
Maximum number of nerson	s or households nei	mitted to	o occupy HMO under conditions of I	icence
			occupy rimo under conditions or i	
Households 3	Persons 3			
	11. 0.1			
Information referred to a	residential propert	y tribun	al or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of lie HMO - Elec Mandatory conds,		ry conds,	HMO - Furniture Mandatory conds, H	MO -

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, Other fire works



Licence No.

2016/00767/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

First And Second Floor 75 Goldstone Villas Hove BN3 3RW

Ward

Goldsmid

Name & Address of Licen	ce Holder		
Brighton & Hove Securities, G		Place Hove BN3 1FI	
Engineer a Flove edeanaee, en	Cana i loci co Lancacimio i	Iddo Flovo Bitto II E	
Name & Address of Perso	n Managing		
Mr Mark Blencowe & Mr Philip	<u> </u>	ern Road Hove BN3 1GG	
<u> </u>			
Property Description			
Short description of licensed	d HMO (No of storeys, etc)		
Property Type = Not Assigned	, No of Units = 1, Occupancy	/ = 3, No of Storeys = 2	
Number of Rooms	Total Number of Ro	oms 4	
a) Sleeping 3	b) Living	Rooms 1	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities	Number Descripti	on	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s			
Licence Details			
Commencement date:	12/10/2016	Duration of licence:	01/11/2020
Maximum number of person	s or households permitted	to occupy HMO under conditions	of licence:
		to occupy time under conditions	or necrice.
Households 3	Persons 3		
In Comment on the Comment of the con-		on all and an de Talleman	
Information referred to a	residential property trib	unal or Lands Tribunal:	
None		D-4	
Decision of Tribunal		Reference number	
Summary of conditions of lie		oore 3 HMO Fire Doore 5 HMO F	iro Conoral 1
		oors 3, HMO - Fire Doors 5, HMO - F conds, HMO - Gas Mandatory conds	

Fire Blanket, HMO - Elec Mandatory conds, HMO - Fire Doors 3, HMO - Fire Doors 5, HMO - Fire General 1, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - General 1, HMO - General 6, HMO - General 7, 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.

2016/00769/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

1A Ditchling Rise Brighton BN1 4QL

Ward

Preston Park

Name O Address of Lange Halder
Name & Address of Licence Holder
Mrs C Webb, 2 Barnfield Gardens Ditchling BN6 8UE
Name & Address of Barson Managing
Name & Address of Person Managing
Tanat-Jones Company (Management) Ltd, 49 Norfolk Square Brighton BN1 2PA
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 3, Occupancy = 3, No of Storeys = 2
- 1. Sportly 1. Jpc - 2. Jp. 1. 2. 2. 1. 2. 2. 1. 1. 2. 2. 1. 1. 2. 2. 1. 1. 2. 2. 1. 2. 2. 1. 2. 2. 1. 2. 2. 1. 2. 2. 2. 1. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.
Number of Rooms Total Number of Rooms 3
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 1
b) Bathrooms/Showers 1
c) W.C.s
Licence Details
Commencement date: 09/06/2016 Duration of licence: 01/11/2020
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
The state of the s
Households 3 Persons 3
Information referred to a residential property tribunal or Lands Tribunal:
None
Decision of Tribunal Reference number
Summary of conditions of licence Electrical Works, Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture

Electrical Works, Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, 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, Structural fire works, Ventilation



Licence No.

2016/00779/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO) 23 Coolham Drive Brighton BN2 5HU

Ward

East Brighton

Name & Address of Licen	ce Holder	
Ms Sharon Bilsby-Vint, Rivende	ell 108 Court Farm Road Newhaven East Sussex BN9 9HI	В
Name & Address of Perso	n Managing	
1		
Property Description		
Short description of licensed	HMO (No of storeys, etc)	
Property Type = Not Assigned,	No of Units = 4, Occupancy = 4, No of Storeys = 2	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 4	b) Living Rooms 2	
a) Sieeping	b) Living Rooms 2	
N	N . L	. =
Number of Self Contained Fla	ats: 0 Number of Non Self Con	t. Flats: 1
Shared Amenities	Number Description	
a) Kitchen	1 Description	
o) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Commencement date:	19/04/2016 Duration of licence:	01/11/2020
		\$ 11 T 11 T 12 T 1
Maximum number of persons	s or households permitted to occupy HMO under condi	tions of licence:
Households 4	Persons 4	
Information referred to a r	esidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference numb	per
Summary of conditions of lic	e ence atory conds. HMO - Fire Mandatory conds. HMO - Furnitur	e Mandatory 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.

2016/00819/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

5A Hove Street Hove BN3 2TR

Ward

Central Hove

Name & Address of Licer	nce Holder		
Mr Stuart Chadwell, 38 Barrov		Shronshire TE13 6ET	
vii Gtaart Griaawoii, oo Barrov	V Guede Madri VVernook e	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Name & Address of Perso	on Managing		
Mr Mark Blencowe Mr Philip \	5 5	estern Road Hove BN3 1GG	
·			
Property Description			
Short description of license	d HMO (No of storeys, e	etc)	
Property Type = SHARED HC	OUSE, No of Units = 1, Oc	ccupancy = 3, No of Storeys = 2	
Number of Rooms	Total Number of	f Rooms 5	
a) Sleeping 3	b) Liv	ring Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flat	s: 0
Shared Amenities	Number Desci	ription	
a) Kitchen	1		
o) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Licence Details			
Commencement date:	10/06/2016	Duration of licence:	01/11/2020
Marrian and a second	a ay bayya balda ya wak	ttad ta aaasuus IINAO sundan aanditiana	of lines and
waximum number of person	s or nousenoias permi	tted to occupy HMO under conditions	of licence:
Households 3	Persons 3		
nformation referred to a	residential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li			
		ms 3, HMO - Fire Blanket, HMO - Fire Ma Mandatory conds, HMO - Licensing Loft	
Johas, Flivio - Fulfillule Mallu	atory corius, rivio - Gas	Maid Maid Mandatan Comment LING	insulation,

HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Walls 4,

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



Licence No.

2016/00832/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 2 4 Selborne Place Hove BN3 3EJ

Ward

Goldsmid

Name & Address of Licence	e Holder			
Brighton & Hove Securities Ltd, 6	63 Lansdowne F	Place Hove BN	N3 1FL	
Name & Address of Person	Managing			
Mr Mark Blencowe & Mr Philip W	Vilford, T/a Priors	s 90 Western	Road Hove BN3 1GG	
Property Description				
	UMO (No of oto	rovo oto)		
Short description of licensed I	•			
Property Type = SHARED HOUS	SE, No of Units :	= 1, Occupano	cy = 3, No of Storeys = 2	
Number of Rooms	Total Num	ber of Room	s 4	
a) Sleeping 3		b) Living Roo	oms 1	
, . • <u> </u>		, ,		
Number of Self Contained Flat	s:	0	Number of Non Self Cont. Flats:	0
Shared Amenities	Number	Description		
a) Kitchen	1			
b) Bathrooms/Showers	1			
c) W.C.s	1			
Licence Details				
Commencement date:	06/10/201	16	Duration of licence:	01/11/2020
Maximum number of persons	or households	permitted to	occupy HMO under conditions of li	cence:
Households 3 F	Persons	3		
Information referred to a re-	sidential prop	erty tribuna	al or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Doors 3, HMO - Fire Doors 5, HM	tory conds, HM0 MO - Fire Gener	al 1, HMO - F	Systems 3, HMO - Fire Doors 1, HMO ire Mandatory conds, HMO - Furniture ral 1, HMO - General 6, HMO - Genera	;

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, Other Fire works





Licence No.

2016/00838/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO) First And Second Floor Flats 33 Denmark Villas Hove BN3 3TD

Ward

Goldsmid

Nama C Addusas afticam	a a III a I al a u			
Name & Address of Licen				
Mr David Dillon, 168 Osier Cre	scent Muswell Hill	I London N10	1RF	
Name of Address of Barre	Managarian			
Name & Address of Perso	on Managing			
,				
Dranarty Description				
Property Description	d HMO (No of sto	rovo oto)		
Short description of license	•			
Property Type = SHARED HO	USE, No of Units :	= 1, Occupan	cy = 3, No of Storeys = 2	
Number of Rooms	Total Num	nber of Room	ns 4	
a) Sleeping 3		b) Living Ro	oms 1	
a) 5.66pmg		b) Living 1 to		
Number of Self Contained F	late	0	Number of Non Self Cont. Flats:	0
Number of Sen Contained F	ats.		Number of Non-Sen Cont. Flats.	U
Shared Amenities	Number	Description		
a) Kitchen	1	Docomption		
b) Bathrooms/Showers	1			
c) W.C.s	1			
Licence Details				
Commencement date:	13/10/201	16	Duration of licence:	01/11/2020
Maximum number of person	s or households	permitted to	occupy HMO under conditions of	licence:
Households 3	Persons	3		
•				
Information referred to a	residential prop	erty tribuna	al or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of li	rence			
_		latory conds	HMO - Furniture Mandatory conds. H	IMO - 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, Other fire works



Licence No.

2016/00843/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

1 Portland Mews Brighton BN2 1EQ

Ward

East Brighton

Name & Address of Licence	Holder		
Mr Geoff Burgess, Otters Holt The	Cotswolds Southwick	BN42 4GH	
Name & Address of Person I	Managing		
S J Lettings Ltd, 52 Lewes Road I	Brighton BN2 3HW		
Property Description			
Short description of licensed H	MO (No of storeys, et	c)	
Property Type = SHARED HOUS	E. No of Units = 3. Occ	upancy = 4. No of Storevs = 3	
-17 31			
Number of Rooms	Total Number of F	Rooms 4	
a) Sleeping 4	b) Livin	g Rooms 1	
Number of Self Contained Flats	: 0	Number of Non Self Cont. Fla	ats: 1
Shared Amenities N	lumber Descrip	otion	
a) Kitchen	1	5.1.5.11	
b) Bathrooms/Showers	2		
c) W.C.s	3		
Licence Details			
Commencement date:	15/04/2016	Duration of licence:	01/11/2020
Maximum number of persons o	r households permitte	ed to occupy HMO under conditions	of licence:
•		.,	
Households 3 Pe	ersons 4		
Information referred to a res	idential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licen	ce		
		andatory conds. HMO - Furniture Man	datory 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, Other Fire Works



Licence No.

2016/00864/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 1 36 Chesham Road Brighton BN2 1NB

Ward

East Brighton

Name & Address of Licence Holder	
Mr Matthew Sorokin, 77A Rutland Road Hove East Sussex BN3 5FE	
None O Address of Brown Marcolina	
Name & Address of Person Managing	
Geneva Investment Group Ltd, 77A Rutland Road Hove East Sussex BN3 5FE	
Duananty Dagavintian	
Property Description Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 3, No of Storeys = 2	
Number of Rooms Total Number of Rooms 4	
a) Sleeping 3 b) Living Rooms 1	
a) clooping	
Number of Calf Contained Flate:	4
Number of Self Contained Flats: 0 Number of Non Self Cont. Flat	s: 1
Shared Amenities Number Description	
a) Kitchen 1	
b) Bathrooms/Showers 2	
c) W.C.s	
Licence Details	
04/00/0040	04/44/0000
Commencement date: 31/03/2016 Duration of licence:	01/11/2020
Maximum number of persons or households permitted to occupy HMO under conditions	of licence:
Households 3 Persons 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 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.

2016/00896/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

First And Second Floor Flat 14 Farm Road Hove BN3 1FB

Ward

Brunswick And Adelaide

Name & Address of Licer	nce Holder			
Mr John Leiva, 4 Goldstone R		ıssex BN3 3R	P	
Name & Address of Pers	on Managing			
Brices Limited, Top Floor 18	Chesham Road B	Brighton BN2	1NB	
Property Description				
Short description of license	•			
Property Type = SHARED HC	OUSE, No of Units	= 1, Occupan	cy = 3, No of Storeys = 2	
Number of Rooms	Total Nun	nber of Roon	ns 4	
a) Sleeping 3		b) Living Ro	oms 1	
, . .		, .		
Number of Self Contained F	lats:	0	Number of Non Self Cont. Flats:	1
			1	
Shared Amenities	Number	Description		
a) Kitchen	1			
b) Bathrooms/Showers	1			
c) W.C.s	1			
Licence Details				
Commencement date:	19/04/20	16	Duration of licence:	01/11/2020
Maximum number of persor	ns or households	permitted to	occupy HMO under conditions of I	icence:
Households 3	Persons	3		
Tiouseriolus	reisons	3		
Information referred to a	residential prop	perty tribun	al or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of li Electrical Works, Fire Alarms,		datory conds,	HMO - Fire Mandatory conds, HMO -	Furniture

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, Mnaagement/Repairs



Licence No.

2016/00921/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 3 57 Holland Road Hove BN3 1JE

Ward

Brunswick And Adelaide

Name & Address of Licence	e Holder	
Mr Patrick Moorhead, 78 Dyke R	Road Avenue Brighton BN1 5LF	
Name & Address of Person	Managing	
Parks Residential Ltd, 30 New R	toad Brighton BN1 1BN	
Property Description		
Short description of licensed I		
Property Type = SHARED HOUS	SE, No of Units = 1, Occupancy = 3, No of Storeys = 2	
Number of Rooms	Total Number of Rooms 3	
a) Sleeping 3	b) Living Rooms 1	
, , ,	, , ,	
Number of Self Contained Flat	s: 0 Number of Non Self Cont. Flats	s: 0
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
0	OF/OC/OOA7	04/44/0000
Commencement date:	05/06/2017 Duration of licence:	01/11/2020
Maximum number of persons	or households permitted to occupy HMO under conditions o	of licence:
Households 3	Persons 3	
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 Blanket, HMO - Fire External Stairs 5, 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.

2016/00953/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO) 8 Sudeley Street Brighton BN2 1HE

Ward

East Brighton

nformation referred to a	residential property tribunal or Lands Tribunal:	
nformation referred to a	residential property tribunal or Lands Tribunal:	
Households 4	Persons 4	
-		
Maximum number of person	ns or households permitted to occupy HMO under conditions	of licence:
Commencement date:	09/06/2016 Duration of licence:	01/11/2020
icence Details		
., vv.o.s	1	
b) Bathrooms/Showers c) W.C.s	1 1	
a) Kitchen	1	
Shared Amenities	Number Description	
Number of Self Contained F	Flats: 0 Number of Non Self Cont. Flat	ts: 1
-, g	2,9	
a) Sleeping 4	b) Living Rooms 1	
Number of Rooms	Total Number of Rooms 5	
Property Type = SHARED HO	DUSE, No of Units = 4, Occupancy = 4, No of Storeys = 3	
Short description of license	ed HMO (No of storeys, etc)	
Property Description		
Name & Address of Pers	on Managing	
James 9 Adduses of Dave	on Managina	
Miss Christine Campfield, 197	7 Argyle Road Ealing London W13 0AU	
	ilice Holdel	
ame & Address of Lice	nco Holdor	

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.

2016/01026/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 2 10 Montpelier Road Brighton BN1 2LQ

Ward

Regency

Name & Address of Licen			
Mr Leslie Winstanley-Gouthwa	ite, 3 Beaconsfield Parad	e Brighton East Sussex BN1 6DN	
Name & Address of Perso			
10 Montpelier Ltd, Flat 3 10 Mo	ontpelier Road Brighton B	N1 2LQ	
Property Description			
Short description of licensed	LHMO (No of storous, of	(c)	
·	,	•	
Property Type = SHARED HOL	JSE, No of Units = 1, Occ	cupancy = 3, No or Storeys = 2	
Number of Rooms	Total Number of	Rooms 4	
a) Sleeping 3	b) Livir	ng Rooms 1	
, , ,	,	<u> </u>	
Number of Self Contained Fla	ats: 0	Number of Non Self Cont. Flats:	1
rumbor or con contamour i	0	Number of New Confession Flate.	,
Shared Amenities	Number Descri	ption	
a) Kitchen	1	F	
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	12/05/2016	Duration of licence:	01/11/2020
Maximum number of persons	s or housaholds narmitt	ed to occupy HMO under conditions of li	icence:
	or nousenoids permit	ou to occupy rimo under conditions of h	icerice.
Households 3	Persons 3		
Info		Show all and a Tallerman	
Information referred to a r	esidential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Furniture Mandatory conds, HM	e Alarms, HMO - Elec Ma MO - Gas Mandatory cond	ndatory conds, HMO - Fire Mandatory cond ds, HMO - Property Chges Mandatory conds Mandatory conds, HMO - Tenant Agrimt M	s, HMO -

conds, Other Fire works



Licence No.

2016/01050/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Maisonette
21 Bedford Place
Brighton
BN1 2PT

Ward

Regency

		Walu	rtegei	Ю
Name & Address of Licence	ce Holder			
Mr Jonathan Swain, 10 Calle P	erpetuo Socorro Sitges	Barcelona 08870		
Name & Address of Perso	n Managing			
Cambridge Brand Vaughan, T/a	as Brand Vaughan 110	St Georges Road Brighto	n East Sussex BN2	1EA
Dranarty Description				
Property Description Short description of licensed	HMO (No of storoys	etc)		
Property Type = SHARED HOL	•	•	ovo = 2	
-Toperty Type - SHARED HOC	JSE, NO OF OTHES - 1, OF	cupancy – 3, No or Store	eys – 2	
Number of Rooms	Total Number of	f Rooms 4		
a) Sleeping 3	b) Liv	ring Rooms 1		
Number of Self Contained Fla	ats: 0	Number of Non	Self Cont. Flats:	1
Shared Amenities		ription		
a) Kitchen b) Bathrooms/Showers	1			
c) W.C.s	1			
,				
Licence Details				
Commencement date:	23/06/2016	Duration of I	icence:	01/11/2020
Maximum number of persons	or households permi	tted to occupy HMO un	der conditions of li	cence:
Households 3	Persons 3]		
		-		
Information referred to a re	esidential property t	ribunal or Lands Trib	ounal:	
None				
Decision of Tribunal		Refere	nce number	
Summary of conditions of lic		anda LIMO Francisco A	Aondoton, canda LIN	40. Coo
TIVIO - EIEC IVIANDALOI V CONOS.	aivio - Fire ivianuatory (JUNUS. MIVIO - FUITIILUTE IV	nanualory conus. Ar	110 - 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.

2016/01055/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

11 Queensbury Mews
Brighton
BN1 2FE

Ward

Regency

YVaiu	regency
Nama 9 Address of License Holder	
Name & Address of Licence Holder	
Mr William Howliston, 9 Melbourne Street Hebden Bridge HX7 6AS	
Name & Address of Person Managing	
Ms Alison George, T/a Let It Bee Letting Agency 135 Portland Road Hove	e BN3 5QJ
Book to Book to the	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 4, Oc	of Storeys = 3
Number of Rooms Total Number of Rooms 7	
a) Sleeping 3 b) Living Rooms	1
a) Siceping b) Living Rooms	·
Number of Oalf Contained Flater	of Non-Oalf Court Flates
Number of Self Contained Flats: 0 Number	of Non Self Cont. Flats: 1
Chanad Amanitian Number Description	
Shared Amenities Number Description a) Kitchen 1	
b) Bathrooms/Showers 2	
c) W.C.s 2	
Licence Details	
Commencement date: 26/05/2016 Duration	on of licence: 01/11/2020
Commencement date. 20/03/2010 Duration	01/11/2020
Maximum number of persons or households permitted to occupy HI	MO under conditions of licence:
Households 3 Persons 4	
nouselloius 3 Feisolis 4	
Information referred to a residential property tribunal or Land	s Tribunal:
None	
Decision of Tribunal	Reference number
Summary of conditions of licence Electrical Works, Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire	Mandatory conds, HMO - Furniture

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.

2016/01064/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

112 Preston Drove Brighton BN1 6GP

Ward

Preston Park

Name & Address of Licen	ce Holder	
Mr Alay Paun, Clarendon Man	sions 80 East Street Brighton East Sussex BN1 1NF	
Name & Address of Perso	n Monoging	
Name & Address of Perso	п мападіпд	
,		
Property Description		
Short description of licensed	I HMO (No of storeys, etc)	
Property Type = SHARED HO	USE, No of Units = 1, Occupancy = 4, No of Storeys = 2	
Number of Rooms	Total Number of Rooms 3	
a) Sleeping 3	b) Living Rooms 1	
a) 0.00pg	3) <u> </u>	
Number of Self Contained Fl	ats: 0 Number of Non Self Cont. Flats:	1
Shared Amenities	Number Description	
a) Kitchen b) Bathrooms/Showers	1 	
c) W.C.s	1	
Licence Details		
Commencement date:	06/05/2016 Duration of licence:	01/11/2020
Maximum number of person	s or households permitted to occupy HMO under conditions of	licence:
Households 4	Persons 4	
Information referred to a i	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 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 - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural Fire works



Licence No.

2016/01068/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

41 Port Hall Street Brighton BN1 5PJ

Ward

Preston Park

Name & Address of Licence			
Ms Jennifer Smith, 92 Highdown	Road Hove East Sussex BN3	6EA	
Name & Address of Person	Managing		
,			
Duamanti: Daganintian			
Property Description	IMO (No of otomore sto)		
Short description of licensed I	-		
Property Type = SHARED HOUS	3E, No of Units = 4, Occupand	y = 4, No of Storeys = 3	
Number of Rooms	Total Number of Room	s 6	
a) Sleeping 4	b) Living Roo	ms 1	
	u, =g		
Number of Self Contained Flat	s: 0	Number of Non Self Cont. Fla	ts: 1
Number of Jen Jontained Flat	5.	Number of Non Sen Sont. I la	1
Shared Amenities	Number Description		
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	12/05/2016	Duration of licence:	01/11/2020
Maximum number of persons	or households permitted to	occupy HMO under conditions	of licence:
Households 4 I	Persons 4		
Information referred to a re	sidential property tribuna	l or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice		INAC Franciture Mandaton condi	

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



Licence No.

2016/01071/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

6 Salisbury House 4 St Aubyns Hove BN3 2TB

Ward

Central Hove

Name & Address of Licen			
Mr Nicholas Hoffelner, 2 Pemb	roke Avenue Hove Eas	st Sussex BN3 5DA	
Name O Address of Dame	a Managian		
Name & Address of Perso		500 00 5	
JD Properties LTD, 57 Preston	Street Brighton Suss	ex BN1 2HE	
Dramantic Description			
Property Description	d LIMO (No. of atomore	ota)	
Short description of licensed	,	•	
Property Type = SHARED HO	USE, No of Units = 1, C	Occupancy = 5, No of Storeys = 2	
Number of Rooms	Total Number of	of Rooms 6	
a) Sleeping 5	b) Li	iving Rooms 1	
, , , ,	,	<u> </u>	
Number of Self Contained FI	ats: 0	Number of Non Self Cont. Flats:	1
Number of Gen Gontained in	ats.	Number of Non Sen Sont. Flats.	ı
Shared Amenities	Number Desc	cription	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	3		
Licence Details			
Licence Details			
Commencement date:	26/05/2016	Duration of licence:	01/11/2020
Maximum number of person	s or households perm	itted to occupy HMO under conditions of	licence:
Households 5	Persons 5		
Information referred to a I	residential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice Additional Facilities, Fire Alarm		ory conds, HMO - Fire Mandatory conds, HM	10 -

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, Ventilation



Licence No.

2016/01111/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

22 Madehurst Close Brighton BN2 0YR

Ward

East Brighton

Name & Address of Licence H	lolder	
Mr Paul Young, 38 Longmead Way		
im radi rading, as Langinada rad		
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 = 4, Occupancy = 4, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 4	b) Living Rooms 1	
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:	13/10/2016 Duration of licence:	01/11/2020
Commencement date.	13/10/2010 Duration of ficerice.	01/11/2020
Maximum number of persons or	households permitted to occupy HMO under conditions of li	cence:
Households 4 Per	sons 4	
Tiouscrioids + Tious	3013	
Information referred to a resid	lential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence	e) - Fire Alarm Systems 3, HMO - Fire Doors 2, HMO - Fire Emer	nency

HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 3, HMO - Fire Doors 2, HMO - Fire Emergency Lighting 1, HMO - Fire General 1, 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 - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Loft Insulation, Other Fire works, Structural Fire Works, Ventilation





Licence No.

2016/01142/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

First Floor Flat 50 Sackville Road Hove BN3 3HA

Ward

Westbourne

Name & Address of Licen	ce Holder			
Westfield Investments Ltd, The	Paddock London	Road Hassocks West Sus	ssex BN6 9NA	
Name & Address of Perso	n Managing			
,				
Property Description				
Short description of licensed	l HMO (No of stor	eys, etc)		
Property Type = SHARED HO	USE, No of Units =	4, Occupancy = 4, No of S	Storeys = 2	
Number of Rooms	Total Num	per of Rooms 5		
a) Sleeping 4		b) Living Rooms 1		
Number of Self Contained FI	ats:	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				
Commencement date:	09/06/201	Duration	of licence:	01/11/2020
	00/00/201			0111112020
Maximum number of person	s or households p	ermitted to occupy HMC	under conditions of l	icence:
Households 4	Persons	4		
TIOUS T	1 6130113	<u>T</u>		
Information referred to a i	esidential <u>prop</u>	erty tribunal or Lands	Tribunal:	
None				
Decision of Tribunal		Re	ference number	
0				
Summary of conditions of lice Flectrical Works, Fire Alarms,		itory conds. HMO - Fire Ma	andatory conds. HMO - 1	Furniture

Mandatory conds, HMO - Gas Mandatory conds, 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, Structural Fire Works, Ventilation



Licence No.

2016/01147/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 3
Plaza House
14 Jubilee Street
Brighton
BN1 1GF

Ward

St. Peter's And North Laine

Name & Address of Licen	ce Holder		
Mr Paul Faulkner, 47 Norfolk S	Square Brighton East	Sussex BN1 2PA	
Name & Address of Perso			
Homelets (Brighton) Ltd, 47 No	orfolk Square Brighton	n BN1 2PA	
D (D) (
Property Description	dumo (No of eterror	4-1	
Short description of license			
Property Type = SHARED HO	USE, No of Units = 1,	Occupancy = 3, No of Storeys = 3	
Number of Rooms	Total Number	of Rooms 4	
a) Sleeping 4	b)	Living Rooms 1	
, , , , , , , , , , , , , , , , , , , ,	,	<u> </u>	
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number De	scription	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	13/06/2016	Duration of licence:	01/11/2020
Maximum number of person	s or households per	mitted to occupy HMO under conditions of	licence:
	———		
Households 3	Persons 3		
Information referred to a	residential propert	y tribunal or Lands Tribunal:	
None	residentiai propert	y tribulial of Lalius Tribulial.	
Decision of Tribunal		Reference number	
		TOTOLOGICA HARMON	
Summary of conditions of lie Fire Alarm, HMO - Elec Manda		re Mandatory conds, HMO - Furniture Mandato	ory 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



Licence No.

2016/01149/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 2 Kings Mansions 54 - 55 Kings Road Brighton RN1 1NA

Ward

Regency

Name & Address of Licen	nce Holder	
Mr Liam O Connor, 47 Norfolk	Square Brighton East Sussex BN1 2PA	
Name & Address of Perso	on Managing	
	orfolk Square Brighton BN1 2PA	
Tiomelets (Brighton) Eta, 47 No	Official Square Brighton Bivi 21 A	
Property Description		
Short description of licensed	d HMO (No of storeys, etc)	
Property Type = SHARED HO	OUSE, No of Units = 1, Occupancy = 7, No of Storeys = 2	
Number of Rooms	Total Number of Rooms 8	
a) Sleeping 7	b) Living Rooms 1	
Number of Self Contained FI	lats: 0 Number of Non Self Cont. Flats: 1	
Number of Sen Contained in	Number of Non Sen Cont. Hats.	
Shared Amenities	Number Description	
a) Kitchen	2	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Ziociico Botano		
Commencement date:	28/06/2016 Duration of licence : 01/11/2020	ı
Maximum number of person	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	
conds, HMO - Gas Mandatory	cence 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, Other fire works, Ventilation



Licence No.

2016/01152/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 4 Kings Mansions 54 - 55 Kings Road Brighton RN1 1NA

Ward

Regency

Name & Address of Licence	e Holder				
Homelets (Brighton) Ltd, 47 No	rfolk Square Brigh	nton East Sus	sex BN1 2	PA	
Name & Address of Person					
Homelets (Brighton) Ltd, 47 No	rfolk Square Brigh	nton East Sus	sex BN1 2	PA	
Duamantu Daganintian					
Property Description	LIMO (No of oto)	\			
Short description of licensed	•	•			
Property Type = SHARED HOL	JSE, No of Units =	= 1, Occupand	cy = 4, No	of Storeys = 2	
Number of Rooms	Total Num	ber of Rooms	s 5		
a) Sleeping 4		b) Living Roo	oms	1	
Number of Self Contained Fla	ats:	0	Number	of Non Self Cont. Flats:	1
	L				
Shared Amenities	Number	Description			
a) Kitchen	1				
b) Bathrooms/Showers	1				
c) W.C.s	2				
Licence Details					
Licence Details					
Commencement date:	29/06/201	6	Durati	on of licence:	01/11/2020
Maximum number of persons	s or households	nermitted to	occupy H	MO under conditions of	licence:
			оссиру п		
Households 4	Persons	4			
Information referred to a re	esidential prop	erty tribuna	l or Land	ds Tribunal:	
None					
Decision of Tribunal				Reference number	
Summary of conditions of lice HMO - Elec Mandatory conds, I Mandatory conds, HMO - Licen Maint Mandatory conds, HMO -	HMO - Fire Manda sing Bathroom 4,	HMO - Prope	rty Chges	Mandatory conds, HMO -	Property

Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Other Fire works, Ventilation



Licence No.

2016/01167/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 3 Kings Mansions 54 - 55 Kings Road Brighton RN1 1NA

Ward

Regency

Name & Address of Licer	ce Holder
Mr Liam O'Connor, 47 Norfolk	Square Brighton East Sussex BN1 2PA
Name & Address of Pers	n Managing
Homelets (Brighton) Ltd, 47 N	orfolk Square Brighton BN1 2PA
Property Description	
Short description of license	HMO (No of storeys, etc)
Property Type = SHARED HC	JSE, No of Units = 1, Occupancy = 7, No of Storeys = 2
Number of Rooms	Total Number of Rooms 8
a) Sleeping 7	b) Living Rooms 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	2
c) W.C.s	2
Licence Details	
Commonoomont data:	28/06/2016 Duration of licence : 01/11/2020
Commencement date:	28/06/2016 Duration of licence : 01/11/2020
Maximum number of persor	s or households permitted to occupy HMO under conditions of licence:
	_
Households 7	Persons 7
Information referred to a	esidential property tribunal or Lands Tribunal:
None	condition property and and or Lando Misandin
Decision of Tribunal	Reference number
	TOTOTOTO HUMBOT
Mandatory conds, HMO - Lice	Hence HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas using Bathroom 4, HMO - Licensing Kitchen 6, HMO - Property Chges erty Maint Mandatory conds, HMO - Repairs Bathroom 14, HMO - Repairs
	Callings 1, HMO - Panairs Drainage 2, HMO - Panairs Walls 6, HMO -

RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Other fire works, Ventilation





Licence No.

2016/01175/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 8
Arena House
31 Regent Street
Brighton
RN1 1111

Ward

St. Peter's And North Laine

Name & Address of Licence Ho	der	
Mr Gavin Blessing, 47 Norfolk Square		
Name & Address of Person Mar	naging	
Homelets (Brighton) Ltd, 47 Norfolk S	quare Brighton BN1 2PA	
Property Description		
Short description of licensed HMO	(No of storeys, etc)	
Property Type = SHARED HOUSE, N	o of Units = 1, Occupancy = 3, No of Storeys = 2	
Number of Rooms	Total Number of Rooms 4	
a) Sleeping 3	b) Living Rooms 1	
a) clooping	b) Living roome	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	1
rambor of con contained rate.	Trainibol of Non contain tate.	
Shared Amenities Num	ber Description	
a) Kitchen 1		
b) Bathrooms/Showers 2		
c) W.C.s		
Licence Details		
Commencement date:	13/06/2016 Duration of licence:	01/11/2020
Maximum number of persons or ho	useholds permitted to occupy HMO under conditions of li	icence:
	,	
Households 3 Perso	ons 3	
Information referred to a reside	ntial property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence	nds HMO - Fire Mandatory conds HMO - Furniture Mandator	ry conde

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.

2016/01199/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 30 Avalon West Street Brighton RN1 2RP

Ward

ard Regency

Name & Address of Licence Holder	
Ms Jenny Macdonald, 47 Norfolk Square Brighton East Sussex BN1 2PA	
No O Address of Dones of Managers	
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 = 3, No of Storeys = 2	
Number of Rooms Total Number of Rooms 4	
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: 13/06/2016 Duration of licence:	01/11/2020
Maximum number of persons or households permitted to occupy HMO under conditions	s of licence:
Households 3 Persons 3	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of licence	40 LINAO

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.

2016/01206/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

36A Preston Road Brighton BN1 4QF

Ward

Preston Park

Name & Address of Licence	Holder		
Ms Simona Vakili, 147 Surrender	n Road Brighton East Sussex	BN1 6ZA	
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, Occupan	cy = 4, No of Storeys = 2	
N	T. (1N 1 (D		
Number of Rooms	Total Number of Room		
a) Sleeping 4	b) Living Ro	oms 1	
		_	
Number of Self Contained Flats	s : 0	Number of Non Self Cont. Flat	s: 0
Shared Amenities	Number Description		
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	2		
Licence Details			
Commencement date:	04/11/2016	Duration of licence:	01/11/2020
Maximum number of persons of	or households permitted to	occupy HMO under conditions	of licence:
Households 4 P	Persons 4		
Information referred to a res	sidential property tribun	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Cummany of conditions of lines			
Summary of conditions of licer HMO - Elec Mandatory conds. HI		HMO - Fire Blanket, HMO - Fire Do	oors 1. HMO
		ure Mandatory conds, HMO - Gas I	

HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 3, HMO - Fire Blanket, HMO - Fire Doors 1, HMO - Fire General 1, 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



Licence No.

2016/01256/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 2 7 Argyle Road Brighton BN1 4QA

Ward

Preston Park

Name & Address of Licence Holde	r	
Mr Barry Cox, 150 New Church Road Ho	ve East Sussex BN3 4JD	
Name & Address of Person Manag	ing	
Property Description		
Short description of licensed HMO (No	o of storevs. etc)	
	f Units = 1, Occupancy = 3, No of Storeys = 2	
	, cc. ,, cpaney c, c. c.c.c.yc _	
Number of Rooms Tot	tal Number of Rooms 4	
a) Sleeping 3	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		
c) W.C.s		
D		
Licence Details		
Commencement date: 14	J/07/2017 Duration of licence:	01/11/2020
Maximum number of persons or house	eholds permitted to occupy HMO under conditions of	liconco:
		iicerice.
Households 3 Persons	3	
Information referred to a residentia	al property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence HMO - Elec Mandatory conds. HMO - Fir	e Alarm Systems 3. HMO - Fire Mandatory conds. HMO -	Furniture

HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 3, HMO - Fire Mandatory conds, HMO - Furniture Mandatory 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.

2016/01257/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

134A Portland Road Hove BN3 5QL

Ward

Westbourne

Name & Address of Lice		
Mr Barry Cox, 150 New Churc	ch Road Hove East Sussex BN3 4JD	
N 0 4 1 1 6 5	••	
Name & Address of Pers		
J D Property Network, Ms Jer	nny Hau 57 Preston Street Brighton Sussex BN1 2HE	
Property Description		
Short description of license	d HMO (No of storevs. etc)	
	DUSE, No of Units = 1, Occupancy = 4, No of Storeys = 3	
Troperty Type - Office Direct	700E, No of Office – 1, Occupancy – 4, No of Occios 3 – 0	
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:	1
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
		0.4.4.4.100.00
Commencement date:	14/02/2017 Duration of licence:	01/11/2020
Maximum number of person	ns or households permitted to occupy HMO under conditions of l	licence:
Households 4	Persons 4	
Tiouseiloius 4	r ersons 4	
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	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.

2016/01258/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

31 Coventry Street Brighton BN1 5PP

Ward

Preston Park

Name & Address of Licen	ce Holder	
Mr David Harper, Winton Birc	h Close Haywards Heath West Sussex RH17 7ST	
Name & Address of Perso	on Managing	
J D Property Network, Ms Jen	ny Hau 57 Preston Street Brighton East Sussex BN1 2HE	
Property Description		
Short description of license	d HMO (No of storeys, etc)	
Property Type = SHARED HO	USE, No of Units = 1, Occupancy = 4, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 5	
a) Sleeping 4	b) Living Rooms 1	
Number of Self Contained F	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		
Commencement date:	12/05/2016 Duration of licence:	01/11/2020
Maximum number of person	s or households permitted to occupy HMO under conditions of	licence:
Hawashalda 4	Damana /	
Households 4	Persons 4	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of li- Fire Alarms, HMO - Elec Mand	cence datory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandat	tory conds,

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.

2016/01311/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

10 Dyke Road Drive Brighton BN1 6AJ

Ward

Preston Park

Name & Address of Licer	ce Holder	
Ms Ododo Dafe, 175 Haveloc	k Road Brighton East Sussex BN1 6GN	
Name & Address of Perso	on Managing	
,		
Property Description		
Short description of license	d HMO (No of storeys, etc)	
Property Type = SHARED HC	SUSE, No of Units = 1, Occupancy = 4, No of Storeys = 2	
. , ,,		
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: 1
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	1	
c) W.C.s	1	
Licence Details		
Commencement date:	04/07/2016 Duration of licence:	01/11/2020
Commencement date.	04/07/2010 Bulation of incence.	01/11/2020
Maximum number of persor	s or households permitted to occupy HMO under condition	ons of licence:
Hawaahalda 4	Persons 4	
Households 4	Persons 4	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference numbe	
		-
Summary of conditions of li	cence	

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.

2016/01333/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

3 College Gardens Brighton BN2 1HP

Ward

East Brighton

Name & Address of Licence	Holder		
Lion Homes (Sussex) Ltd, Lion Ho	ouse 27 New Road Brig	hton East Sussex BN1 1UG	
Name & Address of Person I	l anaging		
Mr Mark Wiseman, Lion House 2	7 New Road Brighton E	ast Sussex BN1 1UG	
Property Description			
Short description of licensed H	MO (No of storeys, etc	:)	
Property Type = SHARED HOUSI	Ξ, No of Units = 1, Occι	upancy = 4, No of Storeys = 2	
Number of Dooms	Total Number of D		
Number of Rooms	Total Number of R		
a) Sleeping	b) Livinç	g Rooms	
	-		1
Number of Self Contained Flats	: 0	Number of Non Self Cont. Flat	s: 0
	lumber Descrip	tion	
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
			Γ
Commencement date:	23/05/2016	Duration of licence:	01/11/2020
Maximum number of persons o	r households permitte	d to occupy HMO under conditions	of licence:
Households 4 Pe	ersons 4		
Information reformed to a sur-	idoutiol musus uturtuit	arrad and anda Tuibarrada	
Information referred to a res	idential property trib	bunar or Lands Tribunai:	
None		Deference must be	
Decision of Tribunal		Reference number	
Summary of conditions of licen	ce		

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.

2016/01359/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 3 20 Springfield Road Brighton BN1 6DA

Ward

Preston Park

Name & Address of Licen	ice Holder		
Mr Martyn Allen, 49 Springfield	d Road Brighton East Susse	ex BN1 6DF	
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, Occu	pancy = 3, No of Storeys = 2	
Number of Rooms	Total Number of Ro	nama 1	
a) Sleeping 3	b) Living	Rooms 1	
			1
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fl	ats: 1
Shared Amenities	Number Descript	tion	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Electrice Betails			
Commencement date:	14/02/2017	Duration of licence:	01/11/2020
Mandana		d 4 11110 d d - d	
Maximum number of person	s or nousenoids permitted	d to occupy HMO under condition	s of licence:
Households 3	Persons 3		
Information referred to a	residential property trib	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	cence		
HMO - Elec Mandatory conds.	, HMO - Fire Blanket, HMO -	- Fire Mandatory conds, HMO - Furn	
Mandatory conds, HMO - Gas	Mandatory conds, HMO - L	icensing Loft Insulation, HMO - Prop	erty Chges

HMO - Elec Mandatory conds, HMO - Fire Blanket, 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



Licence No.

2016/01381/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

24 Upper Abbey Road Brighton BN2 0AD

Ward

East Brighton

<u> </u>
ton East Sussex BN2 5JQ
No of Storeys = 3
2
per of Non Self Cont. Flats: 1
ration of licence: 01/11/2020
HMO under conditions of licence:
ands Tribunal:
ands Tribunal:
ands 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, Structural fire works, Ventilation



Licence No.

2016/01397/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 2 38 Stanford Road Brighton BN1 5DJ

Ward

Preston Park

Name & Address of Licen	ce Holder		
Dr Dileni Vanderpant, 38 Stan	ford Road Brighton East Suss	sex BN1 5DJ	
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of licensed			
Property Type = SHARED HO	USE, No of Units = 1, Occupa	ancy = 4, No of Storeys = 2	
Number of Rooms	Total Number of Roo	oms 5	
a) Sleeping 4	b) Living F	Rooms 1	
	٠, ٦		
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number Description	on	
a) Kitchen	1		
o) Bathrooms/Showers	1		
c) W.C.s	1		
icence Details			
Commencement date:	13/02/2017	Duration of licence:	01/11/2020
Maximum number of person	s or households permitted	to occupy HMO under conditions of	licence:
Households 4	Persons 4		
nformation referred to a	residential property tribu	nal or Lands Tribunal:	
None			
Decision of Tribunal	Reference number		
	HMO - Fire Alarm Systems 7	', HMO - Fire Blanket, HMO - Fire Door	

HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 7, HMO - Fire Blanket, HMO - Fire Doors 1, HMO - Fire Doors 3, HMO - Fire Doors 5, HMO - Fire Doors 7, 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



Licence No.

2016/01407/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

1 Montpelier Road	
Brighton	
BN1 2LQ	

Ward

Regency

L	
Name & Address of Licence Holder	
Mr Alfred Haagman, Meadowbrook House Brook Street Cuckfield West Sussex RH17 5	5JJ
Name & Address of Person Managing	
Pavilion Properties Limited, 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 = 4, No of Storeys = 3	
, 2224	
Number of Rooms Total Number of Rooms 5	
a) Sleeping b) Living Rooms 1	
Number of Self Contained Flats: 0 Number of Non Self C	ont. Flats:
Number of contamour late.	ond rate.
Shared Amenities Number Description	
a) Kitchen 1	
b) Bathrooms/Showers 2	
c) W.C.s 2	
Licence Details	
Commencement date: 02/06/2016 Duration of licence:	01/11/2020
Maximum number of persons or households permitted to occupy HMO under cor	iditions of licence:
Households 4 Persons 4	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference nu	mber
Summary of conditions of licence Enlargement of Bedroom, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fi	re Mandatory conds,

Enlargement of Bedroom, 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, Other Fire works



Licence No.

2016/01447/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Second And Third Floor Flat 38 Lansdowne Place Hove BN3 1HH

Ward

Brunswick And Adelaide

Name & Address of Licence Holder	
Mr Simon Fawkes, 21 Ringles Cross Uckfield TN22 1HG	
Name & Address of Person Managing	
Brand Vaughan, 117-118 Western Road Hove East Sussex BN3 1DB	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 3, No of Storeys = 2	
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. Fla	ts: 1
Shared Amenities Number Description	
a) Kitchen 1	
b) Bathrooms/Showers 1 c) W.C.s 1	
Licence Details	
Commencement date: 07/06/2016 Duration of licence:	01/11/2020
Commencement date: 07/06/2016 Duration of licence:	01/11/2020
Maximum number of persons or households permitted to occupy HMO under conditions	of licence:
Households 3 Persons 3	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	
Summary of conditions of licence	adatan, aanda

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, Other Fire Works



Licence No.

2016/01497/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

21 Blatchington Road Hove BN3 3YP

Ward

Central Hove

Name & Address of Licen	ice Holder		
Mr Maurice Kifford, 3 Princes	Square Hove East Sussex B	N3 4GE	
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 = 3, No of Storeys = 3	
Number of Rooms	Total Number of Ro		
a) Sleeping 3	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	1		
b) Bathrooms/Showers c) W.C.s	2		
,,			
icence Details			
	07/04/0040	-	0.4.4.4.400.00
Commencement date:	27/04/2016	Duration of licence:	01/11/2020
Maximum number of person	s or households permitted	d to occupy HMO under conditions of I	licence:
Jamashalda 0	D		
Households 3	Persons 3		
nformation referred to a	residential property trib	unal or Lands Tribunal:	
lone			
Decision of Tribunal		Reference number	
Summary of conditions of li		ds, HMO - Fire Notices 1, HMO - Furnitur	re

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.

2016/01509/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

57B Port Hall Road Brighton BN1 5PD

Ward

Preston Park

Name & Address of Licence	Holder	
Mr Owen Bennett, 504A Calle 47	Por 60 Y 62 Santa Ana Merida Yucatan Mexico	
Name & Address of Person	Managing	
Leaders Ltd, 119-120 Western Ro	oad Brighton BN1 2AD	
Property Description		
Short description of licensed H	IMO (No of storeys, etc)	
Property Type = SHARED HOUS	E, No of Units = 1, Occupancy = 3, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 4	
a) Sleeping 3	b) Living Rooms 1	
Number of Self Contained Flats	S: 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		
Licence Details		
Commencement date:	30/09/2016 Duration of licence:	01/11/2020
Maximum number of persons of	or households permitted to occupy HMO under conditions	of licence:
•	,	
Households 3 P	ersons 3	
Information referred to a res	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licer		LIMO OTT

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory 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.

2016/01572/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

139 Whitehawk Road Brighton BN2 5FJ

Ward

East Brighton

Number of Rooms 7 a) Sleeping 5 b) Living Rooms 1 Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: Shared Amenities Number Description a) Kitchen 3 b) Bathrooms/Showers 3 c) W.C.s 4	1
a) Sleeping 5 b) Living Rooms 1 Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: Shared Amenities Number Description a) Kitchen 3 b) Bathrooms/Showers 3	1
a) Sleeping 5 b) Living Rooms 1 Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: Shared Amenities Number Description a) Kitchen 3	1
a) Sleeping 5 b) Living Rooms 1 Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: Shared Amenities Number Description	1
a) Sleeping 5 b) Living Rooms 1	1
Number of Rooms Total Number of Rooms 7	
Property Type = BEDSIT, No of Units = 5, Occupancy = 5, No of Storeys = 2	
Short description of licensed HMO (No of storeys, etc)	
Property Description	
Name & Address of Person Managing	
Mr Nick Smith, Flat 2 Hart House 4 Lilford Road London SE5 9HJ	

Additional Electrical Works, Drainage, 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, Undersized Bedroom



Licence No.

2016/01590/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat At 4 Kings Mews Hove BN3 2PA

Ward

Central Hove

Name & Address of Licence	Holder		
Mr Christopher Jones-Parry, Woo		d Hamnshire GU31 5HO	
ivii Offisiophici Jones-i arry, vvoc	Dupeckers Rogate Fetershek	a Hampshire Goot on Q	
Name & Address of Person	Managing		
Clifford Dann, Albion House Albi	on Street Lewes East Sussex	BN7 2NF	
Property Description			
Short description of licensed H	IMO (No of storeys, etc)		
Property Type = SHARED HOUS	E, No of Units = 1, Occupand	cy = 4, No of Storeys = 4	
Number of Rooms	Total Number of Room	ns 5	
a) Sleeping 4	b) Living Ro	oms 1	
November of Oalf Oantain ad Flate		Name to a state of the control of th	4
Number of Self Contained Flats	6 : 0	Number of Non Self Cont. Flats:	1
Shared Amenities I	Number Description		
a) Kitchen	1 Description		
b) Bathrooms/Showers	1		
c) W.C.s	2		
Licence Details			
Commencement date:	07/06/2016	Duration of licence:	01/11/2020
Maximum number of persons of	or households permitted to	occupy HMO under conditions of	licence:
-		,	
Households 4 P	ersons 4		
Information referred to a res	sidential property tribuna	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	ry conds, HMO - Fire Blanket	, HMO - Fire Doors 8, HMO - Fire Materials, HMO - Property Chages N	

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



Licence No.

2016/01623/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 5 **Chesham Mansions** 25-27 Eaton Place Brighton RN2 1FG

Ward

East Brighton

Name & Address of Licen	nce Holder	
Mr Benedict Beaumont, 14 Be	eechwood Close Brighton BN1 8EP	
Name & Address of Perso	on Managing	
	31 Upper St James's Street Brighton BN2 1JN	
Oute 1 Toporty Columbia Eta, o	71 Opper of buries a officer Brighton BN2 1014	
Property Description		
Short description of license	d HMO (No of storeys, etc)	
Property Type = SHARED HO	OUSE, No of Units = 1, Occupancy = 4, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 5	
a) Sleeping 4	b) Living Rooms 1	
a) Sieeping	b) Living Rooms	
Number of Self Contained Fl	lats: 0 Number of Non Self Cont. Flats:	0
Number of Gen Gontained 11	Number of Non-cent cont. Flats.	
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	1	
c) W.C.s	1	
Licence Details		
Commencement date:	14/02/2017 Duration of licence :	01/11/2020
Maximum number of person	ns or households permitted to occupy HMO under conditions of lice	ence:
	P	
Households 4	Persons 4	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Mandatory conds, HMO - Furn	cence , HMO - Fire Blanket, HMO - Fire Doors 1, HMO - Fire Doors 3, HMO - initure Mandatory 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.

2016/01676/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

First And Second Floor Flat 19 York Road Hove BN3 1DJ

Ward

Brunswick And Adelaide

Name & Address of Licer	nce Holder			
Mr Chris Zantis, 10 Little Cres		st Sussex BN2	7GF	
Name & Address of Person	on Managing			
Houseen Lettings & Property	Services Ltd, 56 l	Lansdowne Pla	ce Hove BN3 1FG	
Property Description				
Short description of license	d HMO (No of st	toreys, etc)		
Property Type = SHARED HC	USE, No of Units	s = 1, Occupan	cy = 3, No of Storeys = 2	
Number of Rooms	Total Nu	mber of Room	s 4	
a) Sleeping 3		b) Living Ro	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	1			
c) W.C.s	2			
Licence Details				
0	40/07/0	040	Donation of House	04/44/0000
Commencement date:	18/07/20	016	Duration of licence:	01/11/2020
Maximum number of persor	ns or household:	s permitted to	occupy HMO under conditions of I	icence:
Households 3	Persons	3		
	. 0.00110			
Information referred to a	residential pro	perty tribuna	al or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of li Fire Alarm, HMO - Elec Mand		O - Fire Blanket	:. HMO - Fire Mandatory conds. HMO	- Fire

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 - Repairs Ventilation 2, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Structural Fire Works, Structural Fire works, Ventilation



Licence No.

2016/02010/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

10 Kemp Town Place Brighton BN2 1NE

Ward

East Brighton

ame & Address of Licen	ce Holder		
r John James, 126 Firle Roa	d Seaford E Sussex	x BN25 2JD	
ame & Address of Perso	on Managing		
re Property Solutions, 31 U	pper St James Stree	et Brighton East Sussex BN2 1JN	
operty Description			
ort description of license	d HMO (No of store	eys, etc)	
operty Type = SHARED HO	USE, No of Units =	1, Occupancy = 4, No of Storeys = 3	
ımber of Rooms	i otai Numi	per of Rooms 6	
Sleeping 4	I	b) Living Rooms 1	
			,
umber of Self Contained Fl	lats:	0 Number of Non Self Cont. Flats:	1
ared Amenities	Number I	Description	
Kitchen	1		
Bathrooms/Showers	3		
W.C.s	2		
cence Details			
ommencement date:	14/06/2016	Duration of licence:	01/11/2020
ıximum number of person	s or households p	ermitted to occupy HMO under conditions of	licence:
-	_		
ouseholds 4	Persons	4	
ormation referred to a	residential prope	erty tribunal or Lands Tribunal:	
one	residential prope	ity tribunal of Lands Tribunal.	
cision of Tribunal		Reference number	
Immary of conditions of lice Iditional facilities. Fire Alarm		datory conds, HMO - Fire Mandatory conds, HM0	O -
		ry conds, HMO - Property Chges Mandatory cond	

Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Work



Licence No.

2016/02013/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 2 80 Goldstone Villas Hove BN3 3RU

Ward

Goldsmid

Name & Address of Licen		
Mr Nicholas Monti, Flat 2 80 G	Goldstone Villas Hove East Sussex BN3 3RU	
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 = 3, No of Storeys = 3	
N	T (IN a local Parameter)	
Number of Rooms	Total Number of Rooms 4	
a) Sleeping	b) Living Rooms	
Number of Self Contained F	lats: 0 Number of Non Self Cont. F	Flats: 1
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Licence Details		
Commencement date:	05/10/2016 Duration of licence :	01/11/2020
Maximum number of person	ns or households permitted to occupy HMO under condition	ns of licence:
Households 3	Persons 3	
Information referred to a	residential property tribunal 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.

2016/02042/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Top Floor Flat 88 Goldstone Road Hove BN3 3RH

Ward

Goldsmid

Name & Address of Licence Holo	der	
Mr Alex Squires, PO BOX 2723 Lewes	East Sussex BN8 5TZ	
Name & Address of Person Mana	aging	
,		
Property Description		
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No	o of Units = 1, Occupancy = 3, No of Storeys = 2	
	Total Number of Rooms 4	
a) Sleeping 3	b) Living Rooms 1	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	1
Shared Amenities Numb	per Description	
a) Kitchen 1		
b) Bathrooms/Showers 1		
c) W.C.s 1		
Lianna Dataila		
Licence Details		
Commencement date:	27/05/2016 Duration of licence:	01/11/2020
Maximum number of persons or hou	useholds permitted to occupy HMO under conditions of l	icence:
Households 3 Persor	ns 3	
Information referred to a residen	ntial property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
O		
Summary of conditions of licence	Fire Mandatory conds HMO - Furniture Mandatory conds HM	MO -

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



Licence No.

2016/02067/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 3 46 Tisbury Road Hove BN3 3BB

Ward

Central Hove

Name & Address of Licen	ce Holder		
Mr Bostan Khan, The Cottage	8 Bartholomews Brighton	East Sussex BN1 1HG	
Name & Address of Perso	n Managing		
KEENGATE LTD, The Cottage	e 8 Bartholomews Brighto	n East Sussex BN1 1HG	
Property Description			
Short description of license	d HMO (No of storeys, et	c)	
Property Type = SHARED HO	USE, No of Units = 1, Occ	supancy = 4, No of Storeys = 2	
Number of Rooms	Total Number of I	Rooms 5	
a) Sleeping 4	b) Livir	ng Rooms 1	
Number of Self Contained Fl	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		
0) 11.0.0			
Licence Details			
Commencement date:	23/06/2016	Duration of licence:	01/11/2020
Maximum number of person	s or households permitt	ed to occupy HMO under conditions	of licence:
	-	.,	
Households 4	Persons 4		
Information referred to a	residential property tr	ibunal or Lands Tribunal:	
None	residential property th	ibunal of Lanus-Inbunal.	
Decision of Tribunal		Reference number	
		Note: ende indiliber	
Summary of conditions of lie) - Fire Mandatory conds, HMO - Furnit	ture
		Property Chges Mandatory conds, HM	

Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire works



Licence No.

2016/02100/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 2 39A Duke Street Brighton BN1 1AG

Ward

Regency

		Walu	rege	ПОУ
Name & Address of Licen	ce Holder			
Eastlight Investments Limited,		8-59 Boundary Road H	Hove East Sussex BN3 5T	D
Name & Address of Perso	n Managing			
Brices Limited, Brices Limited	Top Floor 18 Chesh	nam Road Brighton Bl	N2 1NB	
Duran antin Dananintian				
Property Description Short description of licensed	LHMO (No of store)	vs. otc)		
Property Type = SHARED HOU	•	•	of Storovs = 3	
Floperty Type - SHARED HOU	JSE, NO OI OIIIIS – I	, Occupancy – 3, No o	ol Stoleys – 3	
Number of Rooms	Total Numbe	er of Rooms 4		
a) Sleeping 3	b)) Living Rooms	1	
Number of Self Contained Fla	ats:	0 Number o	of Non Self Cont. Flats:	1
Shared Amenities		escription		
a) Kitchen b) Bathrooms/Showers	1			
c) W.C.s	1			
,				
Licence Details				
Commencement date:	02/08/2016	Duratio	on of licence:	01/11/2020
Maximum number of persons	o ar hausahalda na	rmitted to accurat UN	10 under conditions of	liconoci
Maximum number of persons	or nousenous pe	milited to occupy His	no under conditions of	icence.
Households 3	Persons 3			
Information referred to a r	esidential proper	ty tribunal or Land	s Tribunal:	
None				
Decision of Tribunal		F	Reference number	
Summary of conditions of lic Electrical Works, Fire Alarms, I Mandatory conds, HMO - Gas	HMO - Elec Mandato		•	

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



Licence No.

2016/02102/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Maisonette 44 Norfolk Square Brighton BN1 2PE

Ward

Regency

N 0 A I I CI :			
Name & Address of Licen			
Oast House Holdings Ltd, Gold	dstone Business Centre 2	2 Goldstone Street Hove East Sussex	BN3 3RJ
Name & Address of Perso	on Managing		
Mr Danny Allen, Goldstone Bu	siness Centre 2 Goldstor	ne Street Hove East Sussex BN3 3RJ	
Property Description			
Short description of licensed	d HMO (No of storeys, e	etc)	
Property Type = SHARED HO	USE No of Units = 1 Oc	cupancy = 4, No of Storeys = 2	
Troporty Type Office Control	00L, 110 01 011110 1, 00	noupulley 1, 140 of elergy 2	
Number of Rooms	Total Number of	Rooms 5	
a) Sleeping	b) Liv	ing Rooms	
	-,	3	
Nous bound Only On the board of the	-4	Number of New Oals Coast 5	lata: 4
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. F	lats: 1
Shared Amenities		iption	
a) Kitchen	0		
b) Bathrooms/Showers c) W.C.s			
c) w.c.s			
Licence Details			
Commencement date:	01/03/2017	Duration of licence:	01/11/2020
		J	
Maximum number of person	s or households permit	ted to occupy HMO under condition	s of licence:
Households 4	Persons 4]	
Trouboriorab	1 0100110		
Information referred to a	residential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
		Reference number	
Summary of conditions of lie HMO - Flec Mandatory conds		O - Fire Doors 1, HMO - Fire Mandato	rv conds. HMO

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



Licence No.

2016/02105/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

56 Argyle Road Brighton BN1 4QB

Ward

Preston Park

Name & Address of Lice	ice Holder	
Ms Sally Fraser, 16 St Heliers	Avenue Hove East Sussex BN3 5RE	
Name & Address of Pers	on Managing	
Cambridge Brand Vaughan T	as Brand Vaughan Ltd, 110 St Georges Road B	righton East Sussex BN2 1EA
Property Description		
Short description of license	d HMO (No of storeys, etc)	
Property Type = SHARED HO	OUSE, No of Units = 1, Occupancy = 4, No of Sto	reys = 3
Number of Rooms	Total Number of Rooms 5	
a) Sleeping 4	b) Living Rooms 1	
Number of Self Contained F	lats: 0 Number of No	on Self Cont. Flats: 1
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Deteile		
Licence Details		
Commencement date:	20/06/2016 Duration of	licence: 01/11/2020
Maximum number of perso	ns or households permitted to occupy HMO u	nder conditions of licence:
Households 4	Persons 4	
Information referred to a	residential property tribunal or Lands Tr	ibunal:
None		
Decision of Tribunal	Refer	ence number
Summary of conditions of I	cence	
	ns, HMO - Elec Mandatory conds, HMO - Fire M	andatory 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, Loft Insulation, Management / Repairs, Other Fire Work, Ventilation



Licence No.

2016/02161/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

29 Beaconsfield Road Brighton BN1 4QH

Ward

Preston Park

Name & Address of Licer	oce Holder	
	Road Hove East Sussex BN3 5DL	
ivii raja riassairi, so r ortaria	Troud Trove East Gassex Bive SBE	
Name & Address of Person	on Managing	
,		
Property Description		
Short description of license	d HMO (No of storeys, etc)	
-	OUSE, No of Units = 1, Occupancy = 4, No of Storeys = 2	
	,,	
Number of Rooms	Total Number of Rooms 5	
a) Sleeping 4	b) Living Rooms	
Number of Self Contained F	lats: 0 Number of Non Self Cont. Flats:	0
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	1	
c) W.C.s	1	
L'access Defails		
Licence Details		
Commencement date:	13/10/2016 Duration of licence:	01/11/2020
Maximum number of persor	s or households permitted to occupy HMO under conditions of li	cence:
Households 4	Persons 4	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of li	conco	
-	cence atory conds. HMO - Fire Mandatory conds. HMO - Furniture Mandatory	v conds.

Fire Alarm, 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 - Licensing Kitchen 6, HMO - Licensing Loft Insulation, 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.

2016/02164/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

12A Goldstone Street	
Hove	
BN3 3RL	

Ward

Goldsmid

Name & Address of Licence Holder	
Thomdoor Investments Ltd, 65 Livingstone Road Hove East Sussex BN3 3WN	
Name & Address of Person Managing	
Brand Vaughan Ltd, 110 St Georges Road Brighton BN2 1EA	
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 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	
00/00/0040	04/44/0000
Commencement date: 20/06/2016 Duration of licence:	01/11/2020
Maximum number of persons or households permitted to occupy HMO under conditions o	f licence:
was to the first section of the sect	
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	

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 work, Ventilation



Licence No.

2016/02167/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 1 34 Waterloo Street Hove BN3 1AN

Ward

Brunswick And Adelaide

Name & Address of Licen	ce Holder
Park Avenue Estates Ltd, 99 V	Vestern Road Hove East Sussex BN3 1FA
Name & Address of Perso	n Managing
Coastal Management Ltd, 99 V	Western Road Hove East Sussex BN3 1FA
Property Description	
Short description of license	d HMO (No of storeys, etc)
Property Type = SHARED HO	USE, No of Units = 1, Occupancy = 3, No of Storeys = 2
Number of Rooms	Total Number of Rooms 4
a) Sleeping 3	b) Living Rooms 1
Number of Self Contained F	ats: 0 Number of Non Self Cont. Flats: 1
Chanad Amanitias	Number
Shared Amenities a) Kitchen	Number Description
b) Bathrooms/Showers	1
c) W.C.s	1
Licence Details	
Commencement date:	30/09/2016 Duration of licence: 01/11/2020
Commoncomont date.	20/00/2010
Maximum number of person	s or households permitted to occupy HMO under conditions of licence:
Households 3	Persons 3
Information referred to a	residential property tribunal or Lands Tribunal:
None	
Decision of Tribunal	Reference number
Summary of conditions of lie	cence
Fire EI / GI / Cupboards 1, HM	O - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Doors 1, HMO -
Fire Doors 3, HMO - Fire Door	s 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.

2016/02385/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 2 21 Upper Market Street Hove BN3 1AS

Ward

Brunswick And Adelaide

Name & Address of Licer	ice Holder		
Coastal Management Ltd, 99	Western Road Hove	East Sussex BN3 1FA	
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license		•	
Property Type = SHARED HC	USE, No of Units = 1	, Occupancy = 3, No of Storeys =	: 4
Number of Rooms	Total Numbe	er of Rooms 4	
a) Sleeping 3	b	Living Rooms 1	
a) oloopiilg	~	, Living Rooms	
Number of Self Contained F	lats:	Number of Non Self	f Cont. Flats:
. Tambor or our contained .		Trainibol of Itoli ooi	
Shared Amenities	Number D	escription	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
Commencement date:	30/09/2016	Duration of licent	ce: 01/11/2020
Maximum number of nerson	e or households ne	rmitted to occupy HMO under o	conditions of licence
			onditions of hoofies.
Households 3	Persons 3		
l. (to talk and and and Talk and	1.
	residential proper	ty tribunal or Lands Tribuna	II:
None		Deference	numbor
Decision of Tribunal		Reference i	
Summary of conditions of li		conds, HMO - Fire Alarm Systems	s 3 HMO - Fire Blanket

Fire EI / GI / Cupboards 1, HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 3, HMO - Fire Blanket, HMO - Fire Doors 1, HMO - Fire Doors 3, HMO - Fire Doors 5, HMO - Fire Doors 7, HMO - Fire Emergency Lighting 1, 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



Licence No.

2016/02424/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 3 48A Church Road Hove BN3 2FN

Ward

Central Hove

Name & Address of Licence Hold	ler	
Coastal Management Ltd, 99 Western F	Road Hove East Sussex BN3 1FA	
Name & Address of Person Mana	ging	
Property Description		
Short description of licensed HMO (N	No of storeys, etc)	
	of Units = 1, Occupancy = 3, No of Storeys = 3	
Number of Rooms To	otal Number of Rooms 4	
a) Sleeping 3	b) Living Rooms 1	
		Г
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	1
N I A	Post total	
Shared Amenities Number 1	er Description	
b) Bathrooms/Showers 1		
c) W.C.s		
inner Detaile		
Licence Details		
Commencement date:	30/09/2016 Duration of licence:	01/11/2020
Maximum number of persons or hou	seholds permitted to occupy HMO under conditions of I	icence:
Households 3 Person	s 3	
nformation referred to a resident	tial property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence	Fire Alarm Systems 3. HMO - Fire Blanket HMO - Fire Doors	: 1 HMO

HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 3, HMO - Fire Blanket, HMO - Fire Doors 1, HMO - Fire Doors 3, HMO - Fire Doors 5, HMO - Fire Doors 7, HMO - Fire Emergency Lighting 1, 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



Licence No.

2016/02425/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 2
West Street Mansions
76 West Street
Brighton
RN1 2RA

Ward

rd Regency

Name & Address of Licence Holder
Goodman Property Investments (Hove) Ltd, 178/180 Church Road Hove BN3 2DJ.
Name & Address of Person Managing
Brand Vaughan, 117-118 Western Road Hove East Sussex BN3 1DB
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 3, No of Storeys = 2
Number of Rooms Total Number of Rooms 4
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 1
Licence Details
Commencement date: 25/08/2016 Duration of licence: 01/11/2020
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Households 3 Persons 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 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, Other Fire Work



Licence No.

2016/02427/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 1
West Street Mansions
76 West Street
Brighton
RN1 2RA

Ward

d Regency

Name & Address of Licen			
Goodman Property Investmen	ts (Hove) Ltd, 178/180 Cl	hurch Road Hove BN3 2DJ	
Name & Address of Perso	on Managing		
Brand Vaughan, 117-118 Wes	stern Road Hove East Sus	ssex BN3 1DB	
Property Description			
Short description of license	d HMO (No of storeys, e	etc)	
Property Type = SHARED HO	USE, No of Units = 3, Oc	ccupancy = 3, No of Storeys = 4	
Number of Rooms	Total Number of	Rooms 5	
a) Sleeping 3	b) Livi	ing Rooms 1	
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number Descr	ription	
a) Kitchen	3		
b) Bathrooms/Showers	3		
c) W.C.s	3		
Licence Details			
Licence Details			
Commencement date:	25/08/2016	Duration of licence:	01/11/2020
Maximum number of person	s or households permit	tted to occupy HMO under conditions of I	icence:
Households 3	Persons 3		
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 - 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, Structural Fire Works



Licence No.

2016/02428/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 3
West Street Mansions
76 West Street
Brighton
RN1 2RA

Ward

rd Regency

Name & Address of Licence Holder
Goodman Property Investments (Hove) Ltd, 178/180 Church Road Hove BN3 2DJ
Name & Address of Person Managing
Brand Vaughan, 117-118 Western Road Hove East Sussex BN3 1DB
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 3, No of Storeys = 2
Number of Rooms Total Number of Rooms 4
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: 25/08/2016 Duration of licence: 01/11/2020
23/06/2010 Duration of incence.
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
Households 3 Persons 3
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

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory 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 Work



Licence No.

2016/02452/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

18 Spring Street	
Brighton	
BN1 3EF	

Ward

Regency

Name & Address of Licen	ace Holder			
	Cagefoot Lane Henfield West Sussex BN5 9HD			
The recent desices, energyment	ougulout Land Homicia West Gassex Bive 6115			
Name & Address of Perso	on Managing			
Property Plus Lettings Ltd, 10	The Drive Hove BN3 3JA			
Property Description				
Short description of license	d HMO (No of storeys, etc)			
Property Type = SHARED HO	USE, No of Units = 1, Occupancy = 4, No of Storeys = 3			
Name to a f Danier	Total Number of Bases 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		
	No. 1 and a second seco			
Shared Amenities a) Kitchen	Number Description			
b) Bathrooms/Showers	1			
c) W.C.s 2				
Licence Details				
Commencement date:	18/10/2016 Duration of licence:	01/11/2020		
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
Households 4	Persons 4			
Information referred to a	residential property tribunal or Lands Tribunal:			
None	residential property tribunal of Lands Tribunal.			
Decision of Tribunal	Reference number			
	cence Mandatory conds, HMO - Fire Alarm Systems 3, HMO - Fire Genera Fire Notices 1, HMO - Furniture Mandatory conds, HMO - Gas Man			

Electrical Works, HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 3, HMO - Fire General 1, 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 - 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.

2016/02528/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO) 22A Goldstone Villas Hove BN3 3RQ

Ward

Goldsmid

Name & Address of Licence Holo	der			
Coastal Management Ltd, 99 Western	Road Hove East Sussex BN3 1FA			
Name & Address of Person Mana	aging			
,				
Property Description				
Short description of licensed HMO (No of storeys, etc)			
Property Type = SHARED HOUSE, No	o of Units = 1, Occupancy = 3, No of Storeys = 2			
Number of Rooms T	Total Number of Rooms 3			
a) Sleeping 3	b) Living Rooms 1			
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	1		
Shared Amenities Numb	per Description			
a) Kitchen 1				
b) Bathrooms/Showers 1				
c) W.C.s				
Licence Details				
	20/00/0040	04/44/0000		
Commencement date:	30/09/2016 Duration of licence:	01/11/2020		
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
-				
Households 3 Person	ns 3			
Information referred to a residen	tial property tribunal or Lands Tribunal:			
	itial property tribunal of Lanus Tribunal.			
None	Deference number			
Decision of Tribunal	Reference number			
Doors 5, HMO - Fire Doors 7, HMO - F Furniture Mandatory conds, HMO - Ga	Fire Blanket, HMO - Fire Doors 1, HMO - Fire Doors 3, HMO irre Emergency Lighting 1, HMO - Fire Mandatory conds, HM s Mandatory conds, HMO - Property Chges Mandatory conds	0 -		

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



Licence No.

2016/02535/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

183 Osborne Road	
Brighton	
BN1 6LT	

Ward

Preston Park

Name & Address of Licence	Holder	
	venue Seaford East Sussex BN25 1AZ	
Name & Address of Person I	Managing	
Mr David Burt, 18 Manifold Road	Eastbourne BN22 8EH	
Property Description		
Short description of licensed H		
Property Type = SHARED HOUSI	E, No of Units = 1, Occupancy = 5, No of Storeys = 2	
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	ts: 1
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Description 1 1 1	
Licence Details		
Commencement date:	27/07/2016 Duration of licence:	01/11/2020
Maximum number of persons o	r households permitted to occupy HMO under conditions	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 Additional Facilities, HMO - Flec M	ce Mandatory conds. HMO - Fire Mandatory conds. HMO - Furnit	ure

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.

2016/02635/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

20 Manor Road Brighton BN2 5EE

		Ward	East Bri	ghton	
Name & Address of Licen	ice Holder				
Mr James Stephen Wallace-Jo		urtments London Road	Brighton East Sussex B	N1 6YL	
	,		J		
Name & Address of Perso	on Managing				
MTM Property Services Ltd, U	rsa Court 108A Lewe	s Road Brighton BN2	4AE		
Property Description					
Short description of licensed	d HMO (No of storeys	s etc)			
Property Type = SHARED HO	-	-	Storevs = 2		
Troporty Type – Ormitalb Tro		- 4, NO OF	Otorcys – Z		
Number of Rooms	Total Number	of Rooms 5			
a) Sleeping 4	b) I	Living Rooms 1			
Number of Self Contained Fi	lats: 0	Number of	Non Self Cont. Flats:	1	
Shared Amenities	Number Des	scription			
a) Kitchen	1	scription			
b) Bathrooms/Showers	2				
c) W.C.s	2				
Licence Details					
License Betails		_			
Commencement date:	02/11/2016	Duration	of licence:	01/11/2020	
Maximum number of person	s or households per	mitted to occupy HMC	under conditions of I	icence:	
Households 4	Persons 4				
nousellolus 4	Persons 4				
Information referred to a	residential propert	y tribunal or Lands	Tribunal:		
None					
Decision of Tribunal		Re	ference number		
Summary of conditions of lie HMO - Flec Mandatory conds.		v conds. HMO - Furniti	ure 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.

2016/02657/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO) Ground To Second Floors 7 Blatchington Road Hove BN3 3YP

Ward

Central Hove

Name & Address of Licence Holder				
Mr Giles Hazelgrove, 1 Hope Wharf St Mary Church Street London SE16 4JX				
Nove O Address of Decree Managers				
Name & Address of Person Managing				
Property Moves, C/o Jill Brewster 109 Church Road Hove East Sussex BN3 2AF				
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 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: 17/07/2017 Duration of licence: 01/11/2020				
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
Households 4 Persons 4				
nousellolus 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 - Elec Mandatory conds, HMO - Fire Alarm Systems 3, HMO - Fire Blanket, HMO - Fire Doors 1, HMO - Fire Doors 3, HMO - Fire Doors 5, HMO - Fire Doors 7, 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



Licence No.

2016/02698/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO) Second And Third Floors Flat 31 Tisbury Road Hove BN3 3BJ

Ward

Central Hove

Name & Address of Licence h	lolder	
Dr J P Donnelly, 6 Medina Terrace		
Di di Doinichy, o McCana Terrace	TIOVE BIND ZVVL	
Name & Address of Person M	anaging	
,		
Property Description		
Short description of licensed HN	O (No of storeys, etc)	
Property Type = SHARED HOUSE	, No of Units = 1, Occupancy = 3, No of Stor	eys = 5
Number of Rooms	Total Number of Rooms 4	
a) Sleeping 3	b) Living Rooms 1	
Number of Self Contained Flats:	0 Number of No	n Self Cont. Flats: 0
Shared Amenities No	mber Description	
a) Kitchen	1	
b) Bathrooms/Showers	1	
c) W.C.s		
Licence Details		
_		
Commencement date:	05/10/2016 Duration of	licence: 01/11/2020
Maximum number of persons or	households permitted to occupy HMO un	der conditions of licence:
Households 3 Per	sons 3	
Information referred to a resid	dential property tribunal or Lands Tril	ounal:
None	rential property tribunal of Lanas Thi	pariai.
Decision of Tribunal	Refer	ence number
Summary of conditions of licence	e	

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.

2016/02769/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

First Floor Rooms
18 Old Shoreham Road
Brighton
BN1 5DD

Ward

Preston Park

Name & Address of Licence Holder					
Mr Ian Bunday, 15-17 Middle S	Street Brighton East	Sussex BN	1 1AL		
Name & Address of Perso	n Managing				
Dan Lyons, 74 Lewes Road Br	ighton East Sussex	BN2 3HZ			
Property Description					
Short description of licensed	I HMO (No of store	ys, etc)			
Property Type = SHARED HOU	JSE, No of Units = '	1, Occupan	cy = 3, No of Storeys = 2		
Number of Rooms	Total Number	er of Room	s 4		
a) Sleeping 3	b) Living Roo	oms 1		
Number of Self Contained Fla	ats:	0	Number of Non Self Cont. Flats:	1	
Shared Amenities	Number D	escription			
a) Kitchen	1				
b) Bathrooms/Showers	1				
c) W.C.s	1				
Licence Details					
Commencement date:	18/07/2016		Duration of licence:	01/11/2020	
Maximum number of persons	or households no	rmitted to	accurate MAC under conditions of t	ioonoo	
Maximum number of persons or households permitted to occupy HMO under conditions of licence:					
Households 3	Persons 3				
Information referred to a r	esidential prope	rty tribuna	al or Lands Tribunal:		
None					
Decision of Tribunal			Reference number		
Summary of conditions of lic HMO - Elec Mandatory conds,		, 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 - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



Licence No.

2016/02770/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

2B Clarendon Road Hove BN3 3WS

Ward

Goldsmid

Name & Address of Licen	ce Holder		
Mr Ian Bunday, 15-17 Middle S	Street Brighton East Susse	x BN1 1AL	
Name & Address of Perso	n Managing		
Mr Dan Lyons, T/a Brighton Ac	commodation Agency 74 L	Lewes Road Brighton East Sussex Bl	N2 3HZ
Property Description			
Short description of licensed	HMO (No of storevs, etc	<u>.</u>	
Property Type = SHARED HO			
Normalian of Danier	Tatal North an of D		
Number of Rooms	Total Number of R		
a) Sleeping 5	b) Living	g Rooms 1	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Fl	ats: 1
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Descrip 1 1 1 1	tion	
Licence Details			
Commencement date:	18/07/2016	Duration of licence:	01/11/2020
Maximum number of person	s or households permitte	d to occupy HMO under condition	s of licence:
Households 5	Persons 5		
Information referred to a r	esidential property tril	ounal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic Fire Alarm, HMO - Elec Manda		andatory conds, HMO - Furniture Mar	idatory 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.

2016/02777/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

27 Manor Gardens Brighton BN2 5EB

Ward

East Brighton

Name & Address of Licenc	e Holder		
Mr Andrew Najman, 18 Devas F			
Name & Address of Persor	Managing		
,			
Duamanti / Daganintian			
Property Description Short description of licensed	HMO (No of storous, at	c)	
Property Type = SHARED HOU	-		
Property Type = SHARED HOU	SE, NO OI UTIILS = 1, OCC	suparity = 4, No or Storeys = 2	
Number of Rooms	Total Number of I	Rooms 5	
a) Sleeping	b) Livir	g Rooms	
Number of Self Contained Flat	ts : 0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Descri	ption	
Licence Details			
Commencement date:	30/08/2016	Duration of licence:	01/11/2020
Maximum number of persons	or households permitt	ed to occupy HMO under conditions	of licence:
Households 4	Persons 4		
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, Other Fire Work



Licence No.

2016/02801/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

35 Great College Street Brighton BN2 1HJ

Ward

East Brighton

Name & Address of Licenc	e Holder	
Mr Tom Ghibaldan, 59 Braemor	e Road Hove East Sussex BN3 4HA	
Name & Address of Persor		
Brand Vaughan Ltd, 110 St Geo	rges Road Brighton BN2 1EA	
Property Description		
Short description of licensed	HMO (No of storeys, etc)	
·	SE, No of Units = 1, Occupancy = 4, No of Storeys = 2	
Number of Rooms	Total Number of Rooms 5	
a) Sleeping 4	b) Living Rooms 1	
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 Description 1 1 1 1	
Licence Details		
Commencement date:	27/07/2016 Duration of licence:	01/11/2020
Maximum number of persons	or households permitted to occupy HMO under conditions of lie	cence:
Households 4	Persons 4	
Information referred to a re	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of lice Additional facilities, HMO - Elec	ence Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture M	andatory

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, Loft Insulation, Other Fire works



Licence No.

2016/02824/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

8 Henfield Close Brighton BN2 5GN

Ward

East Brighton

Name & Address of Licence Ho	older		
Mr Andrew Najman, 18 Devas Road	London SW20 8PD		
Name & Address of Person Ma	naging		
Mr Lucasz Grzybek, T/A Rent Wizar	rds Flat 505 Windward Co	urt, 5 Gallions Road, London, E1	16 2FD
Property Description			
Short description of licensed HMC	O (No of storeys, etc)		
Property Type = SHARED HOUSE, I	No of Units = 1, Occupand	cy = 4, No of Storeys = 2	
Number of Rooms	Total Number of Room	s 5	
a) Sleeping	b) Living Roo	oms	
Number of Self Contained Flats:	0	Number of Non Self Cont. Flats	s: 0
	mber Description		
a) Kitchen			
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
Commencement date:	28/09/2016	Duration of licence:	01/11/2020
Maximum number of persons or h	ouseholds permitted to	occupy HMO under conditions of	of licence:
Households 4 Pers	sons 4		
Information referred to a reside	ential property tribuna	al 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, Other Fire Work



Licence No.

2016/02864/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 4
West Court
230 Portland Road
Hove
BN3 50T

Ward

Westbourne

Name & Address of Licer	ice Holder		
Ms Susan Mulvoy, 23 Whitelo	t Way Southwick West S	ussex BN42 4YF	
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, O	ccupancy = 3, No of Storeys = 3	
Number of Rooms	Total Number of	f Rooms 4	
a) Sleeping 3	b) Liv	ving Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flat	s: 1
Shared Amenities	Number Desc	ription	
a) Kitchen	1		
o) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
Licence Details			
Commencement date:	06/01/2017	Duration of licence:	01/11/2020
Maximum number of person	s or households permi	itted to occupy HMO under conditions	of licence:
Households 3	Persons 3		
nformation referred to a	residential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	, HMO - Fire Mandatory	conds, 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 - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



Tenant Agrmnt Mandatory conds

Licence No.

2016/02905/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 3 33 Tisbury Road Hove BN3 3BJ

Ward

Central Hove

Name & Address of Licence	Holder		
Miss Dilini Obeysekera, Rodney	House Chalford Hill Stroud	Gloucestershire GL68EF	
Name & Address of Person	Managing		
Jason Dean Estate Agency, 108	Dyke Road Brighton East S	ussex BN1 3TE BN3 1RD	
December 1			
Property Description	IMO (No. of otomore, etc.)		
Short description of licensed H			
Property Type = SHARED HOUS	E, No of Units = 1, Occupai	ncy = 4, No of Storeys = 2	
Number of Rooms	Total Number of Rooi	ns 4	
a) Sleeping 3	b) Living Ro	ooms 1	
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Flat	s: 1
		_	
Shared Amenities	Number Description	1	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
	24427242		
Commencement date:	01/12/2016	Duration of licence:	01/11/2020
Maximum number of persons of	or households permitted to	o occupy HMO under conditions	of licence:
Households 4 P	ersons 4		
Tiousenoius 4	6130113		
Information referred to a res	sidential property tribur	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licer	ıce		
		HMO - Fire Doors 1, HMO - Fire Do	
		ighting 1, HMO - Fire General 1, Hl Gas Mandatory conds, HMO - Pro	
Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO -			



Licence No.

2016/02953/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

6 Crown Street Brighton BN1 3EH

Ward

		vvaru	Regen	Су
Name & Address of Licence	Holder			
Hastings Property Company LLP,	20 Havelock Road Hastings	East Sussex TN34	-1BP	
Name & Address of Person	Managing			
Belvoir Lettings PLC, The Old Co	urthouse 60A London Road G	Grantham Lincolnsh	nire NG31 6HR	
Property Description	MO (No. of all and a set a)			
Short description of licensed H	-			
Property Type = SHARED HOUS	E, No of Units = 3, Occupancy	y = 3, No of Storey	s = 2	
Number of Rooms	Total Number of Rooms	s 3		
a) Sleeping 3	b) Living Roo	ms 1		
Number of Self Contained Flats	: 0	Number of Non S	Self Cont. Flats:	1
			_	
Shared Amenities	Number Description			
a) Kitchen	1			
b) Bathrooms/Showers	2			
c) W.C.s	2			
Licence Details				
Common compant data:	00/00/2046	Dunatian of lia		04/44/2020
Commencement date:	08/09/2016	Duration of lic	ence:	01/11/2020
Maximum number of persons o	r households permitted to d	occupy HMO unde	er conditions of lic	cence:
Households 3 P	ersons 3			
Information referred to a res	idential property tribuna	l or Lands Tribu	ınal:	
None				
Decision of Tribunal		Referen	ce number	
Summary of conditions of licen Electrical Works, Fire Alarms, HM Mandatory conds, HMO - Propert RubbishRecyc Mandatory conds, Repairs, Ventilation	IO - Elec Mandatory conds, H y Chges Mandatory conds, Hl	MO - Property Mai	nt Mandatory conds	s, HMO -



Licence No.

2016/03007/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 1 12A Marine Square Brighton BN2 1DL

Ward

East Brighton

Name & Address of Licen	ice Holder		
Mr Pericles Rospigliosi, 3 Wea	avers Cottages Weaver	rs Lane Henfield BN5 9ET	
Name & Address of Perso	on Managing		
Home James Lets, 134-140 C	hurch Rd Hove Bn3 2D	L	
Property Description			
Short description of license	d HMO (No of storeys,	, etc)	
Property Type = SHARED HO	OUSE, No of Units = 1, (Occupancy = 4, No of Storeys = 2	
Number of Rooms	Total Number	of Rooms 5	
a) Sleeping 4	b) L	iving Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities		cription	
a) Kitchenb) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commonount data:	40/05/0047	Duration of linears	04/44/2020
Commencement date:	16/05/2017	Duration of licence:	01/11/2020
Maximum number of person	ıs or households perm	nitted to occupy HMO under conditions of	licence:
Households 4	Persons 4		
Tiousciloius	1 0130113		
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		MO - 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 - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



Licence No.

2016/03059/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 4 8 Chesham Place Brighton BN2 1FB

Ward

East Brighton

Name & Address of Licence	e Holder		
Mr Alan Goss, 16 Village Lane	Mumbles Gorllewin Mor	gannwg SA3 4EB	
Name & Address of Persor	n Managing		
Sure Property Solutions, 31 Up	oer St James Street Brig	ghton East Sussex BN2 1JN	
Property Description			
Short description of licensed	HMO (No of storeys, e	etc)	
Property Type = SHARED HOL	SE, No of Units = 1, Oc	ccupancy = 3, No of Storeys = 2	
Number of Rooms	Total Number of	Rooms 4	
a) Sleeping 3	b) Livi	ing Rooms 1	
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Fla	ats: 1
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Descr 1 2 2	ription	
Licence Details			
Commencement date:	01/09/2016	Duration of licence:	01/11/2020
Commencement date:	01/09/2016	Duration of licence.	01/11/2020
Maximum number of persons	or households permit	tted to occupy HMO under conditions	s of licence:
Households 3	Persons 3		
Information referred to a re	esidential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice		conds. 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, Other Fire work, Ventilation



Licence No.

2016/03130/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 6 185B Church Road Hove BN3 2AB

Ward

Central Hove

Name & Address of Licen	ce Holder		
Mr John Marinko, 16 Pembroke	e Avenue Hove East Sussex BN3 5DA		
Name & Address of Perso	n Managing		
ı			
Duamanti: Dagarintian			
Property Description	LHMO (No of storous etc)		
Short description of licensed		0	
Property Type = Not Assigned,	No of Units = 1, Occupancy = 3, No of Storeys	= 0	
Number of Rooms	Total Number of Rooms 4		
a) Sleeping 3	b) Living Rooms		
Number of Self Contained Fla	ats: 0 Number of No	n Self Cont. Flats:	1
Shared Amenities	Number Description		
a) Kitchen	1		
b) Bathrooms/Showers c) W.C.s	1		
Licence Details			
Camanananan data:	14/02/2017 Duration of	liaanaa.	04/44/2020
Commencement date:	14/02/2017 Duration of	licence:	01/11/2020
Maximum number of persons	s or households permitted to occupy HMO ur	nder conditions of li	cence:
Households 3	Persons 3		
nformation referred to a r	esidential property tribunal or Lands Tri	bunal:	
None			
Decision of Tribunal	Refere	ence number	
Summary of conditions of lic	ence	Mandatan, aand- 118	40. 000

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory 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.

2016/03142/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Upper Maisonette 154 Springfield Road Brighton BN1 6DG

Ward

Preston Park

Name & Address of Licence			
Mr And Mrs Darren Ellis, Tithe	Barn Courts Mount F	Road Haslemere Surrey GU27 2PP	
Name & Address of Perso	n Managing		
G4 Lets, 2 Hythe Road Brighton	n BN1 2JS		
Property Description			
Short description of licensed	,	•	
Property Type = SHARED HOL	JSE, No of Units = 1	, Occupancy = 5, No of Storeys = 2	
Number of Rooms	Total Numbe	er of Rooms 6	
a) Sleeping 5	b)) Living Rooms	
Number of Self Contained Fla	ats:	0 Number of Non Self Cont. Fl	ats: 0
Shared Amenities	Number De	escription	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
0	40/00/0040	Donation of linear	04/44/0000
Commencement date:	16/08/2016	Duration of licence:	01/11/2020
Maximum number of persons	or households pe	rmitted to occupy HMO under conditions	s of licence:
Households 5	Persons 5		
Information referred to a re	esidential proper	ty tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic HMO - Elec Mandatory conds.		HMO - Fire Mandatory conds. HMO - Furn	iture

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.

2016/03148/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

73 Hythe Road Brighton BN1 6JR

		vvard	Preston	Park
Name & Address of Licen	ice Holder			
Mr Mark Shields, Old Conna E	Barn Cuckfield Road C	Goddards Green West Suss	ex BN6 9LQ	
Name & Address of Perso				
G4 Lets, 2 Hythe Road Bright	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 = 4, No of Store	eys = 2	
Number of Rooms	Total Number	r of Rooms 5		
a) Sleeping 4	h)	Living Rooms 1		
	5)	Living Rooms		
Number of Self Contained F	lats:	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				
Commencement date:	16/08/2016	Duration of li	icence:	01/11/2020
Maximum number of person	s or households nor	mitted to occupy HMO up	dor conditions of I	iconco:
maximum number of person	———		uer conditions of h	icerice.
Households 4	Persons 4			
Information referred to a	residential propert	y tribunal or Lands Trib	ounal:	
None				
Decision of Tribunal		Refere	nce number	
Summary of conditions of li		LIMO Fire Mandaton, cond	do LIMO. Furnitura	

HMO - Elec Mandatory conds, HMO - Fire Doors 7, HMO - Fire Mandatory conds, HMO - Furniture Mandatory 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.

2016/03152/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

25 Hythe Road Brighton BN1 6JR

Ward

Preston Park

Name & Address of Licence Holder
Mr Mark Shields, Old Conna Barn Cuckfield Road Goddards Green BN6 9LQ
Name & Address of Person Managing
G4 Lets, 2 Hythe Road Brighton BN1 6JS
Due noutre Description
Property Description Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 2
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 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: 16/08/2016 Duration of licence: 01/11/2020
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

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas 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, Management / Repairs



Licence No.

2016/03266/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 3 9 Blatchington Road Hove BN3 3YP

Ward

Central Hove

Name & Address of Licen	ce Holder		
Ms Charlotte Sommers, 7 Vall	ance Gardens Hove East Su	ssex BN3 2DB	
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 = 3, No of Storeys = 2	
Number of Rooms	Total Number of Ro	oms 4	
a) Sleeping 3	b) Living	Rooms 1	
			T
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ats: 1
Shared Amenities	Number Descripti	on	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	18/10/2016	Duration of licence:	01/11/2020
Maximum number of nersen	o or bougabalda narmittad	to coounty UMO under conditions	a of licenses
maximum number of person	s or nousenoids permitted	to occupy HMO under conditions	s of ficence:
Households 3	Persons 3		
Information referred to a	residential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	cence		
Enlargement of Bedroom, HM	O - Elec Mandatory conds, H	IMO - Fire Mandatory conds, HMO -	
iviandatory conds, HMO - Gas	iviandatory conds, HMO - G	eneral 1, HMO - General 6, HMO - 0	∍enerai /,

Enlargement of Bedroom, 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, Other Fire Works, Structural Fire Works, Ventilation



Licence No.

2016/03323/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

33A Western Road Hove BN3 1AF

Ward

Brunswick And Adelaide

Name & Address of Licenc	e Holder			
Mr Simon Seligman, 73 Hove Pa		ussex BN3 6LL		
Name & Address of Persor	Managing			
Home Leasing Ltd, 64 Queens F	Road Brighton BN1 3XI)		
Property Description				
Short description of licensed	HMO (No of storeys, e	etc)		
Property Type = SHARED HOU	SE, No of Units = 1, Oc	ccupancy = 3, No of Storeys = 3		
Number of Rooms Total Number of Rooms 5				
a) Sleeping 3	b) Liv	ring Rooms 1		
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Flats:	1	
Shared Amenities	Number Desci	ription		
a) Kitchen	1			
b) Bathrooms/Showers	1			
c) W.C.s	1			
Licence Details				
Licence Details				
Commencement date:	06/09/2016	Duration of licence:	01/11/2020	
Maximum number of persons	or households permi	tted to occupy HMO under conditions of l	licence:	
Households 3	Persons 3	7		
Tiouseriolus 5	5	J		
Information referred to a re	sidential property t	ribunal or Lands Tribunal:		
None				
Decision of Tribunal	Reference number			
	orks, HMO - Elec Mand	datory conds, HMO - Fire Mandatory conds,		

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



Licence No.

2016/03327/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

8 Osborne Road Brighton BN1 6LQ

Ward

Preston Park

lame & Address of Licen	ce Holder			
s Louise Hopkins, 12 Maines	s Farm Road Upper E	eeding West Sussex BN443TH		
ame & Address of Perso	on Managing			
operty Description				
ort description of licensed	d HMO (No of store	s, etc)		
operty Type = SHARED HO	USE, No of Units = 1	Occupancy = 3, No of Storeys = 3		
umber of Rooms	Total Numbe	r of Rooms 5		
Sleeping 3	D _.	Living Rooms 1		
umber of Self Contained Fl	ats:	Number of Non Self C	ont. Flats: 1	
nared Amenities		escription		
Kitchen	1			
Bathrooms/Showers W.C.s	2			
VV.O.3				
cence Details				
ommencement date:	01/11/2016	Duration of licence:	01/11/2020	
aximum number of person	s or households pe	rmitted to occupy HMO under cor	nditions of licence:	
-	_			
ouseholds 3	Persons 3			
formation referred to a	rosidontial propor	ty tribunal or Lands Tribunal:		
one	residentiai propei	y tribulial of Lanus Tribulial.		
ecision of Tribunal	Reference number			
CISION OF THIDUNAL		iverence in		
	HMO - Fire Mandato	ry conds, HMO - Furniture 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, Management/Repairs, Structural Fire Works, Ventilation



Licence No.

2016/03339/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

3 Byron Terrace Hove BN3 5AY

Ward

Westbourne

Name & Address of Licen	ice Holder			
Ms Marian Read, 15 Cumberla	and Road Brighton	East Sussex	BN1 6SL	
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, Occupand	cy = 3, No of Storeys = 2	
Number of Rooms	Total Numi	ber of Room	s 4	
a) Sleeping 3		b) Living Roc	oms 1	
		_		
Number of Self Contained F	lats:	0	Number of Non Self Cont. Flats	s: <u> </u>
01 1	N	5		
Shared Amenities a) Kitchen	Number 1	Description		
b) Bathrooms/Showers	1			
c) W.C.s	2			
Licence Details				
Commencement date:	05/02/2018	18	Duration of licence:	01/11/2020
			L	
Maximum number of person	s or households p	permitted to	occupy HMO under conditions of	of licence:
Households 3	Persons	3		
Information referred to a	residential prope	erty tribuna	l or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of lie	cence			
HMO - Elec Mandatory conds,	, HMO - Fire Alarm	•	IMO - Fire Blanket, HMO - Fire Do IO - Fire Mandatory conds, HMO -	

HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 3, HMO - Fire Blanket, HMO - Fire Doors 1, HMO - Fire Doors 3, HMO - Fire Doors 5, 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



Licence No.

2016/03392/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

First And Second Floor Maisonette 55 Denmark Villas Hove RN3 3TD

Ward

Goldsmid

Name & Address of Licer	ice Holder		
Mrs Wai-Fan Clarke, First And	Second Floor Maisonette 55	Denmark Villas Hove East Sussex	BN3 3TD
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, Occup	ancy = 3, No of Storeys = 2	
Name kan af Dansa	Total Noveless of Da		
Number of Rooms	Total Number of Roo		
a) Sleeping 3	b) Living F	Rooms 1	
		_	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	its: 1
Shared Amenities	Number Description	on	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	12/09/2016	Duration of licence:	01/11/2020
Maximum number of person	as or households permitted	to occupy HMO under conditions	of licence
		to occupy rimo under conditions	of ficefice.
Households 3	Persons 3		
Information referred to a	residential property tribu	inal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li			
		s, HMO - Furniture Mandatory cond s, HMO - Property Maint Mandatory	
manuatory conus, rimo - Fro	July Oliges Maliuatory Collus	o, i nivio - i roperty ivianit ivianuatory	COLIGO, LINIO -

RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/Repairs, Other Fire Works



Licence No.

2016/03456/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Basement And Ground Floors 154 Springfield Road Brighton BN1 6DG

Ward

Preston Park

Name & Address of Licence Holder	
Mr And Mrs D Ellis, Tithe Barn Courts Mount Road Haslemere Surrey GU27 2PP	
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 = 2	
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	s: 0
Number of Sen Contained Flats.	s. U
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s Number Description 2 2	
Licence Details	
Licence Details Commencement date: 16/08/2016 Duration of licence:	01/11/2020
Commencement date: 16/08/2016 Duration of licence:	
Commencement date: 16/08/2016 Duration of licence:	
Commencement date: 16/08/2016 Duration of licence: Maximum number of persons or households permitted to occupy HMO under conditions of	
Commencement date: 16/08/2016 Duration of licence: Maximum number of persons or households permitted to occupy HMO under conditions of the second se	
Commencement date: 16/08/2016 Duration of licence: Maximum number of persons or households permitted to occupy HMO under conditions of the second se	

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.

2016/03463/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

First And Second Floor Flat 72 Cromwell Road Hove BN3 3EG

Ward

Goldsmid

Name & Address of Licen	ce Holder	
Ms Jadet Riden Mr Neil Cress	swell, 47 Lisland Drive Kinloch RD1 Taupo 3377 New Zealand	
Name & Address of Perso	n Managing	
Property Moves Ltd, 109 Churc	ch Road Hove East Sussex BN3 2AF	
Property Description		
Short description of licensed	• • • • • • • • • • • • • • • • • • • •	
Property Type = SHARED HO	USE, No of Units = 1, Occupancy = 3, No of Storeys = 2	
Number of Rooms	Total Number of Rooms 3	
a) Sleeping 3	b) Living Rooms 1	
,	, •	
Number of Self Contained Fl	ats: 0 Number of Non Self Cont. Fla	ats: 0
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	1	
c) W.C.s	2	
Licence Details		
License Betails		
Commencement date:	09/08/2017 Duration of licence:	01/11/2020
Maximum number of persons	s or households permitted to occupy HMO under conditions	s of licence:
Households 3	Persons 3	
Information referred to a r	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
- Fire Doors 3, HMO - Fire Doo	cence HMO - Fire Alarm Systems 3, HMO - Fire Blanket, HMO - Fire Dors 4, HMO - Fire Doors 5, HMO - Fire General 1, HMO - Fire Matery conds. HMO - Property Cho	andatory

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



Licence No.

2016/03521/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

9 Rugby Place Brighton BN2 5JB

Ward

East Brighton

Name & Address of Lice			
Mr Neil Serjeant, 3 The Wyo	hwoods Stowmarket Suffolk I	IP14 6TB	
Name & Address of Per	son Managing		
Brand Vaughan Ltd, 110 St	Georges Road Brighton BN2	1EA	
Property Description			
Short description of licens	ed HMO (No of storeys, etc	;)	
Property Type = SHARED H	OUSE, No of Units = 1, Occu	upancy = 3, No of Storeys = 3	
Number of Rooms	Total Number of R	loomo 6	
a) Sleeping 3	b) Living	g 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 Descrip 1 2 2	otion	
Licence Details			
Commencement date:	12/09/2016	Duration of licence:	01/11/2020
Maximum number of person	ons or households permitte	ed to occupy HMO under condition	ns of licence:
	_		
Households 3	Persons 3		
Information referred to	a residential property trib	bunal or Lands Tribunal:	
None	r robidential property this	Janui or Editas Tribuliai.	
Decision of Tribunal		Reference number	
Summary of conditions of		fandatory conds, HMO - Furniture N	

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, Ventilation



Licence No.

2016/03560/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

108 Edburton Avenue Brighton BN1 6EQ

Ward

Preston Park

Name & Address of Licer	ce Holder		
Mr Matthew Peace, 89 Lowthe	er Road Brighton East Sussex I	BN1 6LG	
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, Occupar	ncv = 4. No of Storevs = 3	
	, , , , , , , , , , , , , , , , , , , ,	- , , ,	
Number of Rooms	Total Number of Roor	ms 5	
a) Sleeping 4	b) Living Ro	ooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number Description	1	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
•	00/00/0040	B. order of Process	04/44/0000
Commencement date:	09/09/2016	Duration of licence:	01/11/2020
Maximum number of person	s or households permitted to	o occupy HMO under conditions	of licence:
	_		
Households 4	Persons 4		
Information referred to a	residential property tribun	al or Lands Tribunal:	_
	residential property tribuil	lai or Lanus Tribunai.	
None		Doforance number	
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, Structural Fire Works



Licence No.

2016/03581/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

47 Lower Market Street Hove BN3 1AT

Ward

Brunswick And Adelaide

Nove C Adduses of Live	aa Haldan		
Name & Address of Licer		10 PU40 4UE	
Mr Christopher Smith, 17 Cau	seway Horsham Wes	st Sussex RH12 1HE	
Name & Adduses of Dave	n Managing		
Name & Address of Person	on Managing		
1			
Dranarty Description			
Property Description	d LIMO (No. of otomo	us etc)	
Short description of license	•	• •	
Property Type = SHARED HC	USE, No of Units = 1	1, Occupancy = 4, No of Storeys = 3	
Number of Rooms	Total Numbe	er of Rooms 6	
a) Sleeping 4	h) Living Rooms 1	
a) Glooping	.	, Living 100mb	
Number of Self Contained F	loto	0 Number of Non Self Cont. Flats:	1
Number of Sen Contained F	ats.	Number of Non-Seil Cont. Flats.	I
Shared Amenities	Number D	escription	
a) Kitchen	1	rescription	
b) Bathrooms/Showers	2		
c) W.C.s	3		
Licence Details			
Commencement date:	04/11/2016	Duration of licence:	01/11/2020
Johnnon John Gutte.	0 1/1 1/2010	Duration of hoofies.	01/11/2020
Maximum number of persor	s or households pe	ermitted to occupy HMO under conditions of I	icence:
Households 4	Persons 4		
1	- 3.000		
Information referred to a	residential proper	rty tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	conco		
		ory 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



Licence No.

2016/04043/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

108 Craven Road Brighton BN2 0FG

Ward

East Brighton

Name & Address of Licence	Holder		
Len Maynard, 56 La Freyte Raba		riogo Franco 00400	
Len Maynard, 30 La Freyte Traba	it Les Trois Seigneurs A	nege i fance 09400	
Name & Address of Person	Managing		
MTM Property Services Ltd, 108A	Lewes Road Brighton E	BN2 4AE	
Property Description			
Short description of licensed H	MO (No of storeys, etc.)		
Property Type = SHARED HOUS	E, No of Units = 1, Occu	pancy = 4, No of Storeys = 3	
Number of Rooms	Total Number of Ro	ooms 5	
a) Sleeping 4	b) Living	Rooms 1	
Number of Self Contained Flats	0	Number of Non Self Cont. Flat	ts: 1
Shared Amenities N	Number Descript	ion	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
Licence Betails			
Commencement date:	14/09/2016	Duration of licence:	01/11/2020
Maximum number of persons o	r households permitte	d to occupy HMO under conditions	of licence:
Hamakalda A B			
Households 4 P	ersons 4		
Information referred to a res	idential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	ry conds, HMO - Fire Bla	nket, HMO - Fire Mandatory conds, H Mandatory conds, HMO - Licensing F	

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 - Licensing Bathroom 4, 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.

2016/04081/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

76 Florence Road Brighton BN1 6DJ

Ward

Preston Park

1
11/2020
) :

conds, HMO - Furniture Mandatory 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.

2016/04193/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 53 St Georges Road Brighton BN2 1EF

Ward

East Brighton

Name & Address of Licence Holder		_
Mr Nabil Bashir, 19 Burwash Road Hove Eas	et Succey BN3 9CO	
IVII NADII DASIIII, 19 BUIWASII ROAU HOVE EAS	St Sussex BINS OGQ	
Name & Address of Person Managing		
MTM Property Services Ltd, 108A Lewes Ro		
	aa 2ga 22	
Property Description		
Short description of licensed HMO (No of	storeys, etc)	
Property Type = SHARED HOUSE, No of Ur	nits = 1, Occupancy = 4, No of Storeys = 3	
Number of Rooms Total N	Number of Rooms 5	
a) Sleeping 4	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		
Liochoc Details		
Commencement date: 04/10	/2016 Duration of licence:	01/11/2020
maximum number of persons or nouseno	lds permitted to occupy HMO under conditions of li	icence:
Households 4 Persons	4	
Information referred to a residential p	roperty tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence		
Flectrical works Fire Alarm HMO - Flec Mai	ndatory conds HMO - Fire Blanket HMO - Fire Mandat	tory

Electrical works, Fire Alarm, HMO - Elec Mandatory conds, HMO - Fire Blanket, 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 - Repairs Ventilation 3, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Structural Fire Works



Licence No.

2016/04197/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

BA Pool Valley	
Brighton	
BN1 1NJ	

Ward

Regency

	Wald Regel	Ю
Name & Address of Licence Holder		
Massey Group Ltd, 1 Castle Square Brighton	East Sussex BN1 1EG	
Name & Address of Person Managing		
Rosie Cann, 1 Castle Square Brighton East S	sussex BN1 1EG	
Property Description		
Short description of licensed HMO (No of s	storeys, etc)	
Property Type = SHARED HOUSE, No of Uni	its = 1, Occupancy = 4, No of Storeys = 4	
Number of Booms Total N		
	umber of Rooms 5	
a) Sleeping 4	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: 20/10/2	2016 Duration of licence:	01/11/2020
Maximum number of persons or household	ds permitted to occupy HMO under conditions of li	cence:
Households 4 Persons	4	
Information referred to a residential pr	operty tribunal or Lands Tribunal:	
None Decision of Tribunal	Deference number	
Decision of Tubunal	Reference number	
Summary of conditions of licence Fire Alarm, HMO - Elec Mandatory conds, HM	10 - Fire Blanket, HMO - Fire Mandatory conds, HMO	- Fire

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, Other Fire Works, Other Fire works



Licence No.

2016/04203/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

61 Rugby Road Brighton BN1 6ED

Ward

Preston Park

Name & Address of Licence Holder	
Mr Mark Leclercq, 37 The Downs London SW20 8HG	
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 = 2	
Topolly Type of Miles Tieses, the distinct Ti, escapancy o, the distinct S	
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. Fl	lats: 1
Shared Amenities Number Description	
a) Kitchen 1b) Bathrooms/Showers 2	
c) W.C.s 2	
Licence Details	
Commencement date: 14/07/2017 Duration of licence:	01/11/2020
Maximum number of persons 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	
Decision of Tribunal Reference number	
Summary of conditions of licence Fire FL/GL/ Cupboards 1. HMO - Flec Mandatory conds. HMO - Fire Doors 1. HMO - Fire Ma	andatory conde

HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Bathroom 3, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



Licence No.

2016/04210/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Second Floor Flat 14 Montpelier Street Brighton BN1 3DJ

Ward

Regency

Name & Address of Licen	ce Holder			
Mr Nick Vince, Sutton Court B	arn Barlavington La	ne Pulborou	igh West Sussex RH20 1PN	
Name & Address of Perso	n Managing			
Home Leasing, 72 Western Ro	oad Hove East Suss	ex BN3 2JC		
Property Description				
Short description of license	•	•		
Property Type = SHARED HO	USE, No of Units =	1, Occupano	cy = 4, No of Storeys = 2	
Number of Rooms	Total Numb	er of Room	s 5	
a) Sleeping 4	t) Living Ro	oms 1	
, , ,		, 3		
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	1			
c) W.C.s	1			
Licence Details				
Zioonioo Zotano			_	
Commencement date:	15/09/2016		Duration of licence:	01/11/2020
Maximum number of person	s or households p	ermitted to	occupy HMO under conditions of li	cence:
	5			
Households 4	Persons 4	ł		
Information referred to a	residential prope	rty tribuna	al or Lands Tribunal:	
None				
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, Other Fire Work



Licence No.

2016/04214/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

38 New England Road Brighton BN1 4GG

Ward

Preston Park

Name & Address of Licen	ce Holder		
Mr David Druiff, 20 Powis Squa	are Brighton East S	Sussex BN1 3HG	
Name & Address of Perso	n Managing		
Property Plus Lettings Ltd, 10	The Drive Hove BN	N3 3JA	
Property Description			
Short description of licensed	HMO (No of stor	reys, etc)	
Property Type = SHARED HO	USE, No of Units =	= 1, Occupancy = 3, No of Storeys = 2	
		=	
Number of Rooms	l otal Num	ber of Rooms 4	
a) Sleeping 3		b) Living Rooms 1	
Number of Self Contained FI	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:	09/11/201	6 Duration of licence:	01/11/2020
Maximum number of person	s or households _l	permitted to occupy HMO under conditions of	licence:
Households 3	Persons	3	
nousellolus 3	Persons	3	
Information referred to a I	residential prop	erty tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic	cence		
Electrical Works, Fire Alarms,	HMO - Elec Manda	atory conds, HMO - Fire Mandatory conds, HMO HMO - Property Chges Mandatory conds, HMO	

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, Ventilation



Licence No.

2016/04310/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

20 Brunswick Street East Hove BN3 1AU

Ward

Brunswick And Adelaide

Name & Address of Licen	ce Holder		
Mr Mark Parker, 4 Brunswick	Γerrace Hove East S	ussex BN3 1HN	
Name & Address of Perso	n Managing		
,			
Duamanti Daganintian			
Property Description Short description of license	d HMO (No of store)	ve atc)	
•	•	• •	
Property Type = Not Assigned	, NO 01 Offics = 5, Oct	cupancy = 5, No of Storeys = 2	
Number of Rooms	Total Number	er of Rooms 6	
a) Sleeping 5	þ) Living Rooms 1	
Number of Self Contained F	ats:	0 Number of Non Self Cont. Flats:	0
Shared Amenities	Number De	escription	
a) Kitchenb) Bathrooms/Showers	2		
c) W.C.s	2		
-,			
Licence Details			
Commencement date:	05/02/2018	Duration of licence:	01/11/2020
Commencement date.	03/02/2018	Duration of licence.	01/11/2020
Maximum number of person	s or households pe	rmitted to occupy HMO under conditions of I	icence:
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,		1, HMO - Fire Mandatory conds, HMO - Furnitu	re

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



Licence No.

2016/04610/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 2 122 Kings Road Brighton BN1 2FA

Ward

Regency

Name & Address of Licen	ce Holder		
Mr George Georgiou, 13 Papo		asios Limassol Cyprus 4106	
	,		
Name & Address of Perso	n Managing		
Home Leasing Brighton Ltd, 18	3 Hyde Gardens Eastbou	ırne BN21 4PT	
Property Description			
Short description of licensed	•	,	
Property Type = SHARED HO	USE, No of Units = 1, Oc	ecupancy = 3, No of Storeys = 2	
Number of Rooms	Total Number of	Rooms 4	
a) Sleeping 3	b) Liv	ing Rooms 1	
Number of Self Contained FI	ats: 0	Number of Non Self Cont. Flats	: 1
Shared Amenities	Number Descr	ription	
a) Kitchen	1		
b) Bathrooms/Showers c) W.C.s	1		
,			
Licence Details			
Commencement date:	12/06/2017	Duration of licence:	01/11/2020
Maximum number of person	s or households permi	tted to occupy HMO under conditions o	f licence:
Households 3	Persons 3		
Information referred to a i	residential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	HMO - Fire Alarm Syste	rms 3, HMO - Fire General 1, HMO - Fire Mandatory conds, HMO - Property Chees	

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



Licence No.

2016/04618/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 1 122 Kings Road Brighton BN1 2FA

Ward

Regency

Name & Address of Licence	Holder		
Mr George Georgiou, 13 Papouts		imassol Cyprus 4106	
	,		
Name & Address of Person	Managing		
Home Leasing Brighton Ltd, 18 H	yde Gardens Eastbourne	BN21 4PT	
Property Description			
Short description of licensed H			
Property Type = SHARED HOUS	E, No of Units = 1, Occupan	cy = 3, No of Storeys = 2	
Number of Rooms	Total Number of Roon	ns 5	
a) Sleeping 3	b) Living Ro	oms 1	
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number Description		
a) Kitchen	1		
b) Bathrooms/Showers c) W.C.s	<u> </u>		
Licence Details			
Commencement date:	12/06/2017	Duration of licence:	01/11/2020
Commencement date.	12/00/2017	Duration of licence.	01/11/2020
Maximum number of persons of	or households permitted to	occupy HMO under conditions of	licence:
Households 3 P	ersons 3		
Information referred to a res	idential property tribun	al or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	MO - Fire Alarm Systems 3,	HMO - Fire General 1, HMO - Fire Material Conds, HMO - Property Choes Material Conds	

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



Licence No.

2016/04645/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 5 45 St Aubyns Hove BN3 2TJ

Ward

Central Hove

Novo O Addusos of Liver	an Haldan		
Name & Address of Licen			
Ms Sarah Jones, 5 Blackthorn	Close Portslade East Sussex BN41 2EU		
Nove 9 Address of Dove	· Managina		
Name & Address of Perso	n Managing		
,			
Duanauti Dagavintian			
Property Description	LUMO (No of storous etc.)		
Short description of licensed	•		
Property Type = SHARED HO	USE, No of Units = 4, Occupancy = 4, No of St	oreys = 2	
Number of Rooms	Total Number of Rooms 5		
a) Sleeping 4	b) Living Rooms 1		
a) dicepting	b) Living Rooms		
Normalis and Colf Countries of Fl	Number of N	0-16 04 Flata	4
Number of Self Contained Fl	ats: 0 Number of N	on Self Cont. Flats:	1
Charad Amonitics	Number Description		
Shared Amenities a) Kitchen	Number Description		
b) Bathrooms/Showers	1		
c) W.C.s	4		
Licence Details			
Commencement date:	21/10/2016 Duration o	f licenses	01/11/2020
Commencement date:	21/10/2016 Duration o	i licence:	01/11/2020
Maximum number of person	s or households permitted to occupy HMO ເ	under conditions of li	cence:
Heweshalds 4	Damana 4		
Households 4	Persons 4		
Information referred to a i	esidential property tribunal or Lands Tr	ribunal:	
None			
Decision of Tribunal	Refe	rence number	
Summary of conditions of lic	ence		10.0

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, Other Fire Work



Licence No.

2016/04668/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 3 122 Kings Road Brighton BN1 2FA

Ward

Regency

Name & Address of Licer	nce Holder		
Mr George Georgiou, 13 Pape	outses Street Ayios Athana	asias Lymassol Cyprus 4106	
Name & Address of Pers	on Managing		
Home Leasing Brighton Ltd, 1	8 Hyde Gardens Eastbou	rne BN21 4PT	
Property Description			
Short description of license		•	
Property Type = SHARED HC	OUSE, No of Units = 1, Occ	cupancy = 3, No of Storeys = 2	
Number of Rooms	Total Number of	Rooms 4	
a) Sleeping 3	D) LIVII	ng Rooms 1	
Number of Self Contained F	flats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number Descri	ption	
a) Kitchen b) Bathrooms/Showers	1		
c) W.C.s	1		
,			
Licence Details			
0	40/00/0047	Donation of linear	04/44/0000
Commencement date:	12/06/2017	Duration of licence:	01/11/2020
Maximum number of persor	ns or households permitt	ted to occupy HMO under conditions of I	icence:
Households 3	Persons 3		
nouseriolus	reisons 3		
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		ns 3, HMO - Fire Mandatory conds, HMO -	Furniture

HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 3, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - General 1, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



Licence No.

2016/04717/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Top Floor 13 Belle Vue Gardens Brighton BN2 0AA

Ward

East Brighton

Noma C Address of Lissu	as Holder		
Name & Address of Licen		20544.000	
Ms Sanaz Nazemi Agha, 17 M	III Close Lisvane Cardiff	CF14 UXQ	
Nama & Address of Deve	n Managing		
Name & Address of Perso	on Managing		
,			
Duran auto Dananiu tian			
Property Description			
Short description of license	d HMO (No of storeys, e	etc)	
Property Type = SHARED HO	USE, No of Units = 1, Oc	ecupancy = 3, No of Storeys = 3	
Number of Rooms	Total Number of	F Poomo 4	
a) Sleeping 3	b) Liv	ring Rooms 1	
Number of Self Contained Fi	ats: 0	Number of Non Self Cont. Flat	ts: 1
Shared Amenities	Number Descri	ription	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
Commencement date:	12/06/2017	Duration of licence:	01/11/2020
Commencement date.	12/00/2017	Duration of ficefice.	01/11/2020
Maximum number of person	s or households permi	tted to occupy HMO under conditions	of licence:
	_	٦	
Households 3	Persons 3		
Information referred to a	residential property t	ribunal or Lands Tribunal:	
None	residential property t	Tibunal of Lanus Ilibunal.	
		Defense as weeks as	
Decision of Tribunal		Reference number	
Summary of conditions of lie			
-	-	ems 3, HMO - Fire General 1, HMO - Fire	Mandatory

HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 3, 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



Licence No.

2016/04737/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

First And Second Floor Maisonette 5 Ditchling Rise Brighton RN1 40I

Ward

Preston Park

Name & Address of Licen	ce Holder		
Jian Zhu, 25 Overhill Gardens	Brighton East Sus	sex BN1 8ND	
Name & Address of Perso	n Managing		
Property Description			
Short description of licensed	HMO (No of sto	reys, etc)	
Property Type = SHARED HOU	JSE, No of Units =	= 1, Occupancy = 3, No of Storeys = 2	
. , ,,			
Number of Rooms	Total Num	ber of Rooms 4	
a) Sleeping 3		b) Living Rooms 1	
Number of Self Contained Fla	ats:	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			
Commencement date:	13/01/201	7 Duration of licence:	01/11/2020
Maximum number of persons	or households p	permitted to occupy HMO under conditions of li	cence:
Households 3	Persons	3	
nousenous 5	i ersons	3	
Information referred to a r	esident <u>ial prop</u>	erty tribunal or Lands Tribunal:	
None		•	
Decision of Tribunal		Reference number	
Summary of conditions of lic		atory conds HMO - Fire Mandatory conds HMO - F	Furniture

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.

2016/04866/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

9 Madehurst Close Brighton BN2 0YR

Ward

East Brighton

Name & Address of Licenc	e Holder		
Ms Sarah Maciver, 24 Portland	Place Brighton BN2 1	DH	
Name & Address of Persor	Managing		
,			
Property Description			
Short description of licensed	HMO (No of storeys	, etc)	
Property Type = SHARED HOU	SE, No of Units = 1, (Occupancy = 3, No of Storeys = 3	
Number of Rooms	Total Number	of Rooms 5	
a) Sleeping	b) L	iving Rooms	
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	cription	
Licence Details			
Commencement date:	14/08/2017	Duration of licence:	01/11/2020
Maximum number of persons	or households perm	nitted to occupy HMO under conditions	of licence:
Households 3	Persons 3		
Information referred to a re	sidential property	rtribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice		IMO Fire Mandatany aoudo LIMO Fyria	

HMO - Elec Mandatory conds, HMO - Fire Doors 3, 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.

2016/04870/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

9 Dean Street Brighton BN1 3EG

Ward

Regency

Name & Address of Licen	ce Holder	
	ane, 40 Anson Court Gunwharf Quays Portsmouth PO1 3BG	
	•	
Name & Address of Perso	on Managing	
Parks Residential Limited, 30 I	New Road Brighton BN1 1BN	
Property Description		
Short description of licensed	d HMO (No of storeys, etc)	
Property Type = SHARED HO	USE, No of Units = 1, Occupancy = 4, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 5	
a) Sleeping 4	b) Living Rooms 1	
Number of Self Contained Fl	ats: 0 Number of Non Self Cont. Flats:	1
Shared Amenities	Number Description	
a) Kitchen	1	
a) Kitchen b) Bathrooms/Showers	1 1	
a) Kitchen	1	
a) Kitchen b) Bathrooms/Showers c) W.C.s	1 1	
a) Kitchen b) Bathrooms/Showers	1 1	
a) Kitchen b) Bathrooms/Showers c) W.C.s	1 1	01/11/2020
a) Kitchen b) Bathrooms/Showers c) W.C.s Licence Details Commencement date:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
a) Kitchen b) Bathrooms/Showers c) W.C.s Licence Details Commencement date:	1 1 1	
a) Kitchen b) Bathrooms/Showers c) W.C.s Licence Details Commencement date:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
a) Kitchen b) Bathrooms/Showers c) W.C.s Licence Details Commencement date: Maximum number of person Households 4	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
a) Kitchen b) Bathrooms/Showers c) W.C.s Licence Details Commencement date: Maximum number of person Households 4	1 1 1 1 1 1 18/11/2016 Duration of licence: s 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 person Households 4 Information referred to a relation	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
a) Kitchen b) Bathrooms/Showers c) W.C.s Licence Details Commencement date: Maximum number of person Households 4 Information referred to a referred to	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

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, Loft Insulation, Other Fire Work



Licence No.

2016/04878/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

66 Byron Street Hove BN3 5BB

Ward

Westbourne

Name & Address of Licence Holder	
Rent Wizards Ltd, 86-90 Paul Street London EC2A 4NE	
No O 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 = 4, Occupancy = 4, No of Storeys = 3	
Number of Booms	
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	nts: 1
Number of Self Contained Flats:	its:
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: 13/01/2017 Duration of licence:	01/11/2020
Maximum number of persons or households permitted to occupy HMO under conditions	of licence:
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	

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.

2016/04898/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

17 Sudeley Street Brighton BN2 1HE

Ward

East Brighton

	nce Holder		
ls Frances Plummer, Fairfiel	d Tapsells Lane Wadhurs	t East Sussex TN5 6PL	
0.4.1.			
ame & Address of Pers	on Managing		
roperty Description			
hort description of license	ed HMO (No of storeys, e	tc)	
•	•	cupancy = 4, No of Storeys = 3	
	.,	.,	
umber of Rooms	Total Number of	Rooms 5	
Sleeping 4	b) Livi	ng Rooms 1	
umber of Self Contained F	Flats: 0	Number of Non Self Cont. Flats:	1
hared Amenities	Number Descr	iption	
) Kitchen	1		
) Bathrooms/Showers	1		
W.C.s	1		
icence Details			
icelice Details			
ommencement date:	15/11/2016	Duration of licence:	01/11/2020
aximum number of persor	ns or households permit	ted to occupy HMO under conditions of	licence:
ouseholds 4	Persons 4		
nformation referred to a	residential property to	ribunal or Lands Tribunal:	
one			
00			

HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 3, 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.

2016/04959/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

25 Great College Street Brighton BN2 1HJ

Ward

East Brighton

Name & Address of Licence Holde	r	
Ms Fiona Brown, 50 Avenue Road Lond	on N6 5DR	
Name & Address of Person Manag	ing	
,		
Property Description		
Short description of licensed HMO (No	of storeys, etc)	
Property Type = SHARED HOUSE, No o	of Units = 1, Occupancy = 3, No of Storeys = 2	
Number of Rooms Tof	tal Number of Rooms 4	
a) Sleeping 3	b) Living Rooms 1	
		1
Number of Self Contained Flats:	0 Number of Non Self Cont. Fla	ts: 1
Shared Amenities Number	r Description	
a) Kitchen 1		
b) Bathrooms/Showers 1		
c) W.C.s		
Licence Details		
Commencement date: 16	Duration of licence:	01/11/2020
Maximum number of persons or house	eholds permitted to occupy HMO under conditions	of licence:
Households 3 Persons	3	
Information referred to a recidentic	al property tribunal or Lands Tribunal:	
None	al property tribulial of Lanus Tribulial.	
Decision of Tribunal	Reference number	
Decision of Hiband	Reference number	
Summary of conditions of licence Fire Alarm, HMO - Elec Mandatory conds	s, HMO - Fire Blanket, HMO - Fire Mandatory conds, F	IMO -

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 - Repairs Ventilation 3, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Structural Fire works



Licence No.

2016/05207/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

26 Sillwood Road	
Brighton	
BN1 2LE	

Ward

Regency

	ward Regency
Name & Address of Licence Holder	
Dr Katharine Stevens, 9 Kempshott Rd Londo	on SW16 5LG
Name & Address of Person Managing	
,	
Property Description	
Short description of licensed HMO (No of s	storeys, etc)
Property Type = SHARED HOUSE, No of Unit	ts = 1, Occupancy = 3, No of Storeys = 3
Number of Basses	washen of Decree 4
Number of Rooms Total Nu	umber of Rooms 4
a) Sleeping 3	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	
0	2047 Punction of House
Commencement date: 13/01/2	2017 Duration of licence : 01/11/2020
Maximum number of persons or household	ds permitted to occupy HMO under conditions of licence:
Households 3 Persons	3
Information referred to a residential pr	operty tribunal or Lands Tribunal:
None	
Decision of Tribunal	Reference number
Summary of conditions of licence Fire Alarms, HMO - Elec Mandatory conds, HI	MO - Fire Mandatory conds, HMO - Furniture Mandatory 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.

2016/05219/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

8 College Road Brighton BN2 1JA

Ward

Queen's Park

Name & Address of Licer	nce Holder			
Mr Howard Ansell, 30 Balham		London SW	/12 8DU	
Name & Address of Pers	on Managing			
,				
Property Description				
Short description of license	d HMO (No of store	ys, etc)		
Property Type = Not Assigned	I, No of Units = 1, Oc	cupancy = 4	4, No of Storeys = 4	
Number of Rooms	Total Number	er of Room	s 5	
a) Sleeping	h) Living Roo	oms	
a) 0.00pg	~	,,g		
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	2			
Licence Details				
Commencement date:	17/02/2017		Duration of licence:	01/11/2020
Maximum number of persor	ıs or households pe	ermitted to	occupy HMO under conditions of I	icence:
-	_		.,	
Households 4	Persons 4	-		
Information referred to a	residential prope	rtv tribuna	l or Lands Tribunal:	
None	propo			
Decision of Tribunal			Reference number	
Summany of conditions of I	conco			
Summary of conditions of li HMO - Flec Mandatory conds		Systems 3. F	IMO - Fire Blanket. HMO - Fire Doors	s 1. HMO

HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 3, HMO - Fire Blanket, HMO - Fire Doors 1, HMO - Fire Doors 3, HMO - Fire Doors 5, HMO - Fire Doors 7, 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



Licence No.

2016/05318/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

4 Victoria Grove Hove BN3 2LJ

Ward

Central Hove

Name & Address of Licer	ice Holder		
Mr David Moyle, 9 Victoria Gro	ove Hove East Sussex BN3	3 2LJ	
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, Occi	upancy = 4, No of Storeys = 4	
Novel or of Decree	Tatal Namelan of F		
Number of Rooms	Total Number of R		
a) Sleeping 4	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	1		
b) Bathrooms/Showers c) W.C.s	2 2		
0) 11.0.0			
Licence Details			
Commencement date:	26/01/2017	Duration of licence:	01/11/2020
Maximum number of person	s or households permitte	ed to occupy HMO under conditions of	licence:
	_		
Households 4	Persons 4		
Information referred to a	residential property tri	bunal or Lands Tribunal:	
None	rosidential property th	Samur or Earlas Tribanian	
Decision of Tribunal		Reference number	
Summary of conditions of li		nds, HMO - Fire Mandatory conds, HMO -	Furniture

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, Ventilation



Licence No.

2016/05349/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

76 Goldstone Villas Hove BN3 3RU

Ward

Goldsmid

Maximum number of persons or households permitted to occupy HMO under conditions of Households 3 Persons 3 Information referred to a residential property tribunal or Lands Tribunal: None Decision of Tribunal Reference number	f licence:
Households 3 Persons 3 Information referred to a residential property tribunal or Lands Tribunal:	f licence:
Households 3 Persons 3	f licence:
	f licence:
Maximum number of persons or households permitted to occupy HMO under conditions o	f licence:
	•
Commencement date: 25/11/2016 Duration of licence:	01/11/2020
Licence Details	
c) W.C.s 2	
a) Kitchen 1 b) Bathrooms/Showers 2	
Shared Amenities Number Description	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	: 1
b) Living Rooms	
a) Sleeping 3 b) Living Rooms 1	
Number of Rooms Total Number of Rooms 4	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 3, No of Storeys = 3	
Short description of licensed HMO (No of storeys, etc)	
Property Description	
,	
Name & Address of Person Managing	
Mr David Bean, 24 Roedean Crescent Brighton East Sussex BN2 5RH	
Name & Address of Licence Holder	
Nove O Address of License Helden	

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 Work



Licence No.

2016/05368/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

39C Preston Road Brighton BN1 4QE

		Ward	Preston	Park	
Nama O Addusas of License	Haldan				
Name & Address of Licence Mr Freddie Mather, FM Hutchinson		vetro 100 Batt	ersea Church Road Lor	ndon SW11	
2VI					
Name & Address of Person	Managing				
Brighton Accommodation Agency	, 74 Lewes Road Brighton E	3N2 3HZ			
Property Description					
Short description of licensed H	IMO (No of storeys, etc)				
Property Type = SHARED HOUS	E, No of Units = 1, Occupar	ncy = 5, No of S	Storeys = 2		
Number of Rooms	Total Number of Roon	ns 6			
a) Sleeping 5	b) Living Ro	ooms 1			
	· ·		_		
Number of Self Contained Flats	s : 0	Number of	Non Self Cont. Flats:	1	
		_			
Shared Amenities	Number Description	1			
a) Kitchen	1				
b) Bathrooms/Showers c) W.C.s	2				
Licence Details					
Commencement date:	22/11/2016	Duration	of licence:	01/11/2020	
Commencement date.	22/11/2010	Duration	of ficerice.	01/11/2020	
Maximum number of persons or households permitted to occupy HMO under conditions of licence:					
Households 5 P	ersons 5				
Information referred to a residential property tribunal or Lands Tribunal:					
None					
Decision of Tribunal		Ref	ference number		
Summary of conditions of licence HMO - Elec Mandatory conds, HMO - Fire Ceilings 1, HMO - Fire Doors 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 Steps etc 10, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire works					



Licence No.

2016/05450/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

First Floor And Second Floor Flat 13 Abbey Road Brighton RN2 1HS

Ward

East Brighton

Name & Address of Licen	ce Holder		
Mr Nicholas Monti, 140 Longhi	ill Road Brighton East Sussex	(BN2 7BD	
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 = 3 Occup	ancy = 3 No of Storeys = 2	
Number of Rooms	Total Number of Roo	oms 4	
a) Sleeping 3	b) Living F	Rooms 1	
			
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Flats:	: 1
tumber of Sen Contained in	ats.	Number of Non-Sen Sont. Plats.	1
Chaved Amenities	Normalian Decembration		
Shared Amenities a) Kitchen	Number Description	on	
b) Bathrooms/Showers	1		
c) W.C.s	1		
,	<u>.</u>		
icence Details			
		_	
Commencement date:	22/12/2016	Duration of licence:	01/11/2020
		4	
waximum number of person	s or nousenoids permitted	to occupy HMO under conditions of	riicence:
Households 3	Persons 3		
nformation referred to a	residential property tribu	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summon, of acreditions of the			
Summary of conditions of lice Fire Alarms. Fire Precautions \		conds, HMO - Fire Mandatory conds,	HMO -
		HMO - Property Chaes Mandatory con	

Furniture Mandatory 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.

2016/05456/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

28 Upper North Street Brighton BN1 3FG

Ward

Regency

Name & Address of Licen	ce Holder			
Mr Tony Medin, 5 Millington D	rive Trowbridge Wiltshire B	A14 9EU		
Name & Address of Perso	on Managing			
Crombie & Lam Ltd Trading A	s Belvoir Brighton & Hove, o	Cornelius House 178-180 Church Ro	oad Hove East	
Property Description				
Short description of license	d HMO (No of storeys, etc)		
Property Type = SHARED HO	USE, No of Units = 1, Occu	pancy = 3, No of Storeys = 2		
		•		
Number of Rooms	Total Number of R			
a) Sleeping 3	b) Living	Rooms 1		
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ats: 1	
Shared Amenities	Number Descrip	tion		
a) Kitchen	1			
b) Bathrooms/Showers c) W.C.s	2			
-,				
Licence Details				
Common common to deter	14/07/2017	Duration of linears	04/44/2020	
Commencement date:	11/07/2017	Duration of licence:	01/11/2020	
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
Households 3	Persons 3			
Tiouscrioius	0			
Information referred to a	residential property trib	ounal or Lands Tribunal:		
None				
Decision of Tribunal		Reference number		
Summary of conditions of lie Fire Alarms, HMO - Elec Mand		andatory conds, HMO - Furniture Ma	ndatory conds,	

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.

2016/05466/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

174A Portland Road Hove BN3 5QN

Ward

Westbourne

Name & Address of Licence	e Holder			
Mr Geoffrey Medhurst, 99 Queer	ı Victoria Avenue Hove	BN3 6XB		
Name & Address of Person	Managing			
,				
Property Description				
Short description of licensed l	- - - - - - - - - - - - - - - - - - -	c)		
Property Type = SHARED HOUS	SE, No of Units = 1, Occ	cupancy = 4, No of Storeys = 2		
Number of Deams	Total Number of	D		
Number of Rooms	Total Number of I			
a) Sleeping	b) Livir	ng Rooms		
Number of Self Contained Flat	s : 0	Number of Non Self Con	t. Flats: 0	
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Descri	ption		
Licence Details				
Commencement date:	14/08/2017	Duration of licence:	01/11/2020	
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
Households 4	Persons 4			
Information referred to a re	sidential property tr	ibunal or Lands Tribunal:		
None				
Decision of Tribunal		Reference numb	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



Licence No.

2016/05518/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Maisonette 147 Dyke Road Hove BN3 1TJ

Ward

Goldsmid

Name & Address of Licen	ce Holder		
Ms Linda Kianfar, Unit 15-16 1	5-16 Avis Way Newhave	en BN9 0DS	
Name & Address of Perso	n Managing		
,			
Property Description			
Short description of licensed	,	•	
Property Type = SHARED HO	USE, No of Units = 1, O	ccupancy = 3, No of Storeys = 3	
Number of Rooms Total Number of Rooms 4			
a) Sleeping 3	b) Liv	ving Rooms 1	
, . .	,	<u> </u>	
Number of Self Contained FI	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			
Licence Details			
Commencement date:	09/01/2017	Duration of licence:	01/11/2020
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
			10011001
Households 3	Persons 3		
Information referred to a	rosidontial proporty	tribunal or Lands Tribunal:	
None	residential property	iribunai di Lanus Iribunai.	
Decision of Tribunal Reference number			
Summary of conditions of lice HMO - Flee Mandatory conds		ems 6, HMO - Fire Blanket, HMO - Fire Doors	s 1 HMO
- Fire Doors 3, HMO - Fire Doors 5, HMO - Fire Emergency Lighting 1, HMO - Fire Locks, HMO - Fire			

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 Emergency Lighting 1, HMO - Fire Locks, HMO - Fire Mandatory conds, HMO - Fire Notices 1, HMO - Furniture Mandatory conds, HMO - Licensing Kitchen 6, 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, Structural fire works





Licence No.

2016/05548/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

61 Ashford Road Brighton BN1 6LL

Ward

Preston Park

Name & Address of Licence Holder	
Ms Alison Trinder, 42 Fitzgerald Avenue Seaford East Sussex BN25 1AZ	
Name & Address of Person Managing	
Mr David Burt, 49 Station Road Polegate East Sussex BN26 6EA	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 2	
Troperty Type – Grivate Birrosee, No Greening – 1, Occupancy – 5, No Greening – 2	
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	s: 1
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s Number Description 1 1 1	
Licence Details	
Commencement date: 09/02/2017 Duration of licence:	01/11/2020
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 Additional Facilities, Fire Alarms, HMO - Flec Mandatory conds, HMO - Fire Mandatory conds, H	MO -

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, Ventilation



Licence No.

2016/05563/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 5
Codrington Mansion
139 Western Road
Brighton
RN1 21 A

Ward

rd Regency

Name & Address of Licence	Holder		
Bailey Holdings Ltd, 5th Floor 37	Esplanade St. Helier J	ersey JE1 2TR	
Name & Address of Person	- 5 5		
Pavilion Properties Ltd, 39 Sackv	ille Road Hove BN3 3\	VD	
Dronauty Decarintian			
Property Description Short description of licensed H	MO (No of storous, o	to)	
-	-		
Property Type = SHARED HOUS	E, NO of Units = 1, Oc	cupancy = 3, No of Storeys = 2	
Number of Rooms	Total Number of	Rooms 4	
a) Sleeping 3	b) Livi	ng Rooms 1	
Number of Self Contained Flats	s: 0	Number of Non Self Cont. Flats:	1
	Number Descr	iption	
a) Kitchen	1		
b) Bathrooms/Showers c) W.C.s	1		
C) VV.C.S	<u> </u>		
Licence Details			
		T	
Commencement date:	07/12/2016	Duration of licence:	01/11/2020
Maximum number of persons of	or households permit	ted to occupy HMO under conditions of	licence:
Households 4 P	ersons 3		
Tiouscholus 4	0		
Information referred to a res	sidential property tr	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licer HMO - Elec Mandatory conds, HN		O - Fire Mandatory conds, HMO - Furniture	9

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, Structural Fire Works



Licence No.

2016/05566/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 4 4 Cromwell Road Hove BN3 3EA

Ward

Goldsmid

Name & Address of Licen	ce Holder		
		Church Road London SW11 3YL	
,			
Name & Address of Perso	n Managing		
JD Properties LTD, 57 Prestor	Street Brighton Sussex	BN1 2HE	
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 = 2	
Number of Rooms	Total Number of	Rooms 6	
a) Sleeping 5	b) Livi	ing Rooms 1	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Flats:	1
Shared Amenities	Number Descr	iption	
a) Kitchen	1		
b) Bathrooms/Showers	3		
c) W.C.s	3		
Licence Details			
		_	
Commencement date:	01/02/2017	Duration of licence:	01/11/2020
Maximum number of person	e or households normit	ted to occupy HMO under conditions of	liconco
waxiiilaiii ilaiiibei oi persoii	s of flousefloids periffic	ted to occupy rimo under conditions of	iicerice.
Households 5	Persons 5		
	residential property to	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	latory conds, HMO - Fire	Mandatory conds, HMO - Furniture Mandat Aandatory conds, HMO - Property Maint Ma	

conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/ Repairs



Licence No.

2016/05585/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Second Floor Flat 17 Prince Albert Street Brighton BN1 1HF

	_	_
۱۸	l٠	ᆈ

Regency

Name & Address of Licen	ce Holder
Mr Patrick Moorhead, 78 Dyke	Road Avenue Brighton East Sussex BN1 5LF
Name & Address of Perso	n Managing
Barclays Bank, 139 - 142 Nort	I Street Brighton East Sussex
Property Description	
Short description of licensed	I HMO (No of storeys, etc)
Property Type = SHARED HO	USE, 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
Number of Calf Cantains d El	Atom Colf Court Flater 0
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	1
Licence Details	
Licence Details	
Commencement date:	25/08/2017 Duration of licence: 01/11/2020
Maximum number of person	s or households permitted to occupy HMO under conditions of licence:
Households 4	Persons 4
riouseriolus 4	7
Information referred to a	esidential property tribunal or Lands Tribunal:
None	
Decision of Tribunal	Reference number
Furniture Mandatory conds, HI	ence 1, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - MO - Gas Mandatory conds, HMO - General 1, HMO - General 6, HMO -

Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Works, Structural Fire Works, North N Other Fire works, Structural Fire Works, Ventilation



Licence No.

2016/05616/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 6
Codrington Mansion
139 Western Road
Brighton
RN1 2LA

Ward

Regency

Name & Address of Licence	Holder	
Bailey Holdings Ltd, 5th Floor 37	Esplanade St Helier Jersey JE1 2TR	
Name & Address of Person	Managing	
Pavilion Properties Ltd, 39 Sackv	ille Road Hove BN3 3WD	
Property Description		
Short description of licensed H	IMO (No of storeys etc)	
-	SE, No of Units = 1, Occupancy = 3, No of Storeys = 2	
Property Type = SHARED HOUS	E, No of Offits = 1, Occupancy = 3, No of Storeys = 2	
Number of Rooms	Total Number of Rooms 4	
a) Sleeping 3	b) Living Rooms 1	
Number of Self Contained Flats	Number of Non Self Cont. Flats:	1
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers c) W.C.s	1 2	
C) W.O.3		
Licence Details		
Commencement date:	07/12/2016 Duration of licence:	01/11/2020
Maximum number of persons of	or households permitted to occupy HMO under conditions of li	icence:
Ususahalda 0 B		
Households 3 P	ersons 3	
Information referred to a res	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licer	nce	
HMO - Elec Mandatory conds, HI	MO - Fire Blanket, HMO - Fire Mandatory conds, HMO - Furniture andatory conds, HMO - Property Chges Mandatory conds, HMO - I	Property

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, Structural Fire Works



Licence No.

2016/05620/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

58 Argyle Road Brighton BN1 4QB

Ward

Preston Park

Name & Address of Licenc			
Mr Simon Farncombe, 24 Tongo	dean Lane Brighton E	BN1 5JD	
Nows 9 Adduses of Dayson	Managing		
Name & Address of Persor	i Managing		
1			
Property Description			
Short description of licensed	HMO (No of storeys	s, etc)	
·		Occupancy = 4, No of Storeys = 3	
Toperty Type – STIAINED TIOO	3L, 110 01 011113 - 4,	Occupancy = 4, No or Storeys = 3	
Number of Rooms	Total Number	of Rooms 5	
a) Sleeping 4	b)	Living Rooms 1	
Number of Self Contained Fla	ts : 0	Number of Non Self Cont. F	lats: 1
Shared Amenities	Number Des	scription	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	3		
Licence Details			
Commencement date:	22/11/2016	Duration of licence:	01/11/2020
Maximum number of persons	or households peri	mitted to occupy HMO under condition	s of licence:
Have about a	D		
Households 4	Persons 4		
Information referred to a re	sidential propert	y tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice		ov conds. HMO - Furniture Mandatory con	de 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.

2016/05833/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 4 16 Chesham Road Brighton BN2 1NB

Ward

East Brighton

Name & Address of Licen	ce Holder		
Mr Neil Berry, 107 Albion Hill E		BN2 9PA	
<u> </u>	-		
Name & Address of Perso	n Managing		
Property Description			
Short description of license	d HMO (No of store)	s, etc)	
Property Type = SHARED HO	USE, No of Units = 1	Occupancy = 3, No of Storeys = 3	3
Number of Rooms	Total Numbe	r of Rooms 4	
a) Sleeping 3	b)	Living Rooms 1	
Number of Self Contained Fl	ats:	Number of Non Self (Cont. Flats: 1
Shared Amenities		escription	
a) Kitchen o) Bathrooms/Showers	2		
c) W.C.s	2		
•			
Licence Details			
Commonoomont data:	08/12/2016	Duration of licence	: 01/11/2020
Commencement date:	06/12/2016	Duration of licence	01/11/2020
Maximum number of person	s or households pe	mitted to occupy HMO under co	nditions of licence:
Households 3	Persons 3		
ilouseiloius 5	reisons 5		
Information referred to a	residential proper	ty tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference nu	ımber
Summary of conditions of lie		HMO - Fire Mandatory conds, HM0) - Furniture
= 100 manaator, 00mao,	i iio Biarmot,		

Mandatory 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.

2016/06020/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 4 6 St Margarets Place Brighton BN1 2FD

Ward

Regency

Name & Address of Licence Holder
Ms Emma Westecott, 435 Shaw Street Toronto Ontario Canada M6J2X4
Name & Address of Person Managing
Home Leasing Brighton Ltd, 18 Hyde Gardens Eastbourne BN21 4PT
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 3, Occupancy = 3, No of Storeys = 2
Number of Rooms Total Number of Rooms 3
a) Sleeping b) Living Rooms 1
Notes to the control of the control
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
Licence Details
Commencement date: 05/01/2017 Duration of licence: 01/11/2020
Maximum number of persons or households permitted to occupy HMO under conditions of licence:
University Daments D
Households 3 Persons 3
Information referred to a residential property tribunal or Lands Tribunal:
None
Decision of Tribunal Reference number
Summary of conditions of licence Fire EI / GI / Cupboards 2, Fire EI / GI / Cupboards 6, 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 Emergency Lighting 1, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Kitchen 6, HMO - Licensing Loft Insulation, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds





Licence No.

2016/06023/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

74A Tisbury Road Hove BN3 3BB

Ward

Central Hove

Name & Address of Licer	ice Holder		
Ms Julia Thompson, 21 First A	Avenue Hove East Susse	x BN3 2FH	
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, O	ccupancy = 3, No of Storeys = 2	
Number of Rooms	Total Number of	f Rooms 4	
a) Sleeping 3	b) Liv	ring Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats	s: 1
Shared Amenities	Number Desc	ription	
a) Kitchen	1		
o) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
Commencement date:	16/03/2018	Duration of licence:	01/11/2020
	10/00/2010		0 11 11/2020
Maximum number of person	is or households permi	tted to occupy HMO under conditions o	of licence:
Households 3	Persons 3	٦	
iousenoius 5	0		
nformation referred to a	residential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	, HMO - Fire Doors 4, HN	MO - Fire Doors 5, HMO - Fire Doors 6, HM	

HMO - Elec Mandatory conds, HMO - Fire Doors 4, HMO - Fire Doors 5, HMO - Fire Doors 6, HMO - Fire Mandatory conds, HMO - Furniture Mandatory 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.

2016/06682/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

28A Upper North Street	
Brighton	
BN1 3FG	

Ward

Regency

Name & Address of Licence Holder	
Mrs Julie Angela Medin-Perez, 5 Millington Drive Trowbridge Wiltshire BA14 9EU	
Name & Address of Person Managing	
Crombie & Lam Ltd Trading As Belvoir Brighton & Hove, Cornelius House 178-180 Church Road	I Hove East
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 4, No of Storeys = 2	
Number of Rooms Total Number of Rooms 3	
a) Sleeping b) Living Rooms 1	
Number of Oak Oastein at Flate	4
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	s: <u> </u>
Shared Amenities Number Description	
a) Kitchen 1	
b) Bathrooms/Showers 1	
c) W.C.s	
Licence Details	
Commencement date: 11/07/2017 Duration of licence:	04/44/2020
Commencement date: 11/07/2017 Duration of licence:	01/11/2020
Maximum number of persons or households permitted to occupy HMO under conditions o	of licence:
Households 4 Persons 4	
Tiousenoius 4 Fersons 4	
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 Mand	atory conds,

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.

2017/00066/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Maisonette 31 St Georges Road Brighton BN2 1ED

Ward

East Brighton

Name & Address of Licence Holder	
Mrs Emma Hardie, West Elms Billingshurst Road Wisborough Green West Sussex RH14 (0DY
Name & Address of Person Managing	
,	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 4, Occupancy = 4, No of Storeys = 2	
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 a) Kitchen b) Bathrooms/Showers c) W.C.s Number Description 1 2	
Licence Details	
Commencement date: 13/03/2017 Duration of licence:	01/11/2020
Maximum number of persons or households permitted to occupy HMO under conditi	ions of licence:
Households 4 Persons 4	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	er
Summary of conditions of licence	anda LIMO. Cas

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory 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, Other Fire Work



Licence No.

2017/00138/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

37 Beaconsfield Road Brighton BN1 4QH

Ward

Preston Park

Name & Address of Licence Holder		
Ms Vivien Lamplough, Barleycorn The Stre	eet Shoreham-by-Sea BN43 5NJ	
Name & Address of Person Managin	ng	
,		
Property Description		
Short description of licensed HMO (No o	of storeys, etc)	
Property Type = SHARED HOUSE, No of U	Units = 1, Occupancy = 5, No of Storeys = 2	
Number of Rooms Total	I Number of Rooms 5	
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		
License Beteile		
Licence Details		
Commencement date: 24/0	04/2017 Duration of licence :	01/11/2020
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	
HMO - Fire Doors 3, HMO - Fire Doors 5, F	ec Mandatory conds, HMO - Fire Blanket, HMO - Fire Do HMO - Fire Doors 7, HMO - Fire Mandatory conds, HMO ds, HMO - Gas Mandatory conds, HMO - Licensing Bed	- Fire

HMO - Licensing Kitchen 6, 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.

2017/00172/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

18 Brunswick Street East Hove BN3 1AU

Ward

Brunswick And Adelaide

Name & Address of Licence			
Ms Eileen Waller, Chequers Oa	st Church Road Catsfield Ea	st Sussex TN33 9DP	
Name C Adduses of Dansey	Managina		
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed	HMO (No of storage atc)		
•		5 No of Otomore 0	
Property Type = SHARED HOU	SE, No of Units = 1, Occupa	incy = 5, No or Storeys = 2	
Number of Rooms	Total Number of Roo	oms 6	
a) Sleeping 5	b) Living R	Rooms 1	
· · · · · · · · · · · · · · · · · · ·			
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Fla	ats: 1
Shared Amenities	Number Descriptio	n	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Licence Details			
Commencement date:	18/04/2017	Duration of licence:	01/11/2020
Maximum number of persons	or households permitted t	to occupy HMO under conditions	s 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 lice	ence		
		s, 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.

2017/00189/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 8 Cranbourne Street Brighton BN1 2RD

		Ward	Rege	ncy
Name & Address of Licence	e Holder			
Truwicker Limited, C/O Stiles H		House 1 Jubilee	Street Brighton BN1 1G	E
Name & Address of Persor	n Managing			
Mr Sean McDowell, C/O Stiles I	Harold Williams LLP Jubile	e House 1 Jubilee	Street Brighton BN1 10	GE ————————————————————————————————————
Property Description				
Short description of licensed	HMO (No of storevs, etc))		
Property Type = SHARED HOU		•	Storevs = 4	
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Number of Rooms	Total Number of Ro	ooms 5		
a) Sleeping 4	b) Living	Rooms 1		
Number of Self Contained Fla	ts: 0	Number of	Non Self Cont. Flats:	1
Shared Amenities	Number Descript	tion		
a) Kitchen	1			
b) Bathrooms/Showers c) W.C.s	2			
c) vv.c.s				
Licence Details				
Commencement date:	27/02/2017	Duration	of licence:	01/11/2020
		24.4.5		
Maximum number of persons	or households permitted	d to occupy HMC	under conditions of I	icence:
Households 4	Persons 4			
Information referred to a re	sidential property trib	ounal or Lands	Tribunal:	
None				
Decision of Tribunal		Re	ference number	
Summary of conditions of lice HMO - Elec Mandatory conds, H		- Fire Mandatory o	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 - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



Licence No.

2017/00295/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

28 Argyle Road Brighton BN1 4QA

Ward

Preston Park

Name & Address of Licence		
Mrs Tabitha Riley, 2 Titian Road	Hove East Sussex BN3 5QS	
N 0411 (B		
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, Occupancy = 4, No of Storeys = 2	
Number of Rooms	Total Number of Rooms 5	
a) Sleeping 4	b) Living Rooms 1	
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 1 1 1	
Licence Details		
Commencement date:	03/03/2017 Duration of licence:	01/11/2020
Maximum number of persons	or households permitted to occupy HMO under conditions o	of licence:
Households 4 F	Persons 4	
Information referred to a re	aidantial nuanautu tuihunal au Landa Tuihunal	
	sidential property tribunal or Lands Tribunal:	
None	Pofononia m	
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.

2017/00690/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 4 17 College Terrace Brighton BN2 0EE

Ward

Queen's Park

Name & Address of Licence	ce Holder		
Fairhomes Southern Ltd, Suite	33 Leisure Island Busin	ess Centre 23 Ocean Village Promenade	Ocean Village
Name & Address of Perso	n Managing		
Miss Lydia Barrett, 4 Denne Ro	oad Horsham RH12 1JE		
Property Description			
Short description of licensed	HMO (No of storeys, e	etc)	
Property Type = SHARED HOU	JSE, No of Units = 1, Oc	ecupancy = 3, No of Storeys = 2	
Number of Rooms	Total Number of	Rooms 5	
a) Sleeping	b) Liv	ing Rooms	
Number of Self Contained Fla	ats: 0	Number of Non Self Cont. Flat	s: 1
Shared Amenities	Number Descr	ription	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
Commencement date:	24/07/2017	Duration of licence:	01/11/2020
Maximum number of persons	or households permit	tted to occupy HMO under conditions	of licence:
	-	 1	
Households 3	Persons 3		
Information referred to a r	esidential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
1, HMO - Fire Doors 3, HMO - conds, HMO - Gas Mandatory	HMO - Fire Alarm Syste Fire Doors 5, HMO - Fire conds, HMO - Property (ms 3, HMO - Fire Alarm Systems 5, HMO e Mandatory conds, HMO - Furniture Mar Chges Mandatory conds, HMO - Property RubbishRecyc Mandatory conds, HMO -	ndatory ⁄ Maint

Agrmnt Mandatory conds, Management / Repairs, Management/Repairs, Management/repairs, Other Fire Works





Licence No.

2017/00800/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

First Floor Flat 15 Stafford Road Brighton BN1 5PE

Ward

Preston Park

Name & Address of Licen	ce Holder	
Mr Ben Holmes, 74 Lewes Roa	ad Brighton BN2 3HZ	
Name & Address of Perso		
DL Property Management, 40	Essex Street Brighton BN2 1JW	
Property Description		
Short description of licensed	H HMO (No of storays atc)	
·		
Property Type = SHARED HO	USE, No of Units = 1, Occupancy = 5, No of Storeys = 2	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 5	b) Living Rooms 1	
Number of Self Contained FI	ats: 0 Number of Non Self Cont. Flat	s: 1
	 	
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers c) W.C.s	1	
c) vv.o.s		
Licence Details		
Commencement date:	04/04/2017 Duration of licence:	01/11/2020
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 lic	cence	
HMO - Elec Mandatory conds,	HMO - Fire Mandatory conds, HMO - Fire Test Certificates, HMC Mandatory conds, HMO - Property Chges Mandatory conds, HMO	

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, Other Fire Works



Licence No.

2017/00805/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

First Floor Flat 120 Springfield Road Brighton BN1 6BZ

Ward

Preston Park

Name & Address of Licence Holder
Mr Martyn Allen, 49 Springfield Road Brighton East Sussex BN1 6DF
Will Waity Halleri, 49 Ophingheid Road Brighton East Gussex BNT ODI
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 = 3, No of Storeys = 2
North and F Danier Total North and F Danier A
Number of Rooms Total Number of Rooms 4
a) Sleeping b) Living Rooms 1
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 1
Oliver I Aven Market Broad Market
Shared Amenities Number Description
a) Kitchen
a) Kitchen 1 b) Bathrooms/Showers 2
b) Bathrooms/Showers 2
b) Bathrooms/Showers 2
b) Bathrooms/Showers 2 c) W.C.s 2
b) Bathrooms/Showers c) W.C.s 2 Licence Details
b) Bathrooms/Showers c) W.C.s Licence Details
b) Bathrooms/Showers c) W.C.s Licence Details Commencement date: 02/05/2017 Duration of licence: 01/11/2020
b) Bathrooms/Showers c) W.C.s Licence Details Commencement date: 02/05/2017 Duration of licence: 01/11/2020 Maximum number of persons or households permitted to occupy HMO under conditions of licence:
b) Bathrooms/Showers c) W.C.s Licence Details Commencement date: 02/05/2017 Duration of licence: 01/11/2020 Maximum number of persons or households permitted to occupy HMO under conditions of licence:
b) Bathrooms/Showers c) W.C.s Licence Details Commencement date: 02/05/2017 Duration of licence: 01/11/2020 Maximum number of persons or households permitted to occupy HMO under conditions of licence:
b) Bathrooms/Showers c) W.C.s 2 Licence Details Commencement date: 02/05/2017 Duration of licence: 01/11/2020 Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households 3 Persons 3 Information referred to a residential property tribunal or Lands Tribunal:
b) Bathrooms/Showers c) W.C.s Licence Details Commencement date: 02/05/2017 Duration of licence: 01/11/2020 Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households 3 Persons 3

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory 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.

2017/00933/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

First And Second Floor Flat 36 Denmark Villas Hove BN3 3TE

Ward

Goldsmid

ame & Address of Licer	nce Holder		
r James Brewster, Licensed	Trade Charity Heatherley L	ondon Road Ascot Berkshire SL5 8	DR
ame & Address of Pers	5 5		
eaders Brighton & Hove (Pro	perty Management), 119/12	20 Western Road Brighton BN1 2AD	
roperty Description			
	d HMO (No of storeys, etc))	
-	-	pancy = 4, No of Storeys = 2	
operty Type – STIARED TIE	, , , , , , , , , , , , , , , , , , ,	ipancy – 4, No or otorcys – 2	
umber of Rooms	Total Number of R	ooms 5	
Sleeping 4	b) Living	Rooms 1	
umber of Self Contained F	lats: 0	Number of Non Self Cont. F	lats: 1
nared Amenities	Number Descrip	tion	
Kitchen Bathrooms/Showers	2		
W.C.s	2		
cence Details			
ommencement date:	18/05/2017	Duration of licence:	01/11/2020
aximum number of persor	is or households permitte	d to occupy HMO under conditior	s of licence:
ouseholds 4	Persons 4		
	residential property trik	ounal or Lands Tribunal:	
one			
ecision of Tribunal		Reference number	
ummary of conditions of lidditional Facilities, HMO - El		- 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, Structural fire works



Licence No.

2017/01306/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO) 49 Findon Road Brighton BN2 5NY

Ward

East Brighton

Name O Address at the			_
Name & Address of Licer		DATE TABLE	
Mr Bernd Sass, 49 Findon Ro	ad Brighton East Sussex	BN2 5NY	
Nome O Address of Bone	n Managina		
Name & Address of Perso	on Managing		
1			
Property Description			
Property Description	d UMO (No of storous a	242)	
Short description of license		•	
Property Type = SHARED HC	USE, No of Units = 1, Oc	ccupancy = 6, No of Storeys = 2	
Number of Rooms	Total Number of	Rooms 8	
a) Sleeping 6	b) Liv	ring Rooms 1	
	-,		
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ats: 1
ramber of och contained i	uto.	Number of Non Con Cont. 1 is	1
Shared Amenities	Number Desci	ription	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	24/08/2017	Duration of licence:	01/11/2020
Maximum number of person	s or households permi	tted to occupy HMO under conditions	s of licence:
Households 6	Persons 6	7	
nformation referred to a	residential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li		Mandatory conds HMO - Furniture Ma	ndatory conde

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.

2017/01559/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

1 Hamsey Close Brighton BN2 5GQ

Ward

East Brighton

Name & Address of Licence Holder		
Mr Richard Carr, 56 Downs Avenue Eastbo	urne East Sussex BN20 8TW	
Name & Address of Person Managing	g	
,		
Property Description		
Short description of licensed HMO (No of	f storeys, etc)	
Property Type = SHARED HOUSE, No of U	nits = 1, Occupancy = 5, No of Storeys = 2	
N . 1	N (D	
	Number of Rooms 7	
a) Sleeping 5	b) Living Rooms 1	
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		
Licence Details		
Liound Details		
Commencement date: 03/05	5/2017 Duration of licence:	01/11/2020
Maximum number of persons or nousend	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	
Summary of conditions of licence		
HMO - Elec Mandatory conds, HMO - Fire A	Narm Systems 3, HMO - Fire Blanket, HMO - Fire M	landatory

HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 3, 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, Management / Repairs, Structural Fire Works



Licence No.

2017/01560/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

115 Queensway Brighton BN2 0FB

Ward

East Brighton

Name & Address of Licer	nce Holder		
Mr Richard Carr, 56 Downs A	venue Eastbourne East S	ussex BN20 8TW	
Name & Address of Pers	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 = 4, No of Storeys = 2	
		_	
Number of Rooms	Total Number of	Rooms 6	
a) Sleeping 4	b) Livi	ng Rooms 1	
Number of Self Contained F	Flats: 0	Number of Non Self Cont. Fla	ats: 1
Shared Amenities	Number Descr	iption	
a) Kitchen	1		
o) Bathrooms/Showers	2		
c) W.C.s	1		
Licence Details			
Commencement date:	03/05/2017	Duration of licence:	01/11/2020
Maximum number of persor	ns or households permit	ted to occupy HMO under conditions	s of licence:
Households 4	Persons 4		
nformation referred to a	residential property to	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li	icanca		
		O - Fire Mandatory conds, HMO - Fire N	Notices 1,
HMO - Furniture Mandatory c	onds, HMO - Gas Mandate	ory conds, HMO - Property Chges Man	datory conds,

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

Mandatory conds, Structural Fire Works



Licence No.

2017/01628/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 8 28 Palmeira Avenue Hove BN3 3GB

Ward

Brunswick And Adelaide

Name & Address of Licen	ce Holder		
Fan Du, 35 Burney Street Lond	lon SE10 8EX		
Name & Address of Perso	n Managing		
1			
Name & Address of Perso	n Managing		
Mr Jinming Ye, 14 Sandringha	n Lodge 23 Palmeira Ave H	love BN3 3GA	
Property Description			
Short description of licensed	HMO (No of storeys, etc)		
Property Type = SHARED HOU	JSE, No of Units = 1, Occup	pancy = 3, No of Storeys = 2	
		_	
Number of Rooms	Total Number of Ro	ooms 3	
a) Sleeping 3	b) Living	Rooms 1	
Number of Self Contained Fla	ats: 0	Number of Non Self Cont. Flat	s: 1
Shared Amenities	Number Descript	ion	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	2		
Licence Details			
Commencement date:	29/06/2017	Duration of licence:	01/11/2020
Maximum number of persons	or households permitted	I to occupy HMO under conditions	of licence:
Households 3	Persons 3		
Information referred to a r	esidential property trib	unal or Lands Tribunal:	
None			
		ds, HMO - Furi ritars Mandatory onds	
BuhhinaResvevingtonsverving	Snct MO - Tenant Agrmnt N	ls, HMO - Property Maint Mandatory ol landatory conds, Other Fire Work	onus, mino -



Licence No.

2017/01767/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

279 Ditchling Road Brighton BN1 6JH

Ward

Preston Park

Name & Address of Licence	e Holder		
Dr Steve Singh, 25 Harrington V		ex BN1 6RG	
	g		
Name & Address of Person	Managing		
,			
Property Description			
Short description of licensed I	HMO (No of storeys, etc	c)	
Property Type = SHARED HOUS	SE, No of Units = 1, Occ	upancy = 5, No of Storeys = 2	
Number of Rooms	Total Number of F	Rooms 6	
a) Sleeping	b) Livin	g Rooms	
Number of Self Contained Flat	s: 0	Number of Non Self Cont. Flat	ts: 0
Shared Amenities	Number Descrip	ation	
a) Kitchen	Number Descrip	otion	
b) Bathrooms/Showers			
c) W.C.s			
Licence Details			
	20/20/20/2		
Commencement date:	29/06/2017	Duration of licence:	01/11/2020
Maximum number of persons	or households permitte	ed to occupy HMO under conditions	of licence:
Households 5	Persons 5		
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, Loft Insulation, Other Fire Work



Licence No.

2017/02041/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

260 Wiston Road Brighton BN2 5PS

Ward

East Brighton

Name & Address of Lice	nce Holder		
Mrs Naomi Dawson, 123 Whi	tehawk Road Brighton BN2 5	5FJ	
Name & Address of Pers	on Managing		
ı			
Property Description			
•	ed HMO (No of storeys, etc)		
Property Type = SHARED HO	OUSE, No of Units = 1, Occu	pancy = 3, No of Storeys = 2	
Number of Rooms	Total Number of Ro	ooms 3	
a) Sleeping 3	b) Living		
a) olcoping	b) Living	TOOMS .	
Number of Self Contained F	Flats: 0	Number of Non Self Cont. Flats:	1
Aumber of Self Contained r	iais.	Number of Non Sen Cont. Flats.	l
Shared Amenities	Number Descript	tion	
a) Kitchen	1		
o) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
Licence Details			
Commencement date:	22/08/2017	Duration of licence:	01/11/2020
waximum number of perso	ns or nousenoids permitted	d to occupy HMO under conditions of	licence:
Households 3	Persons 3		
	residential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of I Electrical Works, Enlargemer		HMO - Elec Mandatory conds, HMO - Fir	re

Electrical Works, 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, Loft Insulation , Management/Repairs, Ventilation



Licence No.

2017/02190/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

1 Powis Road	
Brighton	
BN1 3HJ	

Ward

Regency

Name & Address of Licen	ce Holder		
Ms Holly Briscoe, 47 Norfolk S	quare Brighton East Sus	sex BN1 2PA	
Name & Address of Perso	on Managing		
Branarty Description			
Property Description			
Short description of license	d HMO (No of storeys, e	etc)	
Property Type = SHARED HO	USE, No of Units = 1, Oc	ccupancy = 4, No of Storeys = 4	
		_	
Number of Rooms	Total Number of	Rooms 5	
a) Sleeping 4	b) Livi	ing Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fl	ats: 1
Shared Amenities	Number Descr	intion	
a) Kitchen	1	TP COL	
b) Bathrooms/Showers	1		
c) W.C.s	1		
3) 11.0.0	·		
Licence Details			
Commencement date:	27/06/2017	Duration of licence:	01/11/2020
		ı	
Maximum number of person	s or households permit	ted to occupy HMO under conditions	s of licence:
Households 4	Persons 4]	
ilousellolus 4	reisons 4		
nformation referred to a	residential property t	ribunal or Lands Tribunal:	
None	rootaontiai proporty t	induration Larias Tribatian	
		Deference number	
Decision of Tribunal		Reference number	
Summary of conditions of li			
		, HMO - Elec Mandatory conds, HMO -	
		HMO - Fire Mandatory conds, HMO - lory conds, HMO - Licensing Bathroom	
		nt Mandatory conds, HMO - Repairs Di	
, , , ,		cyc Mandatory conds HMO Tonant A	0

Mandatory conds, Management / Repairs, Structural Fire Works





Licence No.

2017/02314/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Top Flat 42 Tisbury Road Hove BN3 3BA

Ward

Central Hove

Name & Address of Licence Holde	er		
P K Griffin, 91 High Street Lewes BN7 1	XN		
Name & Address of Person Manag			
Kendrick Property Services Ltd, 10-12 Lo	ewes Road Brighton East Sussex BN2 3HP		
Property Description			
Short description of licensed HMO (N	o of storays atc)		
	of Units = 1, Occupancy = 3, No of Storeys = 2		
Floperty Type – SHARED HOUSE, NO	of Office = 1, Occupancy = 3, No of Storeys = 2		
Number of Rooms To	tal Number of Rooms 4		
a) Sleeping 3	b) Living Rooms 1		
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	1	
Shared Amenities Numbe	r Description		
a) Kitchen 1			
b) Bathrooms/Showers 1 c) W.C.s 1			
Licence Details			
2	0/00/0047 Powerties of House	04/44/0000	
Commencement date: 3	0/06/2017 Duration of licence:	01/11/2020	
Maximum number of persons or hous	eholds permitted to occupy HMO under conditions of li	cence:	
Households 3 Persons	3		
Information referred to a residenti	al property tribunal or Lands Tribunal:		
None			
Decision of Tribunal	Reference number		
Summary of conditions of licence			
Electrical Works, Fire Alarm, HMO - Elec Mandatory conds, HMO - Fire Blanket, HMO - Fire Blocked MOE, HMO - Fire External Stairs 2, 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.

2017/02433/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 3 Ashes House 48A East Street Brighton RN1 1HN

Ward

Regency

Name & Address of Licence Holder	
PZR Property Ltd, Ramsgate Road Sandwich Kent CT13 9NJ	
Name & Address of Person Managing	
Workman LLP, Alliance House 12 Caxton Street London SW1H 0QS	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 3, No of Storeys = 2	
Number of Rooms Total Number of Rooms 4	
a) Sleeping 3 b) Living Rooms 1	
a) Sieeping U) Living Rooms	
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	s: 1
Trainbor of contained Flate.	, 1
Shared Amenities Number Description	
a) Kitchen 1	
b) Bathrooms/Showers 1	
c) W.C.s	
Licence Details	
Common and data:	04/44/2020
Commencement date: 22/08/2017 Duration of licence:	01/11/2020
Maximum number of persons or households permitted to occupy HMO under conditions of	of licence:
Households 3 Persons 3	
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 - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Mmanagement/Repairs, Ventilation



Licence No.

2017/02445/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 3 162 Springfield Road Brighton BN1 6DG

Ward

Preston Park

lame & Address of Licence Holder	
Ir Jacob Sims, 162 Springfield Road Brighton BN1 6DG	
lame & Address of Person Managing	
1r Tony Mayne, Lion House 27 New Road Brighton BN1 1UG	
Durangeria Daganinskian	
Property Description Short description of licensed HMO (No of storeys, etc)	
• • • • • • • • • • • • • • • • • • • •	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 3, No of Storeys = 2	
lumber of Rooms Total Number of Rooms 4	
) Sleeping b) Living Rooms 1	
lumber of Self Contained Flats: 0 Number of Non Self Cont. Flats:	1
Shared Amenities) Kitchen) Bathrooms/Showers 1) W.C.s Number Description	
icence Details	
Commencement date: 20/07/2017 Duration of licence: 01/11	/2020
Maximum number of persons or households permitted to occupy HMO under conditions of licence:	
louseholds 3 Persons 3	
nformation referred to a residential property tribunal or Lands Tribunal:	
lone	
Pecision 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



Licence No.

2017/02549/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 3 8 Powis Square Brighton BN1 3HH

Ward

Regency

Name & Address of Licence Holder	
C V Howard Investments Ltd, 52 Norfolk Square Brighton E	East Sussex BN1 2PA
Name & Address of Person Managing	
Ms Kristyna Dean, 52 Norfolk Square Brighton East Sussex	x BN1 2PA
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occup	pancy = 3, No of Storeys = 2
Number of Rooms Total Number of Ro	oms 4
a) Sleeping b) Living I	Rooms 1
	¬.,, ., ., .
Number of Self Contained Flats: 0	Number of Non Self Cont. Flats: 1
Chanal Amenities Number Description	
Shared Amenities Number Description a) Kitchen 1	OII
b) Bathrooms/Showers 1	
c) W.C.s	
C) W.O.S	
Licence Details	
00/07/0047	D 4/44/0000
Commencement date: 20/07/2017	Duration of licence: 01/11/2020
Maximum number of persons or households permitted	to occupy HMO under conditions of licence:
Households 3 Persons 3	
Tiousenous 5 Fersons 5	
Information referred to a residential property tribu	unal or Lands Tribunal:
None	
D. C.	
Decision of Tribunal	Reference number

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.

2017/02662/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

85 Stanford Avenue Brighton BN1 6FA

Ward

Preston Park

Name & Address of Licer	ice Holder	
Mrs Carol O'Connor, 85 Stanf	ord Avenue Brighton East Sussex BN1 6FA	
Name & Address of Person	on Managing	
Mr Frank O'Connor, 87 Stanfo	ord Avenue Brighton East Sussex BN1 6FA	
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 = 2	
Normalism of Dooms	Total Number of Danies 0	
Number of Rooms	Total Number of Rooms 8	
a) Sleeping 6	b) Living Rooms 2	
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.C.S		
Licence Details		
•		0.4.4.4.100.00
Commencement date:	31/07/2017 Duration of licence:	01/11/2020
Maximum number of persor	ns or households permitted to occupy HMO under conditions of li	cence:
Households 6	Persons 6	
nousenoius	reisons	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of li Additional Facilities, Fire Alarr	cence ns, HMO - Elec Mandatory 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, Other Fire Works



Licence No.

2017/02663/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

17 Seafield Road Hove BN3 2TP

Ward

Central Hove

N 0.411 (11			
Name & Address of Licence			
Regency One Ltd, 11 Radinden	Orive Hove BN3 6LB		
Name O Adduses of Danson	Managing		
Name & Address of Person			
Mr Andrew Morris, 11 Radinden	Drive Hove BN3 6LB		
Property Description			
Short description of licensed I	IMO (No of storous, otc)		
-		•	
Property Type = BEDSIT, No of	Jnits = 8, Occupancy = 8, No of Storeys =	= 2	
Number of Rooms	Total Number of Rooms 8		
a) Sleeping 4	b) Living Rooms	4	
	3, 3		
Number of Self Contained Flat	s: 0 Number o	of Non Self Cont. Flats:	1
Number of Sen Contained Flat	, and the second	n Non Sen Cont. 1 lats.	I
Shared Amenities	Number Description		
a) Kitchen	1		
b) Bathrooms/Showers	4		
c) W.C.s	4		
Licence Details			
0	05/40/0047		04/44/0000
Commencement date:	05/10/2017 Duratio	n of licence:	01/11/2020
Maximum number of persons	or households permitted to occupy HM	O under conditions of li	cence:
Households 8	Persons 8		
Information referred to a re	sidential property tribunal or Lands	s Tribunal:	
None	racinal proporty and and a Land		
Decision of Tribunal	R	Reference number	
Summary of conditions of lice	1Ce		10. 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, Management / Repairs



Licence No.

2017/02786/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat At Milligan House Port Hall Avenue Brighton RN1 5PI

Ward

Preston Park

Name & Address of Licen	ce Holder			
Mr Thomas Milligan, 76 Dyke	Road Avenue Brig	jhton East Su	ssex BN1 5LE	
Name & Address of Perso	on Managing			
1				
Property Description				
Short description of license	d HMO (No of sto	reys, etc)		
Property Type = SHARED HO	USE, No of Units	= 1, Occupan	cy = 6, No of Storeys = 2	
	_			
Number of Rooms	Total Num	nber of Roon	ns 7	
a) Sleeping 5		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	1			
b) Bathrooms/Showers c) W.C.s	2			
3) VV.C.S				
Licence Details				
Commencement date:	16/08/201	17	Duration of licence:	01/11/2020
Maximum number of nersen	a ar bauaabalda	normitted to	accumy LIMO under conditions of l	icanos
waximum number of person	s or nousenoids	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 lie				
Additional works, Fire Alarms,	HMO - Elec Mand	datory conds,	HMO - Fire Mandatory conds, HMO -	Furniture

Mandatory 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.

2017/02802/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Myrtle Cottage 1 Brunswick Mews Hove BN3 1HD

Ward

Brunswick And Adelaide

Name & Address of Licer	ice Holder		
Ms Lorraine Groves, Myrtle Co	ottage 1 Brunswick M	News Hove East Sussex BN3 1HD	
Name & Address of Perso	on Managing		
,			
Property Description			
Short description of license	d HMO (No of store)	ys, etc)	
Property Type = SHARED HC	USE, No of Units = 1	, Occupancy = 3, No of Storeys = 4	
1 3 31		, , , , ,	
Number of Rooms	Total Numbe	r of Rooms 4	
a) Sleeping 3	b)	Living Rooms 1	
Number of Self Contained F	lats:	Number of Non Self Cont. F	lats:
rumbor or com contamour		indinibol of Holl con contact	1
Shared Amenities	Number De	escription	
a) Kitchen	1	sacription	
b) Bathrooms/Showers	1		
c) W.C.s	1		
,			
Licence Details			
Commencement date:	15/11/2017	Duration of licence:	01/11/2020
Maximum number of person	ıs or households pe	rmitted to occupy HMO under condition	ns of licence:
Households 3	Persons 3		
		· · · · · · · · · · · · · · · · · · ·	
	residential proper	ty tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li HMO - Elec Mandatory conds		ystems 3, HMO - Fire Mandatory conds, H	MO - Fire

HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 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 - Repairs Ventilation 2, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Structural Fire Works



Licence No.

2017/03140/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

5 Somerhill Road Hove BN3 1RP

Ward

Goldsmid

Name & Address of Licence	Holder	
Ms Vida Jaffe, 44 Lansdowne Pla	ce Hove BN3 1HH	
Name & Address of Person	Managing	
,		
Property Description		
Short description of licensed H	MO (No of storeys, etc)	
-	E, No of Units = 1, Occupancy = 6, No of Storeys = 2	
Number of Rooms	Total Number of Rooms 9	
a) Sleeping 6	b) Living Rooms 3	
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 2 5 5	
Licence Details		
Commencement date:	23/11/2017 Duration of licence:	01/11/2020
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 tribunal 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, Structural fire works



Licence No.

2017/03151/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

3 Western Street Court 17 Western Street Brighton BN1 2PG

Ward

Brunswick And Adelaide

Name & Address of Licence Holder	
Adelphi Grace Limited, 64 The Little Adelphi 10-14 John Adam Street London WC2N 6HA	
Name & Address of Person Managing	
Carolina Blue Limited, 5 Kingscote Way Brighton East Sussex BN1 4GJ	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 4, Occupancy = 4, 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: 1
Shared Amenities Number Description	
a) Kitchen 1	
b) Bathrooms/Showers 1	
c) W.C.s	
Licence Details	
Commencement date: 22/08/2017 Duration of licence:	01/11/2020
Maximum number of persons or households permitted to occupy HMO under condition	ons of licence:
Households 0 Persons 4	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	·
Summary of conditions of licence	UMO Fire

Additional Facilities, 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



Licence No.

2017/03168/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO) 8 Marlow Road Brighton BN2 5NB

Ward

East Brighton

None Decision of Tribunal	Reference num	_
None		
Information referred to a I	residential property tribunal or Lands Tribunal:	
Households 5	Persons 5	
-	s or households permitted to occupy HMO under cond	IILIONS OF IICENCE:
Maximum number of nerses	e or households permitted to occupy UMO under cons	litions of license:
Commencement date:	04/08/2017 Duration of licence:	01/11/2020
Licence Details		
c) W.C.s	3	
b) Bathrooms/Showers	2	
a) Kitchen	2	
Shared Amenities	Number Description	
Number of Self Contained Fl	ats: 0 Number of Non Self Co	nt. Flats:
a) Sleeping 5	b) Living Rooms 1	
Number of Rooms a) Sleeping 5	Total Number of Rooms 5 b) Living Rooms 1	
-	USE, No of Units = 5, Occupancy = 5, No of Storeys = 2	
Short description of licensed	d HMO (No of storeys, etc)	
Property Description		
,		
Name & Address of Perso	on Managing	
Mr Khasru Miah, 10 Marlow Ro	oad Brighton East Sussex BN2 5NB	
Name & Address of Licen	ce Holder	
lava a R Addus a a Cli		

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory 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 Work



Licence No.

2017/03234/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

157 Preston Drove Brighton BN1 6FN

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- 1	_	ш	ıu	

Preston Park

Name & Address of Licence Holder		
Mr Michael Spurgin, 106 Dean Court Road	Brighton East Sussex BN2 7DJ	
Name & Address of Person Managin	ng	
Property Description		
Short description of licensed HMO (No c	of storeys, etc)	
	Jnits = 4, Occupancy = 4, No of Storeys = 2	
	, company , o. c.c.c.yo _	
Number of Rooms Total	Number of Rooms 6	
a) Sleeping 4	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		
e) W.C.s		
1 B. 6.9.		_
Licence Details		
Commencement date: 30/0	D8/2017 Duration of licence:	01/11/2020
Maximum number of persons or househ	nolds permitted to occupy HMO under conditions of I	icence:
————		icerice.
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 Additional Facilities, Electrical Works, Fire	Alarms HMO - Flec Mandatory conds HMO - Fire Mand	latory

conds, HMO - Furniture Mandatory 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.

2017/03240/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

59 Findon Road Brighton BN2 5NY

Ward

East Brighton

Name & Address of Licence	e Holder	
DB Sussex Investments Ltd, 2 A	shford Road Brighton East Sussex BN1 6LJ	
Name & Address of Person	Managing	
Dan Lyons, 74 Lewes Road Brig	hton East Sussex BN2 3HZ	
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 = 2	
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	2	
c) W.C.s	2	
Licence Details		
Commencement date:	17/08/2017 Duration of licence:	01/11/2020
Marrian and a second		f lineman.
waximum number of persons	or households permitted to occupy HMO under conditions o	Tilcence:
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	
HMO - Elec Mandatory conds, H	IMO - 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 - Licensing Kitchen 1, 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.

2017/03549/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Top Floor Flat 32 Stanford Road Brighton BN1 5DJ

Ward

Preston Park

Name & Address of Licen	ce Holder			
Mr Spencer Orman, 79 Hove F	Park Road Hove E	ast Sussex Bl	N3 6LL	
Name & Address of Perso	n Managing			
Dan Lyons, 74 Lewes Road Br	ighton East Susse	x BN2 3HZ		
Property Description				
Short description of licensed	d HMO (No of sto	reys, etc)		
Property Type = SHARED HO	USE, No of Units =	= 1, Occupano	cy = 5, No of Storeys = 2	
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:	1
Shared Amenities	Number	Description		
a) Kitchen	2			
b) Bathrooms/Showers	2			
c) W.C.s	3			
Licence Details				
Liconoc Dotano				
Commencement date:	05/09/201	7	Duration of licence:	01/11/2020
Mariana				
maximum number of person	s or nousenoias	permitted to	occupy HMO under conditions of li	cence:
Households 5	Persons	5		
Information referred to a I	residential prop	erty tribuna	ıl or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of lic HMO - Elec Mandatory conds,		atory conds, I	HMO - Fire Test Certificates, HMO - F	urniture

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



Licence No.

2017/03594/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Second Floor And Third Floor Flat 5 Powis Road Brighton RN1 3H.I Regency

Ward

Name & Address of Licence F	lolder	
Mr Trevor Stacey, South Lodge Sta	ables Castle Hill Rotherfield Sussex TN6 3RR	
Name & Address of Person M	anaging	
Mr Dan Lyons, 74 Lewes Road Brig	ghton 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 = 4, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 5	
a) Sleeping 4	b) Living Rooms 1	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	1
	umber Description	
a) Kitchen	1	
b) Bathrooms/Showers c) W.C.s	1	
C) W.O.S	1	
Licence Details		
Commencement date:	13/09/2017 Duration of licence:	01/11/2020
Maximum number of persons or	households permitted to occupy HMO under conditions of lie	cence:
	,	
Households 4 Per	rsons 4	
Information referred to a resid	dential property tribunal or Lands Tribunal:	
None	somal property tribunal of Lands 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 Mandatory conds, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds



Licence No.

2017/03779/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

36 Slinfold Close Brighton BN2 0YS

Ward

East Brighton

ame & Address of Lice	nce Holder		
Ir Nick Ainley, 27 Chailey Av	venue Rottingdean East Suss	sex BN2 7GH	
Name & Address of Pers	on Managing		
Property Description	11110 (1)		
•	ed HMO (No of storeys, etc)		
roperty Type = SHARED HO	OUSE, No of Units = 1, Occu	pancy = 4, No of Storeys = 3	
Number of Rooms	Total Number of Ro	ooms 5	
a) Sleeping 4	b) Living		
i) clooping	5) Living	Troome	
Number of Self Contained F	Flats: 0	Number of Non Self Cont. Flats:	1
dumber of Sen Contained i	iats.	Number of Non Sen Cont. Flats.	1
Shared Amenities	Number Descript	tion	
a) Kitchen	1		
) Bathrooms/Showers	1		
) W.C.s	2		
icanas Dataila			
icence Details			
Commencement date:	10/10/2017	Duration of licence:	01/11/2020
laximum number of perso	ns or households permitted	d to occupy HMO under conditions of	licence:
louseholds 4	Persons 4		
nformation referred to a	residential property trib	unal or Lands Tribunal:	
lone			
Decision of Tribunal		Reference number	
Summary of conditions of I Electrical Work, Fire Alarms,		s, HMO - Fire Mandatory conds, HMO - I	Furniture

Electrical Work, 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.

2017/03936/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

30 Grantham Road Brighton BN1 6EE

Ward

Preston Park

Name & Address of Licer	nce Holder			
Mr A Longley & Ms N Gupta, 4		cle Durham NO	27705 USA	
Name & Address of Perso	on Managing			
Home Leasing Ltd, 64 Queens	s Road Brighton I	East Sussex Bi	N1 3XD	
Property Description				
Short description of license	d HMO (No of st	oreys, etc)		
Property Type = SHARED HC	USE, No of Units	s = 4, Occupan	cy = 4, No of Storeys = 3	
Number of Rooms	Total Nu	mber of Room	ıs 5	
a) Sleeping 4		b) Living Ro	oms 1	
a) clooping		b) Living i to		
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:	05/02/20	018	Duration of licence:	01/11/2020
Maximum number of person	s or households	s permitted to	occupy HMO under conditions of I	icence:
	_			
Households 4	Persons	4		
Information referred to a	residential pro	perty <u>tribuna</u>	al or Lands Trib <u>unal:</u>	
None		. ,		
Decision of Tribunal			Reference number	
Summary of conditions of li HMO - Elec Mandatory conds		m Systems 3, I	HMO - Fire Blanket, HMO - Fire Doors	s 1, HMO

HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 3, HMO - Fire Blanket, HMO - Fire Doors 1, HMO - Fire Doors 3, HMO - Fire Doors 5, 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



Licence No.

2017/03939/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

75 Tamworth Road Hove BN3 5FH

Ward

Westbourne

No O Address of Proceedings				
Name & Address of Licence Holder				
Mr Hugo Robertson, First Floor Flat 5 Carlisle Road Hove East Sussex BN3 4FP				
Name & Address of Person Managing				
Ms Jenny Hau, 24-26 Meeting House Lane Brighton East Sussex BN1 1HB				
ivis definity flau, 24-20 ivideding flouse Lane Brighton Last Sussex Biv Fifth				
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 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: 27/09/2017 Duration of licence: 01/11/2020				
Maximum number of persons or households permitted to occupy HMO under conditions of licence:				
Households 4 Persons 4				
Information referred to a residential property tribunal or Lands Tribunal:				
None				
Decision of Tribunal Reference number				

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 Work



Licence No.

2017/03941/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

46 Westbourne Villas Hove BN3 4GG

Ward

Westbourne

Name & Address of Licen	ce Holder				
Dr Ralph Levy, 17 Longwood (5 0EB			
Name & Address of Perso	n Managing				
Ms Anne Sweeney, 94 Church	n Road Hove Eas	t Sussex BN3	2EB		
Property Description					
Short description of license	d HMO (No of sto	oreys, etc)			
Property Type = Not Assigned	, No of Units = 2,	Occupancy =	2, No of Storeys = 3		
Number of Rooms	Total Nur	nber of Room	s 2		
a) Sleeping 2		b) Living Ro	oms 2		
		· , J			
Number of Self Contained FI	ats:	0	Number of Non Self Cont. Flats:	1	
Shared Amenities	Number	Description			
a) Kitchen	2	•			
b) Bathrooms/Showers	1				
c) W.C.s	1				
Linear Britaile					
Licence Details					
Commencement date:	11/12/20	17	Duration of licence:	01/11/2020	
Maximum number of person	e or households	normitted to	occupy HMO under conditions of li	conco:	
	or mousemonds	permitted to	occupy rimo under conditions of it	cence.	
Households 2	Persons	2			
Information referred to a residential property tribunal or Lands Tribunal:					
	residentiai proj	perty tribuna	al or Lands Tribunal:		
None			Deference number		
Decision of Tribunal Reference number					
Summary of conditions of licence Additional Facilities, Electrical Reports, Fire - Under Stairs 1, HML041, HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 5, HMO - Fire Doors 5, HMO - Fire Emergency Lighting 2, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Cleaning, 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.

2017/04072/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

53 Argyle Road Brighton BN1 4QB

Ward

Preston Park

Name & Address of Licen	ce Holder		
Ms Alice Marno, C/o DeMachi	n Ltd 235 Temple Chambers	3-7 Temple Avenue London EC4Y	DDA
Name & Address of Person			
DeMachin Ltd, Miss Diana Ma	chin 235 Temple Chambers	3-7 Temple Avenue London EC4Y ()DA
Property Description			
Short description of license	d HMO (No of storeys, etc)		
Property Type = SHARED HO	USE, No of Units = 1, Occup	pancy = 4, No of Storeys = 3	
Number of Rooms	Total Number of Ro	ooms 5	
a) Sleeping 4	b) Living	Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flat	ts: 1
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Descripti	ion	
Licence Details			
Commencement date:	15/11/2017	Duration of licence:	01/11/2020
Maximum number of person	s or households permitted	to occupy HMO under conditions	of licence:
Households 4	Persons 4		
Information referred to a	residential property trib	unal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Notices 1, HMO - Furniture Ma Mandatory conds, HMO - Prop	atory conds, HMO - Fire Blar andatory conds, HMO - Gas perty Maint Mandatory conds	nket, HMO - Fire Mandatory conds, H Mandatory conds, HMO - Property Cl s, HMO - RubbishRecyc Mandatory co ment / Repairs, Other Fire Works, Str	hges onds, HMO -



Licence No.

2017/04090/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 3
Kings Gate
10 North Street
Brighton
RN1 1FR

Ward

Regency

Name & Address of Licen	ce Holder			
Redevco UK 1 BV, C/o Redev	co UK Ltd 1 James	s Street Londo	on W1U 1DR	
Name & Address of Perso	n Managing			
Carr Priddle Management Ltd,	34 Ship Street Bri	ighton BN1 1/	AD	
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 = 2	
		· ·	•	
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:	1
Shared Amenities	Number	Description		
a) Kitchen	2			
b) Bathrooms/Showers	5			
c) W.C.s	5			
Licence Details				
License Betans				
Commencement date:	06/11/201	17	Duration of licence:	01/11/2020
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 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 Mandatory conds, HMO - Furniture	

HMO - Elec Mandatory conds, HMO - Fire Blanket, 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.

2017/04099/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Top Floor Maisonette 37 Dyke Road Drive Brighton BN1 6AJ

Ward

Preston Park

Nama P Addraga of Liganas He	older	
Name & Address of Licence Ho		
ivirs Shelia Graysmark, 35 Ringles C	Cross Uckfield East Sussex TN22 1HG	
Name & Address of Person Ma	anaging	
Name & Address of Ferson Ma	magmig	
,		
Property Description		
Short description of licensed HMC	O (No of storeys, etc)	
-	No of Units = 1, Occupancy = 3, No of Storeys = 2	
Floperty Type - SHANED HOUSE,	No of Offics – 1, Occupancy – 3, No of Storeys – 2	
Number of Rooms	Total Number of Rooms 3	
a) Sleeping 3	b) Living Rooms	
Number of Self Contained Flats:	0 Number of Non Self Cont. Fla	ats: 1
Shared Amenities Nur	mber Description	
a) Kitchen	1	
' — — — — — — — — — — — — — — — — — — —	1	
c) W.C.s	1	
License Deteile		
Licence Details		
Commencement date:	27/04/2018 Duration of licence:	01/11/2020
Maximum number of persons or h	nouseholds permitted to occupy HMO under conditions	of licence:
Households 3 Pers	sons 3	
Information referred to a reside	ential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence		
	Fig. Marcheter and LIMO Fig. 1	

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory 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.

2017/04179/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

41 Whitehawk Crescent Brighton BN2 5FD

Ward

East Brighton

Name & Address of Licen		
Pillbright Ltd, 61 Manor Road E	Brighton East Sussex BN2 5EE	
Name & Address of Perso	n Managing	
Property Description		
Property Description	LUMO (No of storous sto)	
Short description of licensed	•	
roperty Type = SHARED HO	USE, No of Units = 1, Occupancy = 4, No	of Storeys = 2
Number of Rooms	Total Number of Rooms 4	
a) Sleeping 3	b) Living Rooms	1
, , ,	, 3	
Number of Self Contained Fl	ats: 0 Number	r of Non Self Cont. Flats:
Shared Amenities	Number Description	
i) Kitchen	1	
) Bathrooms/Showers	1	
) W.C.s	2	
icence Details		
icence Details		
Commencement date:	20/11/2017 Durati	ion of licence: 01/11/2020
Maximum number of persons	s or households permitted to occupy H	IMO under conditions of licence:
Households 4	Persons 4	
nformation referred to a r	esidential property tribunal or Land	ds Tribunal:
lone		
Decision of Tribunal		Reference number
Summary of conditions of lic	ence	
tummary of conditions of lic		a HMO Eurnitura Mandatary conda

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.

2017/04195/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

12 Norfolk Road Brighton BN1 3AA

Ward

Brunswick And Adelaide

Name & Address of Licent	e Holder	
Mr Michael Holmes, 1 St Lawre		
Wildiaci Florincs, 1 of Lawre	Tice way London 6003 0101	
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 = 4, Occupancy = 4, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 5	
a) Sleeping 4	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	2	
c) W.C.s	2	
Licence Details		
Commencement date:	20/11/2017 Duration of licence :	01/11/2020
Maximum number of persons	or households permitted to occupy HMO under condition	ons of licence:
Households 4	Persons 4	
Information referred to a re	esidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference numbe	er
Summary of conditions of lic	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 Work



Licence No.

2017/04400/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 4 191 Eastern Road Brighton BN2 5BB

Ward

East Brighton

Name & Address of Licence Holder	r	
Mr Michael Stimpson, 27 Old Shoreham F	Road Brighton BN1 5DQ	
Name & Address of Person Managi	ing	
Property Description		
Short description of licensed HMO (No	of storeys, etc)	
	f Units = 1, Occupancy = 4, No of Storeys = 2	
Number of Rooms Tota	al Number of Rooms 4	
a) Sleeping 4	b) Living Rooms 1	
ī		
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	1
N	Post of the	
Shared Amenities Number a) Kitchen 1	Description	
b) Bathrooms/Showers 1		
2) W.C.s		
Licence Details		
Commencement date: 23/	U11/2017 Duration of licence:	01/11/2020
Maximum number of persons or house	eholds permitted to occupy HMO under conditions of li	icence:
Households 4 Persons	4	
nformation referred to a residentia	al property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence	ory 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.

2017/04423/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

4 Norfolk Buildings Brighton BN1 2PZ

Ward

Regency

	waru Regency
Name & Address of Licence Holder	
Ms Tracy Huxtable, 4 Norfolk Buildings Brighton East Sussex	BN1 2PZ
Name & Address of Person Managing	
Mr Andrew Foster, 42 Buckles Way Banstead Surrey SM7 1HI	D
Duonauty Description	
Property Description Short description of licensed HMO (No of storeys, etc)	
Property Type = Not Assigned, No of Units = 1, Occupancy = 3	3 No of Storevs = 3
Troperty Type – Not Assigned, No of Offics – 1, Occupancy – 3	3, 140 01 3toleys – 3
Number of Rooms Total Number of Room	ns 4
a) Sleeping b) Living Roo	oms 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 1 1 c) W.C.s	
Licence Details	
Commencement date: 18/01/2018	Duration of licence: 01/11/2020
Maximum number of persons or households permitted to	occupy HMO under conditions of licence:
Households 3 Persons 3	
Information referred to a residential property tribuna	al or Lands Tribunal:
None	
Decision of Tribunal	Reference number
Summary of conditions of licence Electrical Works, Fire Alarms, HMO - Elec Mandatory conds, H	HMO - Fire Mandatory conds, HMO - Furniture

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.

2017/04442/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Top Floor Flat 78 Beaconsfield Road Brighton BN1 6DD

Ward

Preston Park

Name & Address of Licer	nce Holder			
Mrs Helen Leigh, 51 Larkhall I		V4 6HT		
Name & Address of Perso	on Managing			
,				
Property Description				
Short description of license	d HMO (No of s	storeys, etc)		
Property Type = SHARED HC	USE, No of Uni	its = 1, Occupar	ncy = 3, No of Storeys = 3	
		· ·	<u> </u>	
Number of Rooms	Total N	umber of Roon	ns 4	
a) Sleeping 3		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			
b) Bathrooms/Showers	2			
c) W.C.s	2			
Licence Details				
Licence Details				
Commencement date:	05/12/	2017	Duration of licence:	01/11/2020
Maximum number of person	s or househole	ds permitted to	occupy HMO under conditions of	licence:
Households 3	Persons	3		
Information referred to a	residential pr	operty tribun	al or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of li	cence			
		andatory conde	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 - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Work



Licence No.

2017/04453/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 4 53 Montpelier Road Brighton BN1 3BA

Ward

Regency

Name & Address of Licence Holder	r	
Mrs Helen Leigh, 51 Larkhall Rise Londor	n SW4 6HT	
Name & Address of Person Managi	ing	
Property Description		
Short description of licensed HMO (No	of storeys, etc)	
	f Units = 1, Occupancy = 3, No of Storeys = 2	
Topolly Type Of WILLES TIGGGE, 110 of	i, company o, no or coreyo 2	
Number of Rooms Tota	al Number of Rooms 4	
a) Sleeping 3	b) Living Rooms 1	
г		
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	1
Shared Amenities Number a) Kitchen 1	Description	
b) Bathrooms/Showers 1		
c) W.C.s 1		
Licence Details		
Licence Details		
Commencement date: 06/	/12/2017 Duration of licence:	01/11/2020
Maximum number of persons or house	eholds permitted to occupy HMO under conditions of l	icence:
		icerice.
Households 3 Persons	3	
nformation referred to a residentia	ıl property tribunal or Lands Tribunal:	
None	reporty mountain or Eurido Prisanti.	
Decision of Tribunal	Reference number	
Summary of conditions of licence	e Mandatory 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, Other Fire Work



Licence No.

2017/04500/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 2 Montpelier Apartment Montpelier Road Brighton RN1 2LY

Ward

rd Regency

Name & Address of Licer	ice Holder		
Brighton Holiday Flats Ltd, C/o	The Property Pod 53A Wes	tern Road Hove BN3 1JD	
Name & Address of Person			
Ms Kimberley Dixon, The Prop	perty Pod 53A Western Road	Hove BN3 1JD	
Property Description			
Short description of license	d HMO (No of storeys, etc)		
Property Type = SHARED HC		anay - 3 No of Starays - 3	
Floperty Type - SHARED HO	OSE, NO OF OTHES - 1, Occupa	aricy – 3, No or Storeys – 3	
Number of Rooms	Total Number of Roo	oms 4	
a) Sleeping 3	b) Living F	Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats	: 1
Shared Amenities	Number Description	on	
a) Kitchen	1		
b) Bathrooms/Showers c) W.C.s	3		
0, 11.0.0			
Licence Details			
Commencement date:	14/12/2017	Duration of licence:	01/11/2020
	,		
Maximum number of person	s or households permitted	to occupy HMO under conditions o	f licence:
Households 3	Persons 3		
Information referred to a	residential property tribu	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
	atory conds, HMO - Fire Alarn	n Systems 5, HMO - Fire Blanket, HM - Gas Mandatory conds HMO - Pron	

Fire Alarm, HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 5, 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 3, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Other Fire Works



Licence No.

2017/04506/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 8 Montpelier Apartment Montpelier Road Brighton RN1 21 Y

Ward

Regency

Name & Address of Licen	ce Holder		
Brighton Holiday Flats Ltd, C/c	The Property Pod 53A V	Vestern Road Hove East Sussex BN3 1	JD
Name & Address of Perso	n Managing		
The Property Pod, Kim Dixon	53A Western Road HOVE	E East Sussex BN3 1JD	
Property Description			
Short description of licensed	d HMO (No of storeys, e	tc)	
Property Type = SHARED HO	USE, No of Units = 1, Oc	cupancy = 3, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 4	
a) Sleeping 3	D) LIVI	ng Rooms 1	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Fla	ts: 1
Observat America	November - Decem	land and	
Shared Amenities a) Kitchen	Number Descri	iption	
b) Bathrooms/Showers	2		
c) W.C.s	3		
Licence Details			
Commencement date:	14/12/2017	Duration of licence:	01/11/2020
commencement date.	14/12/2017	buration of licence.	01/11/2020
Maximum number of person	s or households permit	ted to occupy HMO under conditions	of licence:
Households 3	Persons 3		
nousenoius 0	0		
Information referred to a	residential property ti	ibunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Ceilings 2, HMO - Fire Mandat Gas Mandatory conds, HMO -	atory conds, HMO - Fire A tory conds, HMO - Fire No Property Chges Mandato	alarm Systems 5, HMO - Fire Blanket, Hotices 1, HMO - Furniture Mandatory coory conds, HMO - Property Maint Mandandatory conds, HMO - Tenant Agrmnt M	nds, HMO - tory conds,
	•		-

conds, Other Fire Works



Licence No.

2017/04508/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 9 Montpelier Apartment Montpelier Road Brighton RN1 21 Y Regency

Ward

Name & Address of Licence	e Holder		
Brighton Holiday Flats Ltd, C/o	The Property Pod 53A We	estern Road Hove BN3 1JD	
Name & Address of Person	n Managing		
Ms Kimberley Dixon, The Prope	erty Pod 53A Western Roa	ad Hove BN3 1JD	
Property Description			
Short description of licensed	HMO (No of storeys, etc	c)	
Property Type = SHARED HOL	JSE, No of Units = 1, Occi	upancy = 3, No of Storeys = 3	
Number of Rooms	Total Number of R	Rooms 4	
a) Sleeping 3		g Rooms 1	
a) Sieeping	b) Living	g Noons	
Number of Self Contained Fla	uts: 0	Number of Non Solf Cont Flater	1
Number of Self Contained Fla	.ts. 0	Number of Non Self Cont. Flats:	I
Shared Amenities	Number Descrip	ation	
a) Kitchen	1	Alon	
b) Bathrooms/Showers	3		
c) W.C.s	3		
,			
Licence Details			
Commencement date:	14/12/2017	Duration of licence:	01/11/2020
Commencement date.	14/12/2017	buration of ficerice.	01/11/2020
Maximum number of persons	or households permitte	ed to occupy HMO under conditions of I	icence:
Households 3	Persons 3		
Information referred to a re	esidential property tri	bunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice	ence		
Fire Alarm, HMO - Elec Mandat	ory conds, HMO - Fire Ala	arm Systems 5, HMO - Fire Blanket, HMO	
•		e Mandatory conds, HMO - Gas Mandatory y Maint Mandatory conds, HMO - Repairs	
		Andatory conds, HMO - Tenant Agrmnt M	

conds, Other Fire Works



Licence No.

2017/04512/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 10 Montpelier Apartment Montpelier Road Brighton RN1 21 Y

Ward

Regency

Name & Address of Licen	ce Holder		
Brighton Holiday Flats Ltd, C/o	The Property Pod 53A	Western Road Hove BN3 1JD	
Name & Address of Perso			
Ms Kimberley Dixon, The Prop	erty Pod 53A Western F	Road Hove East Sussex BN3 1JD	
Property Description			
Short description of licensed	HMO (No of storeys	atc)	
·	-	ccupancy = 3, No of Storeys = 3	
Floperty Type – SHANED HO	JSE, NO OI OIIIIS – 1, OI	ccupancy – 3, No or Storeys – 3	
Number of Rooms	Total Number of	f Rooms 4	
a) Sleeping 3	b) Liv	ving Rooms 1	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number Desc	ription	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commononment data:	14/12/2017	Duration of licenses	04/44/2020
Commencement date:	14/12/2017	Duration of licence:	01/11/2020
Maximum number of persons	s or households permi	tted to occupy HMO under conditions	of licence:
Households 3	Persons 3	7	
Tiouscrioius	0		
Information referred to a r	esidential property t	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Mandatory conds, HMO - Fire HMO - Property Chges Manda	ntory conds, HMO - Fire Notices 1, HMO - Furniti tory conds, HMO - Prop	Alarm Systems 5, HMO - Fire Blanket, H ure Mandatory conds, HMO - Gas Manda erty Maint Mandatory conds, HMO - Rep HMO - Tenant Agrmnt Mandatory conds	atory conds, airs

Works



Licence No.

2017/04516/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 11 Montpelier Apartment Montpelier Road Brighton RN1 21 Y Regency

Ward

Name & Address of Licen	ce Holder				
Brighton Holiday Flats Ltd, C/c	The Property Pod 53A V	Vestern Road Hove BN3 1JD			
Name & Address of Perso	on Managing				
Ms Kimberley Dixon, The Prop		pad Hove BN3 1JD			
Property Description					
Short description of licensed	d HMO (No of storeys, e	tc)			
Property Type = SHARED HO	USE, No of Units = 1, Oc	cupancy = 3, No of Storeys = 3			
Number of Rooms	Total Number of	Rooms 4			
a) Sleeping 3	b) Livi	ng 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 Descr 1 2 2	iption			
Licence Details					
Commencement date:	14/12/2017	Duration of licence:	01/11/2020		
Maximum number of person	s or households permit	ted to occupy HMO under conditions	s of licence:		
Households 3	Persons 3				
Information referred to a	esidential property to	ibunal or Lands Tribunal:			
None					
Decision of Tribunal		Reference number			
HMO - Furniture Mandatory co	HMO - Fire Blanket, HMonds, HMO - Gas Mandat	O - Fire Mandatory conds, HMO - Fire bory conds, HMO - Property Chges Man	idatory conds,		

HMO - Property Maint Mandatory conds, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Other Fire Works



Licence No.

2017/04519/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 12 Montpelier Apartment Montpelier Road Brighton RN1 21 Y

Ward

Regency

Name & Address of Licen	ce Holder		
Brighton Holiday Flats Ltd, C/c	The Property Pod 53A	Western Road Hove BN3 1JD	
Name & Address of Perso			
Ms Kimberley Dixon, The Prop	erty Pod 53A Western F	Road Hove BN3 1JD	
Property Description			
Short description of licensed	HMO (No of storeys	etc)	
-	-	ccupancy = 3, No of Storeys = 3	
Froperty Type – STIANED TO	USE, NO OF OTHES - 1, O	ccupancy – 3, No or Storeys – 3	
Number of Rooms	Total Number o	f Rooms 4	
a) Sleeping 3	b) Li	ving Rooms 1	
Number of Self Contained Fl	ats: 0	Number of Non Self Cont. Fla	ts: 1
Shared Amenities	Number Desc	ription	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	14/12/2017	Duration of licence:	01/11/2020
Commencement date.	14/12/2017	Duration of ficence.	01/11/2020
Maximum number of person	s or households perm	itted to occupy HMO under conditions	of licence:
Households 3	Persons 3		
Information referred to a	residential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Mandatory conds, HMO - Fire Mandatory conds, HMO - Prop	atory conds, HMO - Fire Notices 1, HMO - Fire V perty Chges Mandatory o	Alarm Systems 5, HMO - Fire Blanket, H Valls 1, HMO - Furniture Mandatory condi- conds, HMO - Property Maint Mandatory y conds, HMO - Tenant Agrmnt Mandato	s, HMO - Gas conds, HMO -

Management / Repairs



Licence No.

2017/04520/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Apartment 3 2 Western Terrace Brighton BN1 2LD

Ward

Regency

Name & Address of Licence Holder					
Brighton Holiday Flats Ltd, C/o The Property Pod 53/	A Western Road Hove BN3 1JD				
Name & Address of Person Managing					
Ms Kimberley Dixon, C/o The Property Pod 53A Wes	tern Road Hove BN3 1JD				
Property Description					
Short description of licensed HMO (No of storeys	, etc)				
Property Type = SHARED HOUSE, No of Units = 1,	Occupancy = 3, No of Storeys = 3				
Number of Rooms Total Number	of Rooms 4				
a) Sleeping b) L	iving Rooms 1				
Number of Self Contained Flats: 0	Number of Non Self Cont. Flats: 1				
	cription				
a) Kitchen 1					
b) Bathrooms/Showers 3 c) W.C.s 3					
o) **.o.s					
Licence Details					
Commencement date: 14/12/2017	Duration of licence: 01/11/2020				
Maximum number of persons or households pern	nitted to occupy HMO under conditions of licence:				
Households 3 Persons 3	<u>_</u>				
Information referred to a residential property	tribunal or Lands Tribunal:				
None	Tribunar of Earlas Tribunar.				
Decision of Tribunal	Reference number				
Summary of conditions of licence Fire Alarm, HMO - Elec Mandatory conds, HMO - Fire	e Alarm Systems 5, HMO - Fire Blanket, HMO - Fire				
Mandatory conds, HMO - Fire Notices 1, HMO - Furn	iture Mandatory conds, HMO - Gas Mandatory conds,				
HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO - Repairs Bathroom					

17, HMO - Repairs Ventilation 3, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management / Repairs, Structural Fire Works



Licence No.

2017/04673/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

19 Sudeley Place Brighton BN2 1HF

Ward

East Brighton

Name & Address of Licence Holder	
Mr Duncan Lloyd-James, 62 Richmond Street Brighton BN2 9PE	
Name & Address of Person Managing	
Oakley Lettings, 3 North Road Brighton BN1 1YA	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 3, No of Storeys = 2	
Number of Rooms Total Number of Rooms 4	
a) Sleeping b) Living Rooms	
Number of Self Contained Flate.	. 0
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: 04/01/2018 Duration of licence:	01/11/2020
Mariana and the state of the st	£ 11
Maximum number of persons or households permitted to occupy HMO under conditions o	r licence:
Households 3 Persons 3	
Information referred to a residential representative and and Tribunal	
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	

Fire Alarms, HMO - Elec Mandatory conds, HMO - Fire Alarm Systems 6, HMO - Fire Blanket, HMO - Fire Doors 2, HMO - Fire Doors 3, HMO - Fire Doors 5, HMO - Fire Doors 7, HMO - Fire Mandatory conds, HMO -Furniture Mandatory conds, HMO - Gas Mandatory conds, HMO - Licensing Kitchen 6, HMO - Licensing Loft Insulation, HMO - Property Chges Mandatory conds, HMO - Property Maint Mandatory conds, HMO -Repairs Drainage 2, HMO - Repairs Windows 1, HMO - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Management/repairs





Licence No.

2017/04795/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

First Floor Flat 56 Springfield Road Brighton BN1 6DE

Ward

Preston Park

Name & Address of Licenc	e Holder		
Mr Martyn Allen, 49 Springfield		ussex BN1 6DF	
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, O	occupancy = 3, No of Storeys = 2	
Number of Rooms	Total Number o	of Rooms 4	
a) Sleeping 3	D) Li	ving Rooms 1	
Normalis and Colf Countries of Florida	4	Number of New Oals Coast El	-4
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Fla	ats:1
Shared Amenities	Number Desc	cription	
a) Kitchen	1	, , , , , , , , , , , , , , , , , , ,	
b) Bathrooms/Showers	1		
c) W.C.s	2		
Licence Details			
Commencement date:	15/12/2017	Duration of licence:	01/11/2020
Maximum number of persons	or nousenoids perm	itted to occupy HMO under conditions	S OT IICENCE:
Households 3	Persons 3		
Information referred to a re	esidential property	tribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lice		aanda LIMO. Euraitura Mandatan sana	da LIMO. Caa

HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory 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.

2017/04816/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

61A Preston Street	
Brighton	
BN1 2HE	

			Ward	Rege	ncy
Name & Address of Licen	ice Holder				
Blencorporation Ltd, 10 Prince	: Albert Street I	Brighton East Sus	sex BN1 1HE		
Name & Address of Person			5114 411 5		
Ms Vashikeh Clarke, 10 Prince	a Albert Street	Brighton East Sus	ssex BN1 1HE		
Property Description					
Short description of license	d HMO (No of	storeys, etc)			
Property Type = BEDSIT, No	of Units = 4, O	ccupancy = 4, No	of Storeys = 3		
Number of Rooms	Total N	lumber of Room	s 4		
a) Sleeping 4	Totali	b) Living Roo			
a) Sieeping		b) Living Not)IIIS <u>I</u>	I	
Number of Self Contained F	lats:	0	Number of N	Ion Self Cont. Flats:	1
		-			
Shared Amenities	Number	Description			
a) Kitchen	1				
b) Bathrooms/Showers c) W.C.s	2				
C) VV.C.S					
Licence Details					
Commencement date:	15/12/	/2017	Duration o	of licence:	01/11/2020
Commoncomone dato.	10/12/	2011	Daration		01/11/2020
Maximum number of person	s or househo	lds permitted to	occupy HMO	under conditions of I	icence:
Households 4	Persons	4			
Information referred to a	residential p	roperty tribuna	ıl or Lands T	ribunal:	
None					
Decision of Tribunal			Refe	erence number	
Summary of conditions of lie HMO - Elec Mandatory conds,		andatory conds, I	HMO - Furnitur	e Mandatory conds, Hľ	MO - 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.

2017/04871/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

18A Blatchington Road Hove BN3 3YN

Ward

Central Hove

				3311.01	
Name & Address of Licent	ce Holder				
First Charterhouse Investments	s Limited, 257 Pres	ston Road Bri	ghton East S	Sussex BN1 6SE	
Name & Address of Perso	n Managing				
Jan Jones T/as Kudos Venture	s, 28 St Aubyns Ho	ove East Sus	sex BN3 2T	D	
Property Description					
Short description of licensed	i HMO (No of store	eys, etc)			
Property Type = SHARED HOL	JSE, No of Units =	1, Occupano	cy = 4, No of	Storeys = 3	
		-	<u>-</u>		
Number of Rooms	Total Numb	ber of Room	s 4		
a) Sleeping 4		b) Living Roo	oms 1	1	
Number of Self Contained Fla	ats:	0	Number o	f Non Self Cont. Flats:	1
Shared Amenities	Number I	Description			
a) Kitchen	1				
b) Bathrooms/Showers	1				
c) W.C.s	1				
Licence Details					
0	07/04/004/	0	Dti		04/44/0000
Commencement date:	27/04/2018	8	Duratio	n of licence:	01/11/2020
Maximum number of persons	s or households p	permitted to	оссиру НМ	O under conditions of l	cence:
	_				
Households 40	Persons	4			
Information referred to a r	residential prope	ortv tribuna	l or Lands	Tribunal:	
	esidentiai prope	erty tribuna	ii Oi Laiius	Tribuilai.	
None			D.	oforonoo numbor	
Decision of Tribunal			K	eference number	
Summary of conditions of lic HMO - Elec Mandatory conds, - Fire Doors 5, HMO - Fire Doo Mandatory conds, HMO - Gas	HMO - Fire Alarm ors 7, HMO - Fire G	Seneral 1, HM	IO - Fire Ma	ndatory conds, HMO - Fu	rniture

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



Licence No.

2017/04892/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

First And Second Floor Flat 24 Norfolk Square Brighton BN1 2PD

Ward

Regency

Name & Address of Licenc	e Holder			
First Charterhouse Investments	Limited, 257 Pre	eston Road Br	ighton East Sussex BN1 6SE	
Name & Address of Persor	n Managing			
Jan Jones T/a Kudos Ventures,	28 ST Aubyns F	Hove East Sus	sex BN3 2TD	
Property Description				
Short description of licensed	HMO (No of sto	reys, etc)		
Property Type = SHARED HOU	SE, No of Units	= 1, Occupan	cy = 3, No of Storeys = 2	
Number of Decision	T-4-1 No	. h f D		
Number of Rooms	i otai nun	nber of Room		
a) Sleeping		b) Living Ro	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	2			
c) W.C.s	2			
Licence Details				
Commencement date:	27/04/20	18	Duration of licence:	01/11/2020
Maximum number of persons	or households	nermitted to	occupy HMO under conditions of li	icence:
			cocapy rime under conditions of it	iccinco.
Households 3	Persons	3		
Information referred to a re	sidential prop	perty tribuna	al or Lands Tribunal:	
None				
Decision of Tribunal			Reference number	
Summary of conditions of lice				
			O - Fire Alarm Systems 3, HMO - Fire	
			, HMO - Fire General 1, HMO - Fire N tory conds, HMO - Property Chges Ma	
			shRecyc Mandatory conds HMO - Te	

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



Licence No.

2017/05044/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

87 Shirley Street Hove BN3 3WH

Ward

Goldsmid

Name & Address of Licence Holder				
Mr Paul Derham, 12 Newtown Road Hove B	3N3 6AB			
Name & Address of Person Managing	g			
,				
Property Description				
Short description of licensed HMO (No of	f storeys, etc)			
Property Type = SHARED HOUSE, No of U	nits = 4, Occupancy = 4, No of Storeys = 3			
Number of Rooms Total	Number of Rooms 6			
a) Sleeping 4	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				
License Deteile				
Licence Details				
Commencement date: 06/02	2/2018 Duration of licence:	01/11/2020		
Maximum number of persons or househo	olds permitted to occupy HMO under conditions of l	icence:		
Households 4 Persons	4			
7 1 0130113	·			
Information referred to a residential p	property tribunal or Lands Tribunal:			
None				
Decision of Tribunal	Reference number			
Common of conditions of lines				
Summary of conditions of licence Fire Alarm, HMO - Flee Mandatory conds, H	HMO - Fire Mandatory 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 - RubbishRecyc Mandatory conds, HMO - Tenant Agrmnt Mandatory conds, Loft Insulation, Management/Repairs, Ventilation



Licence No.

2017/05049/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 3 29 Ventnor Villas Hove BN3 3DA

Ward

Central Hove

Name & Address of Licence Holder		
Mr Stuart Scott, 149 Goldstone Crescent Hove Eas	t Sussex BN3 6BB	
Name & Address of Person Managing		
,		
Property Description		
Short description of licensed HMO (No of storey	vs, etc)	
Property Type = SHARED HOUSE, No of Units = 1	, Occupancy = 4, No of Storeys = 2	
Number of Decree	work Dooming	
Number of Rooms Total Numbe		
a) Sleeping 4 b)	Living Rooms 1	
Number of Self Contained Flats:	Number of Non Self Cont. Flats:	1
Shared Amenities Number De		
Shared Amenities Number Do	escription	
b) Bathrooms/Showers 3		
c) W.C.s		
Licence Details		
07/02/2010	Duration of linears	04/44/2020
Commencement date: 07/02/2018	Duration of licence:	01/11/2020
Maximum number of persons or households pe	rmitted to occupy HMO under conditions of li	cence:
Households 0 Persons 4		
Tiousenous 0 Fersons 4		
Information referred to a residential proper	ty tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence	ony conde HMO - Furniture Mandatory conde HN	MO - Gas



Licence No.

2017/05052/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

44 Shirley Street Hove BN3 3WJ

Ward

Goldsmid

Name & Address of Licence Ho		
Mr Mark Weston, 9 Nevill Avenue H	ove East Sussex BN37NB	
Name of Address of Brown Ma		
Name & Address of Person Ma	naging	
,		
Property Description		
Short description of licensed HMC	(No of storage atc)	
•		
Property Type = SHARED HOUSE, I	No of Units = 4, Occupancy = 4, No of Storeys = 3	
Number of Rooms	Total Number of Rooms 5	
a) Sleeping 4	b) Living Rooms	
, , , ,	, ,	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	1
rambor of con contamour late.	Trainistr of Non Con Contain late.	
Shared Amenities Nun	nber Description	
a) Kitchen	1	
b) Bathrooms/Showers	2	
c) W.C.s	2	
Licence Details		
Licence Details		
Commencement date:	06/02/2018 Duration of licence:	01/11/2020
Maximum number of persons or h	ouseholds permitted to occupy HMO under conditions of I	icence:
Households 4 Pers	ons 4	
1 613		
Information referred to a reside	ential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence	conds_HMO - Fire Mandatory conds_HMO - Furniture Mandat	ory conde

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.

2017/05153/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

3A Beaconsfield Parade Brighton BN1 6DN

Ward

Preston Park

Name & Address of Licence Holder
Ms Ann-Marie Boon, 23 Church Lane Southwick BN42 4GB
Name & Address of Person Managing
0 & L Property Services, The Old Warehouse 2 Ashford Road Brighton BN1 6LJ
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 2
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
Shared Amenities Number Description 1
b) Bathrooms/Showers 5
5) W.C.s 5
Licence Details
Commencement date: 20/12/2017 Duration of licence: 01/11/2020
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 HMO - Flec Mandatory conds. HMO - Fire Mandatory conds. HMO - Furniture Mandatory conds. HMO - Gas



Licence No.

2017/05347/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

87-89 Cowper Street Hove BN3 5BN

Ward

Westbourne

Name & Address of Licer	ice Holder	
Regency Two Ltd, 11 Radinde	en Drive Hove BN3 6LB	
Name & Address of Perso	on Managing	
Ar Andrew Morris, 11 Radinde	en Drive Hove BN3 6LB	
Property Description	LUMO (No. 5 do no. 4 do	
Short description of license		
roperty Type = SHARED HC	PUSE, No of Units = 6, Occupancy = 6, No of Storeys = 2	2
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 6	b) Living Rooms 1	
, , , , , , , , , , , , , , , , , , , ,	3, 3	
Number of Self Contained F	lats: 0 Number of Non Self	Cont. Flats:
Shared Amenities	Number Description	
ı) Kitchen	2	
) Bathrooms/Showers	2	
) W.C.s	2	
icence Details		
Commencement date:	20/12/2017 Duration of licence	e: 01/11/2020
Maximum number of person	s or households permitted to occupy HMO under co	onditions of licence:
louseholds 6	Persons 6	
nformation referred to a	residential property tribunal or Lands Tribunal:	
lone		
Decision of Tribunal	Reference n	umber
Summary of conditions of li		situs Mandatan,d-



Licence No.

2017/05498/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 6 Preston Lodge 10 Little Preston Street Brighton RN1 2HO Regency

Ward

Name & Address of Licer	nce Holder			
Mr Alberto Giovino, The Old V	Varehouse 2 A	shford Road	Brighton East Sussex BN1 6LJ	
Name & Address of Person	on Managing			
D L Property Services Ltd, Th	ne Old Warehou	ise 2 Ashfo	rd Road Brighton East Sussex BN1 6	LJ
Property Description				
Short description of license	d HMO (No of	storeys, etc	:)	
Property Type = SHARED HC	USE, No of Un	its = 1, Occ	upancy = 6, No of Storeys = 2	
Number of Rooms	Total N	umber of F	ooms 7	
a) Sleeping 6		b) Livin	g Rooms 1	
Number of Self Contained F	lats:	0	Number of Non Self Cont. Fla	ats: 1
Shared Amenities	Number	Descrip	tion	
a) Kitchen	2			
b) Bathrooms/Showers	2			
c) W.C.s	2			
Licence Details				
Commencement date:	22/12/	2017	Duration of licence:	01/11/2020
	_	_		
Maximum number of persor	ns or househol	ds permitte	d 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



Licence No.

2017/05528/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

33 Edburton Avenue Brighton BN1 6EJ

Ward

Preston Park

Name & Address of Licence Holder
Mrs Charlotte Lamont, 39 Acton Street Kings Cross London WC1X 9LZ
Name & Address of Person Managing
Mr Charles Culling, 153 Woodhouse Avenue Perivale Middlesex UB6 8LQ
Property Description
Short description of licensed HMO (No of storeys, etc)
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys = 2
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
i) Kitchen 1
b) Bathrooms/Showers 1
e) W.C.s
Licence Details
Commencement date: 17/01/2018 Duration of licence: 01/11/2020
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 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, Loft Insulation, Management/Repairs, Other Fire Works, Undersized Bedroom



Licence No.

2017/05579/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Top Flat 17 York Road Hove BN3 1DJ

Ward

Brunswick And Adelaide

Name & Address of Licer	nce Holder		
Mr Jesse Marshall, 37 Clevela	and Road Brighton East	Sussex BN1 6FG	
Name & Address of Person	on Managing		
,			
Proporty Description			
Property Description Short description of license	d HMO (No of storeys	etc)	
•		occupancy = 3, No of Storeys = 2	
Property Type - SHARED HC	703E, NO OI OIIIIS – 1, C	ccupancy – 3, No or Storeys – 2	
Number of Rooms	Total Number of	of Rooms 4	
a) Sleeping 3	b) Li	ving Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fl	ats: 1
Shared Amenities	Number Desc	cription	
a) Kitchen	1		
b) Bathrooms/Showers c) W.C.s	1		
c) w.c.s	I		
Licence Details			
Commencement date:	05/01/2018	Duration of licence:	01/11/2020
Commencement date.	03/01/2010	Duration of ficerice.	01/11/2020
Maximum number of persor	is or households perm	itted to occupy HMO under condition	s of licence:
Households 3	Persons 3		
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		conds, HMO - Furniture Mandatory cond	ds, HMO - Gas



Licence No.

2017/05826/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Flat 4 109A Western Road Brighton BN1 2AA

Ward

Regency

ame & Address of Lice			
oseview Homes Limited, An	nelia House Crescent Road	Worthing West Sussex England BN11	1QR
0.4.11			
ame & Address of Pers	on Managing		
roperty Description			
	ed HMO (No of storeys, etc))	
-	•	, ipancy = 3, No of Storeys = 2	
operty Type - STIANED TIC	JOSE, NO OF OTHER - 1, OCCU	paricy = 3, No or Storeys = 2	
umber of Rooms	Total Number of R	ooms 4	
) Sleeping 3	b) Living	g Rooms 1	
lumber of Self Contained F	Flats: 0	Number of Non Self Cont. Flat	s: 1
hared Amenities	Number Descrip	tion	
) Kitchen	1		
) Bathrooms/Showers	1		
W.C.s	1		
icence Details			
			-
ommencement date:	31/01/2018	Duration of licence:	01/11/2020
laximum number of person	ns or households permitte	d to occupy HMO under conditions	of licence:
		a to cocapy rime and conditions	01 11001100.
louseholds 3	Persons 3		
oformation referred to a	residential property trib	ounal or Lands Tribunal:	
one	reciaeman property and	, a.i.a. 5. - a ii.a. 11a.i.a.i.	
ecision of Tribunal		Reference number	
ummary of conditions of li MO - Elec Mandatory conds	s, HMO - Fire Mandatory con	nds, HMO - Furniture Mandatory conds	, HMO - Gas



Licence No.

2017/05948/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

35 Coventry Street Brighton BN1 5PP

Ward

Preston Park

Name & Address of Licence Holder	
	DNCOLL
Mr A R Cruttenden, Paynes Field North Cottage Henfield Road Alborne Hassocks West Sussex	BIND ATT
Name & Address of Barson Managing	
Name & Address of Person Managing	
Mr Peter Spark, T/A Sparks Sons 45 Western Road Hove East Sussex BN3 1JD	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 3, No of Storeys = 2	
Number of Rooms Total Number of Rooms 4	
a) Sleeping 3 b) Living Rooms 1	
a, clooping 2, Enting Roome	
Number of Self-Contained Flate.	4
Number of Self Contained Flats: 0 Number of Non Self Cont. Flat	s: 1
Obassal Assaultias Noveless Description	
Shared Amenities Number Description a) Kitchen 1	
b) Bathrooms/Showers 1	
c) W.C.s 1	
,	
Licence Details	
Commencement date: 09/02/2018 Duration of licence:	01/11/2020
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. Households 3 Persons 3	of licence:
Households 3 Persons 3	of licence:
	of licence:
Households 3 Persons 3	of licence:
Households 3 Persons 3 Information referred to a residential property tribunal or Lands Tribunal:	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, Loft Insulation, Other Fire Work



Licence No.

2018/00293/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

79A Portland Road	
Hove	
BN3 5DP	

Ward

Westbourne

Name & Address of Licen			
MGI Properties Ltd, 65 King G	eorge VI Drive Hove Eas	t Sussex BN3 6XF	
Name & Address of Perso			
Property Plus Lettings Ltd, 45	Church Road Hove BN3	2BE	
D (D) (
Property Description			
Short description of license		•	
Property Type = HMO Grade 1	1, No of Units = 1, Occupa	ancy = 3, No of Storeys = 3	
Number of Rooms	Total Number of	Rooms 4	
a) Sleeping 3		ing Rooms 1	
a) Sieeping	D) LIVI	ing Rooms	
Number of Self Contained Fl	lats: 0	Number of Non Self Cont. Flats:	0
a.			
Shared Amenities a) Kitchen	Number Descr	ription	
b) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
Common and data.	00/02/2040	Duration of linears	04/44/2020
Commencement date:	08/03/2018	Duration of licence:	01/11/2020
Maximum number of person	s or households permit	tted to occupy HMO under conditions of li	icence:
Have abalda 2	Damagna 2	1	
Households 3	Persons 3		
Information referred to a	residential property t	ribunal or Lands Tribunal:	
None	, condension property		
Decision of Tribunal		Reference number	
Summary of conditions of lie		ry conds, HMO - Fire Mandatory conds, HMC)-



Licence No.

2018/00296/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

15A Eaton Place Brighton BN2 1EH

Ward

East Brighton

Short description of licensed HMO (No of storeys, etc) Property Type = HMO Grade 1, No of Units = 3, Occupancy = 4, No of Storeys = 2 Number of Rooms Total Number of Rooms a) Sleeping Total Number of Rooms b) Living Rooms Number of Non Self Cont. Flats: Description Shared Amenities Number A) Kitchen b) Bathrooms/Showers c) W.C.s Description Licence Details Commencement date: 13/04/2018 Duration of licence: 01/11/2020 Maximum number of persons or households permitted to occupy HMO under conditions of licence: Households 4 Persons 4			ibunal or Lands Tribunal:	
Short description of licensed HMO (No of storeys, etc) Property Type = HMO Grade 1, No of Units = 3, Occupancy = 4, No of Storeys = 2 Number of Rooms			ed to occupy HMO under conditions of I	icence:
Short description of licensed HMO (No of storeys, etc) Property Type = HMO Grade 1, No of Units = 3, Occupancy = 4, No of Storeys = 2 Number of Rooms Total Number of Rooms a) Sleeping Total Number of Rooms b) Living Rooms Total Number of Non Self Cont. Flats: Description Description Description Description	Commencement date:	13/04/2018	Duration of licence:	01/11/2020
Short description of licensed HMO (No of storeys, etc) Property Type = HMO Grade 1, No of Units = 3, Occupancy = 4, No of Storeys = 2 Number of Rooms	Licence Details			
Short description of licensed HMO (No of storeys, etc) Property Type = HMO Grade 1, No of Units = 3, Occupancy = 4, No of Storeys = 2 Number of Rooms	c) vv.C.s			
Short description of licensed HMO (No of storeys, etc) Property Type = HMO Grade 1, No of Units = 3, Occupancy = 4, No of Storeys = 2 Number of Rooms	•			
Short description of licensed HMO (No of storeys, etc) Property Type = HMO Grade 1, No of Units = 3, Occupancy = 4, No of Storeys = 2 Number of Rooms			ption	
Short description of licensed HMO (No of storeys, etc) Property Type = HMO Grade 1, No of Units = 3, Occupancy = 4, No of Storeys = 2 Number of Rooms Total Number of Rooms 5	Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats:	0
Short description of licensed HMO (No of storeys, etc)				
Short description of licensed HMO (No of storeys, etc)	Property Type = HMO Grade	1, No of Units = 3, Occupa	ncy = 4, No of Storeys = 2	
	•	•		
,	,	on Managing		
Name & Address of Person Managing	Name & Address of Perso	on Managing		
Mrs Merle Lipton, 15 Eaton Place Kemptown Brighton BN2 1EH	Mrs Merle Lipton, 15 Eaton Pl	ace Kemptown Brighton Bl	N2 1EH	

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.

2018/00594/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO) 2 Byron Terrace Hove BN3 5AY

Ward

Westhourne

		Walu	VVCStDOUTTC
Name & Address of Licer	ice Holder		
	voir Lettings PLC T/a Belvoir F Crantham Lincolnshire NG31		d The Old
Name & Address of Person	on Managing		
Belvoir Property Management	(UK) Belvoir Lettings PLC T/a	ı, The Old Courthouse 60A Lo	ondon Road Grantham
Property Description			
Short description of license	d HMO (No of storeys, etc)		
Property Type = HMO Grade	1, No of Units = 1, Occupancy	= 3, No of Storeys = 2	
Number of Rooms a) Sleeping 3	Total Number of Roo b) Living R		
Number of Self Contained F	lats: 0	Number of Non Self Cor	nt. Flats: 0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Number Description 1 1 2	n	
Licence Details			
Commencement date:	15/05/2018	Duration of licence:	28/02/2023
Maximum number of persons or households permitted to occupy HMO under conditions of licence:			
Households 3	Persons 3		
Information referred to a	residential property tribu	nal or Lands Tribunal:	
None			
Decision of Tribunal		Reference numl	ber
Summary of conditions of li	conco		

Summary of conditions of licence

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.

2018/00762/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

39 Ashburnham Drive Brighton BN1 9AX

Ward

Hollingdean And Stanmer

Name & Address of Licence H	older	
M Knight Carpentry Ltd, 39 Ashburr	nham Drive Brighton BN1 9AX	
Name & Address of Person Ma		
M Knight Carpentry Ltd, 44 Falmer	Gardens	
Property Description		
Short description of licensed HM	O (No of storeys, etc)	
·	No of Units = 1, Occupancy = 4, No of Storeys = 3	
. , ,,		
Number of Rooms	Total Number of Rooms 5	
a) Sleeping 4	b) Living Rooms 1	
N	N. A.	
Number of Self Contained Flats:	0 Number of Non Self Cont. Flats:	0
Shared Amenities Nu	mber Description	
a) Kitchen	1	
b) Bathrooms/Showers	3	
c) W.C.s	3	
Licence Details		
Commencement date:	23/04/2018 Duration of licence:	28/02/2023
Commencement date.	23/04/2010 Duration of incence.	20/02/2023
Maximum number of persons or h	nouseholds permitted to occupy HMO under conditions of	licence:
Households 4 Pers	sons 4	
	ential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence HMO - Elec Mandatory conds, HMC	e) - Fire Mandatory conds, HMO - Furniture Mandatory conds, F	HMO - Gas



Licence No.

2018/00770/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

Upper Maisonette 15 Arundel Street Brighton BN2 5TG

Ward

Rottingdean Coastal

Name & Address of Licence	e Holder		
Mr Gary Rogers, C/O 7 Pilgrims	s View Ash Green Surre	y GU126HU	
Name & Address of Perso	n Managing		
Leaders, 119/120 Western Roa	d Brighton BN1 2AD		
Property Description			
Short description of licensed	HMO (No of storeys, e	etc)	
Property Type = HMO Grade 1			
Troporty Type Time Clade I	1, 0000pt	1, 140 01 0101040 2	
Number of Rooms	Total Number of	Rooms 5	
a) Sleeping 4	b) Livi	ing Rooms	
Number of Self Contained Fla	ats: 0	Number of Non Self Cont. Flat	s : 0
itamber of och contained in	0	Number of Non Sen Sont. Flat	3
Shared Amenities	Number Descr	intion	
a) Kitchen	1 Descr	iption	
b) Bathrooms/Showers	1		
c) W.C.s	2		
Licence Details			
	10/0//00/0]	20/20/202
Commencement date:	12/04/2018	Duration of licence:	28/02/2023
Maximum number of persons	or households permit	ted to occupy HMO under conditions	of licence:
		1	
Households 4	Persons 4		
Information referred to a re	esidential property ti	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of lic	ence		



Licence No.

2018/00777/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

12 Canfield Road Brighton BN2 4DN

Ward

Moulsecoomb And Bevendean

Name & Address of Licenc	e Holder		
Mr Brett Vallier, 182 Balfour Ro	ad Brighton BN1 6NE		
Name & Address of Licenc	e Holder		
Mr Gary Vallier, 47 Langdale Ro	oad Hove East Sussex BN3	4HR	
Name & Address of Person	n Managing		
,			
D (D) (
Property Description	LINO (No. of all and and all all all all all all all all all al		
Short description of licensed			
Property Type = SHARED HOU	SE, No of Units = 1, Occup	ancy = 5, No of Storeys = 2	
Number of Rooms	Total Number of Ro	oms 6	
a) Sleeping 5	b) Living	Rooms 1	
Number of Self Contained Fla	ts: 0	Number of Non Self Cont. Flat	s: 0
			L
Shared Amenities	Number Descripti	on	
a) Kitchen	1		
b) Bathrooms/Showers	1		
c) W.C.s	2		
Licence Details			
Commencement date:	08/05/2018	Duration of licence:	28/02/2023
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	unal or Lands Tribunal:	
None			
		Fire Mandato Reference Mumbere Nands, HMO - Property Chaes Mand	
SUAmaty perity Manna Nepoento	Synconds, HMO - RubbishRo	ecyc Mandatory conds, HMO - Tenar	nt Agrmnt

Mandatory conds, Management/repairs



Licence No.

2018/00780/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

5 Hollingbury Road Brighton BN1 7JB

Ward

Hollingdean And Stanmer

			Troning dean A	
Name & Address of Licer	nce Holder			
Mr Brett Vallier, 182 Balfour R	oad Brighton B	3N1 6NE		
Name & Address of Licer	nce Holder			
Mr Gary Vallier, 47 Langdale	Road Hove Eas	st Sussex BN3 4	HR .	
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 Ur	nits = 1, Occupa	ncy = 6, No of Storeys = 2	
			_	
Number of Rooms	Total N	Number of Roo	ms 7	
a) Sleeping 6		b) Living R	ooms 1	
Number of Self Contained F	lats:	0	Number of Non Self Cont. Flats:	0
Shared Amenities	Number	Description	n	
a) Kitchen	2			
b) Bathrooms/Showers	2			
c) W.C.s	2			
Licence Details				
Licence Details				
Commencement date:	24/04/	/2018	Duration of licence:	28/02/2023
Maximum number of persor	is or househol	lds permitted to	o occupy HMO under conditions of	licence:
Households 6	Persons	6		
	L			
Information referred to a	residential p	roperty tribu	nal or Lands Tribunal:	
None				
			, HMO - Fire rtererade HMกbeF urnitui	
			perty Chges Mandatory conds, HMO - onds, HMO - Tenant Agrimpt Mandatory	



Licence No.

2018/00814/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

145 Milner Road Brighton BN2 4BR

Ward

Moulsecoomb And Bevendean

Nama 9 Address of License	- Holdon	
Name & Address of Licence		
Mr Neil Turner, 19 Hangleton Ro	pad Hove BN3 7GG	
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 = 4, No of Storeys = 2	
Number of Rooms	Total Number of Rooms 6	
a) Sleeping 4	b) Living Rooms 1	
Number of Self Contained Flat	s: 0 Number of Non Self Cont. F	Flats: 0
Shared Amenities	Number Description	
a) Kitchen	1	
b) Bathrooms/Showers	1	
c) W.C.s	1	
Licence Details		
		20/20/2000
Commencement date:	12/04/2018 Duration of licence:	28/02/2023
Maximum number of persons	or households permitted to occupy HMO under condition	ns of licence:
Households 4 F	Persons 4	
Information referred to a re-	sidential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	



Licence No.

2018/00836/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

26 Mafeking Road Brighton BN2 4EL

Ward

Moulsecoomb And Bevendean

Name & Address of Licer	ice Holder		
Santagata Property Holdings	and Investments Limited,	Preston Park House South Road Brighto	on BN1 6SB
Name & Address of Person	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, e	tc)	
Property Type = SHARED HC	USE, No of Units = 1, Oc	cupancy = 4, No of Storeys = 2	
Number of Rooms	Total Number of	Rooms 0	
	Total Number of		
a) Sleeping 4	b) Livi	ng Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	ts: 0
Shared Amenities	Number Descr	intion	
a) Kitchen	1	iption	
b) Bathrooms/Showers	1		
c) W.C.s	1		
Licence Details			
Commencement date:	12/04/2018	Duration of licence:	28/02/2023
Maximum number of persor	s or households permit	ted to occupy HMO under conditions	of licence:
Households 4	Persons 4		
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.

2018/00850/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

21 Fitch Drive Brighton BN2 4HX

Ward

Moulsecoomb And Bevendean

Name & Address of Licence Holder	
Mosaica Properties Ltd, 81-85 High Street Brentwood CM14 4RR	
Name & Address of Person Managing	
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 = 2	
Number of Rooms Total Number of Rooms 5	
a) Sleeping 5 b) Living Rooms 1	
a) Siceping b) Living Noonis 1	
Number of Self Contained Flats: 0 Number of Non Self Con	nt. Flats:
Number of Self Contained Flats.	iit. i iats.
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s Number Description 2 1	
Licence Details	
Commencement date: 15/05/2018 Duration of licence:	28/02/2023
Maximum number of persons or households permitted to occupy HMO under cond	itions of licence:
Households 5 Persons 5	
Information referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference num	ber
Summary of conditions of licence HMO - Flee Mandatory conds HMO - Fire Mandatory conds HMO - Furniture Mandatory	conds HMO Gas



Licence No.

2018/00858/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

221 Elm Grove Brighton BN2 3EL

Ward

Hanover And Elm Grove

Name & Address of Licence Holder	
Mrs Marion Smith, 4 Rustat Road Cambridge CB1 3QT	
Wild Wallott Childit, 4 Nastat Noad Callibridge CB1 0Q1	
Name & Address of Person Managing	
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 = 6, No of Storeys = 2	
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: 0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s Number 2 2 2 2	
Licence Details	
45/95/9949	00/00/0000
Commencement date: 15/05/2018 Duration of licence:	28/02/2023
Maximum number of persons 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	
Decision of Tribunal Reference number	
Summary of conditions of licence HMO - Flee Mandatory conds HMO - Fire Mandatory conds HMO - Furniture Mandatory conds	de HMO - Gae



Licence No.

2018/00896/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

85 Roundhill Crescent Brighton BN2 3GP

Ward

St. Peter's And North Laine

Name & Address of Licer			
Ms Katherine Dawson, 27 Lim	ie Tree Road		
Name & Address of Person	on Managing		
,			
Property Description			
Short description of license	d HMO (No of storeys, e	etc)	
Property Type = SHARED HC	OUSE. No of Units = 1. Oc	ccupancy = 4, No of Storeys = 3	
	.,	.,	
Number of Rooms	Total Number of	Rooms 0	
a) Sleeping 4	b) Liv	ing Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Flats	s: 0
Number of Self Contained i	iats.	Number of Non Self Cont. I late	s. <u> </u>
Ohamad Amamitiaa	Noveben Beer		
Shared Amenities		ription	
a) Kitchen b) Bathrooms/Showers	2		
c) W.C.s	2		
0, 11.0.0			
Licence Details			
Commencement date:	26/04/2018	Duration of licence:	28/02/2023
Maximum number of person	is or households permit	tted to occupy HMO under conditions o	of licence:
Households 4	Persons 4	7	
Information referred to a	residential property t	ribunal or Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of li		oondo LIMO Eiro Mandatan, aanda LIM) Fire
		conds, HMO - Fire Mandatory conds, HM0 HMO - Furniture Mandatory conds, HMO -	
Manufacture and LIMO O	Manufacture de LIMO	Described Managery Condo, 11110	D

HMO - Elec Mandatory conds, HMO - Elec Mandatory conds, HMO - Fire Mandatory conds, HMO - Fire Mandatory conds, HMO - Furniture Mandatory conds, HMO - Gas 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, HMO - Tenant Agrmnt Mandatory conds





Licence No.

2018/00920/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO) 29B Buckingham Place Brighton BN1 3PQ

Ward

St. Peter's And North Laine

Name & Address of Licen	ice Holder		
Mr Zahy Nasseralden, Flat 1	22-23 Marylebone Hi	gh Street London W1U 4PF	
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 = 4, No of Storeys = 2	
		,	
Number of Rooms	Total Numbe	er of Rooms 5	
a) Sleeping 4	b)	Living Rooms 1	
Number of Self Contained F	lats:	0 Number of Non Self Cont. Flat	ts: 0
Shared Amenities	Number De	escription	
a) Kitchen	1		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	14/05/2018	Duration of licence:	28/02/2023
Commencement date.	14/03/2010	Duration of licence.	20/02/2023
Maximum number of person	s or households pe	rmitted to occupy HMO under conditions	of licence:
Hawaahalda 4	Damage 4		
Households 4	Persons 4		
Information referred to a	residential proper	ty tribunal or Lands Tribunal:	
None	rootachtiai proper	ty tribunal or Eurido Tribunal.	
Decision of Tribunal		Reference number	
Decision of Hibalial		Reference number	
Summary of conditions of li	cence		



Licence No.

2018/00922/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

100 Newick Road Brighton BN1 9JG

Ward

Moulsecoomb And Bevendean

Name & Address of Lice	nce Holder	
Ms Tara Whittington, 38 Hend		
Name & Address of Pers	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 = 2	
Number of Rooms	Total Number of Rooms 8	
a) Sleeping 6	b) Living Rooms 1	
Normalis and Code Constaline of F	North on of Non Oalf Cont	F1-4
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	
c) W.C.s	2	
Licence Details		
Commencement date:	08/05/2018 Duration of licence:	28/02/2023
Maximum number of persor	ns or households permitted to occupy HMO under condition	ons of licence:
Households 6	Persons 6	
Information referred to a	residential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	r
Summary of conditions of I	icanca	
Summary of conditions of li	icence : HMO - Fire Mandatory conds_HMO - Furniture Mandatory co	onds HMO - Gas



Licence No.

2018/00932/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

96 Newick Road Brighton BN1 9JH

Ward

Moulsecoomb And Bevendean

Name & Address of Licen	ce Holder		
Mrs Tara Whittington, 38 Hend	Ion Street		
Znama.			
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, Occu	pancy = 6. No of Storeys = 2	
1 7 71		, , ,	
Number of Rooms	Total Number of Ro	ooms 8	
a) Sleeping 6	b) Living	Rooms 1	
Number of Self Contained F	lats: 0	Number of Non Self Cont. Fla	nts: 0
Shared Amenities	Number Descript	tion	
a) Kitchen	2		
b) Bathrooms/Showers	2		
c) W.C.s	2		
Licence Details			
Commencement date:	08/05/2018	Duration of licence:	28/02/2023
Commencement date.	06/05/2016	Duration of ficerice.	26/02/2023
Maximum number of person	s or households permitted	d to occupy HMO under conditions	of licence:
Hawaahalda O	D		
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 lie	cence		



Licence No.

2018/00936/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

333 Bear Road Brighton BN2 4DD

Ward

Moulsecoomb And Bevendean

Name & Address of Licence Holder		
Jumby Investments Ltd, The Brick Barn Hill Farm Love Lane Kings Langley Herts WD4 9HL		
Name & Address of Person Managing		
Neil Sutherland Ltd, 4th Floor Park Gate 161-163 Preston Road Brighton BN1 6AF		
Property Description		
Short description of licensed HMO (No of storeys, etc)		
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 3, No of Storeys = 2		
N. de of Brown		
Number of Rooms Total Number of Rooms 0		
a) Sleeping b) Living Rooms 1		
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats	s: 0	
Number of Self Contained Flats.	s. <u> </u>	
Shared Amenities Number Description		
a) Kitchen 1		
b) Bathrooms/Showers 1		
c) W.C.s		
Licence Details		
Licence Details Commencement date: 03/05/2018 Duration of licence:	28/02/2023	
Commencement date: 03/05/2018 Duration of licence:		
Commencement date: 03/05/2018 Duration of licence: Maximum number of persons or households permitted to occupy HMO under conditions of Households 3 Persons 3		
Commencement date: 03/05/2018 Duration of licence: Maximum number of persons or households permitted to occupy HMO under conditions of		
Commencement date: 03/05/2018 Duration of licence: Maximum number of persons or households permitted to occupy HMO under conditions of Households 3 Persons 3 Information referred to a residential property tribunal or Lands Tribunal:		



Licence No.

2018/00966/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO) 31B Upper St James Street Brighton BN2 1JN

Ward

Queen's Park

Name & Address of Licer	ce Holder			
Miss Zena Trow, 2 Roedean Terrace Brighton BN2 5RN				
Name & Address of Perso	n Managing			
,				
Property Description				
Short description of license	I HMO (No of storeys, etc)			
Property Type = SHARED HC	USE, No of Units = 1, Occupancy =	4, No of Storeys = 3		
Number of Rooms	Total Number of Rooms	5		
a) Sleeping 4	b) Living Rooms	3 1		
Number of Self Contained F	ats: 0 N	umber 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:	09/05/2018	Duration of licence:	28/02/2023	
Commencement date.	03/03/2010	Daration of necifice.	20/02/2020	
Maximum number of person	s or households permitted to oc	cupy HMO under conditions	of licence:	
Households 4	Persons 4			
nousellolus 4	Persons 4			
Information referred to a	residential property tribunal c	r Lands Tribunal:		
None				
Decision of Tribunal		Reference number		
Summary of conditions of li	ence			



Licence No.

2018/00988/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

56 Norwich Drive Brighton BN2 4LE

Ward

Moulsecoomb And Bevendean

Nome O Address of Linear	Halden		
Name & Address of Licence		754	
Mr Richard Angell, 9 Westfield Av	enue Watford Hertfordshire WD24	+ /EA	
Name & Address of Person	Managing		
italic & Addiess of Ferson	nanaging		
,			
Property Description			
Short description of licensed H	MO (No of storeys, etc)		
Property Type = SHARED HOUS	Ξ, No of Units = 1, Occupancy = 4	, No of Storeys = 2	
Number of Rooms	Total Number of Rooms	0	
a) Sleeping 4	b) Living Rooms	1	
		г	
Number of Self Contained Flats	. 0 Nu n	nber of Non Self Cont. Flats:	0
Shared Amenities a) Kitchen b) Bathrooms/Showers c) W.C.s	Description 1 2 2		
Licence Details			
Commencement date:	04/05/2018 D	uration of licence:	28/02/2023
Maximum number of persons o	r households permitted to occu	py HMO under conditions of lie	cence:
Households 4 P	ersons 4		
riouscholus 7 F	7 7		
Information referred to a res	idential property tribunal or	Lands Tribunal:	
None			
Decision of Tribunal		Reference number	
Summary of conditions of licen	ce 10 - Fire Mandatory conds. HMO	- Furniture Mandatory conds. HM	10 - Gas



Licence No.

2018/01006/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

25 Shakespeare Street Hove BN3 5AG

Ward

Westbourne

Name & Address of Licence Holder	
Mr Mark Radford, Lone Pine Sanctuary Lane Storrington RH20 3JD	
Name & Address of Person Managing	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = HMO Grade 1, No of Units = 1, Occupancy = 4, No of Storeys = 2	
Number of Rooms 5	
a) Sleeping 4 b) Living Rooms 1	
a) Sleeping	
Number of Calf Contained Flate:	Flata
Number of Self Contained Flats: 0 Number of Non Self Cont	:. Flats: 0
Shared Amenities Number Description 1 Description Number 1 Description	
Licence Details	
·	
Commencement date: 23/03/2018 Duration of licence:	28/02/2023
Maximum number of persons or households permitted to occupy HMO under condit	ions of licence:
Households 4 Persons 4	
nformation referred to a residential property tribunal or Lands Tribunal:	
None	
Decision of Tribunal Reference number	er
Summary of conditions of licence	condo HMO Coo



Licence No.

2018/01018/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

37 Newhaven Street Brighton BN2 9NR

Ward

Hanover And Elm Grove

ıme & Address of Licence Holo	ler			
Richard Gilday, 34 Mount Close				
ınd Uill				
me & Address of Person Mana	iging			
ders Brighton & Hove (Property Ma	nagement), 119/	120 Western Roa	ad Brighton BN1 2AD	
operty Description				
ort description of licensed HMO (
perty Type = SHARED HOUSE, No	of Units = 1, Occ	cupancy = 3, No	of Storeys = 3	
mber of Rooms 1	otal Number of	Rooms 0		
Sleeping 3	b) Livi	ng Rooms	1	
mber of Self Contained Flats:	0	Number	of Non Self Cont. Flats:	0
ared Amenities Numb	er Descri	ption		
Kitchen 1				
Bathrooms/Showers 1 W.C.s 2				
V.O.3				
ence Details				
	04/05/2049	Dunati	ion of linears.	20/02/2022
mmencement date:	04/05/2018	Durati	ion of licence:	28/02/2023
ximum number of persons or hou	seholds permitt	ted to occupy H	MO under conditions of I	icence:
useholds 3 Person	15 3			
ormation referred to a residen	tial property tr	ibunal or Land	ds Tribunal:	
ne				
cision of Tribunal			Reference number	
mmary of conditions of licence				
IO - Elec Mandatory conds, HMO - I	Fire Mandatory co	onds, HMO - Fur	niture Mandatory conds, H	MO - Gas



Licence No.

2018/01118/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

79 Norwich Drive Brighton BN2 4LE

Ward

Moulsecoomb And Bevendean

Name & Address of License Holder	
Name & Address of Licence Holder Mr Adam Thorn, 40 Ashbarn Crescent	
Winehoster	
Name & Address of Person Managing	
Dan Lyons T/A Brighton Accommodation Agency, 74 Lewes Road Brighton BN2 3F	
<i>y</i>	
Property Description	
Short description of licensed HMO (No of storeys, etc)	
Property Type = SHARED HOUSE, No of Units = 1, Occupancy = 5, No of Storeys	= 2
Number of Rooms Total Number of Rooms 6	
a) Sleeping b) Living Rooms 1	
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 Number 1 2 2	
Licence Details	
Commencement date: 14/05/2018 Duration of lice	nce: 28/02/2023
Duration of ficer	20/02/2023
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 Tribun	al:
None	
Decision of Tribunal Reference	number
Summary of conditions of licence	datany conde HMO Gas



Licence No.

2018/01194/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

36 Whippingham Road Brighton BN2 3PG

Ward

Hanover And Elm Grove

Name & Address of Licence Holder	
Ms Livia Schanze, 29 Newlands Avenue	
Southamnton	
Name & Address of Person Managing	
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 = 2	
Number of Rooms Total Number of Rooms 0	
a) Sleeping b) Living Rooms 1	
Number of Self Contained Flats: 0 Number of Non Self Cont. Fl	ats: 0
Shared Amenities Number Description	
a) Kitchen 1	
b) Bathrooms/Showers 1 c) W.C.s 1	
U) WV.O.S	
Licence Details	
Commencement date: 14/05/2018 Duration of licence:	28/02/2023
Maximum number of persons or households permitted 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 licence	L. LIMO. O.



Licence No.

2018/01729/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

68B Wolseley Road Brighton BN1 9ET

Ward

Hollingdean And Stanmer

Name & Address of Licence H	older	
Mr Peter Gregory Howard, 50 Conis	iton Road	
Name & Address of Person Ma	anaging	
COAPT Ltd, 108A Lewes Road Brig	hton BN2 4AE	
Property Description		
Short description of licensed HMO	O (No of storeys, etc)	
Property Type = SHARED HOUSE,	No of Units = 1, Occupancy = 4, No of Storeys = 2	
Number of Rooms a) Sleeping 4	Total Number of Rooms 0 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	mber Description 1 1 2	
Licence Details		
Commencement date:	10/05/2017 Duration of licence:	28/02/2023
Maximum number of persons or h	nouseholds permitted to occupy HMO under conditions of	f licence:
Households 4 Pers	sons 4	
Information referred to a resid	ential property tribunal or Lands Tribunal:	
None		
Decision of Tribunal	Reference number	
Summary of conditions of licence HMO - Elec Mandatory conds, HMO	e	HMO - Gas



Licence No.

2018/01827/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

9 Dartmouth Close Brighton BN2 4HZ

Ward

Moulsecoomb And Bevendean

Name & Address of Licen	ce Holder		
Mrs Sharon Gooding, Camino Pinada XB20			
Vinarlat			
Name & Address of Perso	n Managing		
G K White Estate Agents, 165	Lewes Road Brighton BN2 3LD		
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 = 2		
Number of Rooms	Total Number of Rooms 0		
a) Sleeping	b) Living Rooms		
November of Oak Oantain ad El	A North or of North Court Flater		
Number of Self Contained Fl	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		
L: D (!!			
Licence Details			
0	OC/OC/OCO		
Commencement date:	28/02/2023 Duration of licence:		
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	cence		



Licence No.

2018/02268/HMOADD/PS

REGISTER ENTRY FOR (Address of licensed HMO)

12 Monk Close Brighton BN1 9AH

Ward

Hollingdean And Stanmer

Name & Address of Licence Holder
Miss Claire Johnson, 23 De Montfort Road Brighton BN2 3AW
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 = 2
Topolity Type Of Witted Hoode, No of Clinic 1, Coodpaniey 0, No of Cloreyo 2
Number of Rooms 7
a) Sleeping b) Living Rooms 7
Number of Self Contained Flats: 0 Number of Non Self Cont. Flats: 0
Shared Amenities Number Description
a) Kitchen 1 2 2
c) W.C.s 2
Licence Details
Commencement date: 02/05/2018 Duration of licence: 28/02/2023
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 - 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