Application for an Animal Activity Licence

The Animal Welfare (Licensing of Activities Involving Animals) (England) Regulations 2018

I am applying for a:	☐ New licence ☐ Renewal of a licence ☐ Variation to a licence

Please write legibly in **block capitals** and ensure that your answers are inside the boxes and written in **black ink**; all questions **must be** answered. Incomplete applications will not be processed. Before completing, please refer to the DEFRA guidance notes which can be found on our website.

Section 1: Current licences			
Licence number:		Expiry date:	

Section 2: Business details	
Trading name *(if any)*:	
Full address: *(including postcode)*	
Telephone number(s):	
Email address:	
Business website *(if any)*:	
Which licensable activities do you intend to carry out? *(tick all that apply and complete the appropriate sections of this form)*	
☐ To sell animals as pets *(complete schedule one)*	
☐ To provide or arranging for the provision of boarding for cats or dogs *(complete schedule two)*	
☐ To hire out horses *(complete schedule three)*	
☐ To breed dogs (including where 3 or more litters of puppies in any 12-month period and/or where breeding dogs and advertising a business of selling dogs) *(complete schedule four)*	
☐ To keep or train animals for exhibition *(complete schedule five)*	
Type of premises:	☐ Commercial / retail unit ☐ Private dwelling ☐ Other *(please describe)*:_____
Has the premises been granted planning permission for this use(s) or has it been confirmed that planning permission is not required?	☐ Permission granted ☐ Permission not granted ☐ Permission not required

Section 3: Applicant(s) details		
This application is made by: *(tick one)*	☐ A single individual ☐ Multiple individuals ☐ A limited company	*Please complete part A* *Please complete parts A & B* *Please complete part C*

Part A: First individual applicant	☐ Mr ☐ Mrs ☐ Ms ☐ Other____
Full name:	
Home address:	
Date of birth:	/ /
Daytime phone number:	
Email address:	
Please provide details of relevant experience, training, certificates or qualifications:	

Part B: Second individual applicant *(if any)*	☐ Mr ☐ Mrs ☐ Ms ☐ Other ____
Full name:	
Home address:	
Date of birth:	/ /
Daytime phone number:	
Email address:	

If there are more than two individual applicants, please give the details of further individuals on a separate sheet.

Part C:Limited company	☐ Applicant ☐ Agent		
Contact name:			
Position within organisation:			
Company name:		Company registration number:	
Registered office address:			
Daytime phone number:			
Email address:			

Section 4: Resident animals

How many pet animals are ordinarily resident at the premises, or will otherwise be present during the operation of the business (e.g. owner's pets, animals belonging to staff members)?

Dogs	Cats	Others *(please list)*

Section 5: Management of premises

Please give details of an individual responsible for the management of the premises:
(we will contact this person to arrange the pre-licensing inspection and for any enforcement or compliance issues)

Full name:	
Position/title:	
Daytime telephone number:	
Email address:	

Section 6: Fire safety

What steps are you taking/do you intend to take to ensure that animals are protected in case of fire or other emergency? (please include a list of any fire prevention/detection equipment which is in operation)

Please note: All animal businesses are subject to the provisions of the Regulatory Reform (Fire Safety) Order 2005, which requires businesses to take general fire precautions, to carry out a fire safety risk assessment, and if necessary to install fire detection and fire-fighting equipment.

Further information is available at www.gov.uk/workplace-fire-safety-your-responsibilities

Section 7: Disease control

What steps are you taking/do you intend to take to prevent and control the spread of infectious or contagious disease among animals kept at the premises? (please include a list of any quarantine/isolation facilities provided)

Section 8: Veterinary treatment

Please give the details of a veterinary surgeon or practitioner who provides services to this business:

Name of vet:	
Name of practice:	
Address:	
Telephone number:	

Section 9: Security

What steps are you taking/do you intend to take to prevent unauthorised access to the premises (or parts of the premises to which the public are not to be admitted), unauthorised removal of animals, or escape by animals?

Section 10: Waste disposal

What measures are being/will be used for the disposal of waste produced in the course of the business? (this may include soiled bedding materials, empty packaging, food remnants, and animal excreta)

Please note: Waste produced in the course of a business may be considered to be commercial waste which should not be disposed of via domestic waste bins or public litter bins. Where no alternate disposal arrangements are in place businesses should consider contracting a commercial waste carrier to provide this service.

Section 11: Insurance

Please detail any relevant insurance policies held in respect of this business:

Type (eg. Public liability)	Name of insurer(s):	Amount insured	Policy expiry date
		£	/ /
		£	/ /
		£	/ /

Section 12: Licence conditions

The general and specific conditions for each type of licensable activity are set out in the legislation, which is available to view at https://www.dover.gov.uk

Does the accommodation and care you intend to provide satisfy the relevant licence conditions for the licensable activities to be provided?	☐ Yes ☐ No

If no, please detail any conditions below which you would not be able to satisfy and what steps you intend to take to achieve compliance with these requirements:

Please note: The Council does not have the power to exempt businesses from the statutory conditions. If your business does not comply with any of the requirements your application may be deferred, until such time as you have achieved compliance, or rejected.

Section 13: Offences, disqualifications, etc.

Convictions or cautions which are considered 'spent' under the Rehabilitation of Offenders Act 1974 need not be disclosed.

Has the applicant, or have any of the applicants, or any of the directors/officers of a limited company applicant, or any person who will have control or management of the establishment, ever been disqualified from:

Keeping a pet shop	☐ Yes ☐ No
Keeping a dog	☐ Yes ☐ No
Keeping an animal boarding establishment	☐ Yes ☐ No
Keeping a riding establishment	☐ Yes ☐ No
Having custody of animals	☐ Yes ☐ No
Has the applicant (or have any of the applicants, or any of the directors/officers of a limited company applicant) been convicted or cautioned for an offence under the Animal Welfare Act 2006?	☐ Yes ☐ No
Has the applicant, or any person who will have control or management of the establishment ever had a licence refused, revoked or cancelled?	☐ Yes ☐ No

If yes to any of these questions, please provide details:

Section 14: Enclosures

Please tick to confirm the following documents have been included with this application:

☐ a scale plan (showing the layout of the premises)
☐ a copy of relevant insurance policies
☐ a copy of the operating procedures
☐ a copy of risk assessments and emergency plans (including fire)
☐ a copy of the infection control procedure
☐ a copy of relevant qualifications
☐ a copy of training records

Section 15: Application fee(s)

☐ **Renewal:** Payment made as per invoice number _____

☐ **Grant:** Payment made online or over the telephone. Receipt number _____

Section 16: Declaration and signatures

All applicants must sign this form.

If you are an agent please ensure the applicant(s) complete this section.

I/We hereby apply for a licence to carry out the licensable activities specified above, pursuant to Animal Welfare (Licensing of Activities Involving Animals) (England) Regulations 2018 and declare that, to the best of my/our knowledge and belief, the above particulars are true in every respect.

I/We understand that a licence may be refused or revoked if information supplied by the applicant(s) is found to be false or misleading.

I/We understand that the above-mentioned premises will be inspected by an authorised inspector prior to any decision being made in respect of this application and agree to facilitate this.

I/We have read the relevant general and activity-specific licence conditions, available to view at https://www.dover.gov.uk and undertake in the event of a licence being granted to observe and adhere to such conditions.

Signed:		Print name:		Date:	
Signed:		Print name:		Date:	

If there are more than two applicants, a copy of this page should be taken to allow all applicants to sign.
Where the application is made by a limited company, the form should be signed by an officer of the company.

Signed:		Print name:	
Position within organisation:		Date:	

Section 17: Submitting your application

Completed application forms should be submitted, along with supporting documents and payment of the appropriate fee(s) either by:

Post or visiting: Licensing, Dover District Council, Council Offices, White Cliffs Business Park, Whitfield, Dover, Kent CT16 3PJ

Email: licensing@dover.gov.uk

Section 18: Data Protection Privacy Notice – PLEASE READ THIS NOTICE CAREFULLY

Dover District Council is a data controller under General Data Protection Regulation (GDPR), your attention is drawn to our Corporate Privacy Notice available at https://www.dover.gov.uk/privacy. This explains how we will use and share your personal information and protect your privacy and rights.

Schedule One
To sell animals as pets

Please tick your type of business:

☐	Pet shop	☐	Wholesales
☐	Home sales	☐	Third party sales
☐	Internet sales	☐	Hobby sales
☐	Sale of animals to the public as pets by means of a fixed or minimum donation	☐	Other (please state)

Please describe the accommodation being provided for animals, including if it is indoors or outdoors, construction, size, occupancy, temperature, lighting, ventilation, cleanliness, exercise facilities and arrangements, water supply, and food storage and preparation areas. Where multiple types of accommodation are available, please describe each of them. Continue on a separate page if necessary.

Please give details of how you propose to minimise disturbance from noise.

Please give details of the animals which are (or proposed to be) sold:

Type of animal	Maximum no. stocked	Minimum age at which sold	Details of accommodation

Schedule Two
Providing or arranging boarding for cats or dogs

Please indicate the type(s) of accommodation intended to be provided by the business:

☐ Boarding for cats
☐ Boarding in kennels for dogs
☐ Home boarding for dogs
☐ Day care for dogs

Please specify the maximum number of animals that you propose to offer boarding for:
(prior to completing the following section, please refer to the statutory conditions relating to accommodation of animals from multiple households and minimum enclosure sizes, conditions, etc.)

	Maximum Number - Daytime	**Maximum Number - Overnight**
Dogs		
Cats		

How many pet animals are ordinarily resident at the premises or will otherwise be present during the operation of the business (eg. owner's pets, animals belonging to staff members)?		
Dogs	**Cats**	**Other (please list)**

Please describe the accommodation and enclosures being provided for animals, including if it is indoors or outdoors, construction, size, occupancy, temperature, lighting, ventilation, cleanliness, exercise facilities and arrangements, water supply, and food storage and preparation areas. Where multiple types of accommodation are available, please describe each of them. Where enclosures include runs or open areas which may be accessed by animals, please describe these, including details of how the animals will gain access to the enclosures from their accommodation. Continue on a separate page if necessary.

Please give details of how you propose to minimise disturbance from noise.

Home boarders only	Ground floor	Other floors
How many rooms in the premises may be utilised as designated rooms to be accessed only by a single dog?		

Designated rooms must include:

- a secure window to the outside that can be opened and closed as necessary;
- a clean, comfortable and warm area for rest and sleep;
- the capability for access to the room by other dogs to be restricted;
- sufficient space for the dog to sit and stand at full height, stretch, wag its tail and walk around without touching the sides, with a clear floor area of at least twice that required for the dog to lay out flat.

(Dogs from a single household may be kept together in a suitably-sized designated room with the written consent of their owner).

Schedule 3
Hiring out horses

How many horses do you have or intend to keep under the conditions within the terms of the Animal Welfare Regulations 2018?	For Riding	Instruction in riding

Normal open hours:	
If the riding establishment will only operate for part of the year, please state the period(s) during which it is intended to operate:	

Does a responsible person live at the establishment?	☐ Yes ☐ No
Will a person who is under 16 years of age be left in charge of the establishment at any time?	☐ Yes ☐ No
Will a responsible person (of 16 years or over) provide supervision at all times while horses from the establishment are used for riding instruction or are hired out for riding (except in the case of the hirer being competent to ride without supervision?	☐ Yes ☐ No

Please give the details of relevant qualification(s) held by the person applying for this licence:	
Qualifications held:	☐ Instructor's Certificate of the British Horse Society ☐ Intermediate Instructor's Certificate of the British ☐ Horse Assistant Instructor's Certificate ☐ Fellowship of the British Horse Society ☐ Fellowship of the Institute of the Horse ☐ None of the above *(please summarise experience in the box below)*
Relevant experience:	

Please detail any qualifications held by other applicants or staff members employed at the premises:

Accommodation and facilities			
Please describe the accommodation available for horses:			
Number and size of stalls:		**Number and size of boxes:**	
Covered yard:		**Open yard:**	
Please describe the land and/or space available for:			
Grazing			
Instructing and demonstrating			
Exercise			

Please describe the accommodation and storage provided for forage, bedding, stable equipment and saddlery:
In the case of any horses maintained at grass, what steps are you taking/do you intend to take to ensure that adequate pasture, shelter and water will be available, and that supplementary feeds will be provided as and when required?

What arrangements are in place in the event of an emergency?

What arrangements are in place to protect horses in the event of a fire and what fire precautions do you have in place?

Insurance – does your policy:	
Insure against liability for an injury sustained by those who hire a horse from you for riding and those who use a horse in the course of receiving instruction in riding, provided by you in return for payment?	☐ Yes ☐ No
Insure against liability arising out of such hire or use of a horse?	☐ Yes ☐ No
Insure such hirers or users in respect of any liability which may be incurred by them in respect of injury to any person caused by, or arising from, such hire or use?	☐ Yes ☐ No

Is there any additional information which is required or may be relevant to this application?

Details of horses to be kept at the premises

Please give the details of any horse which is (or proposed to be) kept at the premises. Please continue on an additional page where necessary.

Name of horse	**Sex** (M/F)	**Age** (in years)	**Passport no.**	**Description** (including size, colours and markings)	**Purpose for which kept** (e.g. riding instruction, let out on hire for riding)	**Age range of people who ride this horse**

Schedule 4
Breeding dogs
(breeding 3 or more litters of puppies in any 12-month period; and/or breeding dogs and advertising a business of selling dogs)

If dogs bred by the applicant will not be sold directly to members of the public, please describe the arrangements by which dogs bred at this establishment will be sold:

Please describe the accommodation being provided for animals, including if it is indoors or outdoors, construction, size, occupancy, temperature, lighting, ventilation, cleanliness, exercise facilities and arrangements, water supply, and food storage and preparation areas. Where multiple types of accommodation are available, please describe each of them. Continue on a separate page if necessary.

Please give details of how you propose to minimise disturbance from noise.

Please give details of all dogs currently kept by the applicant(s) or otherwise kept at these premises which will be used for breeding purposes. Continue on a separate sheet if necessary.

Bitches				
Name	**Date of birth**	**Breed**	**Microchip details**	**No. of litters in lifetime**

Stud dogs			
Name	**Date of birth**	**Breed**	**Microchip details**

Schedule 5
Keeping or training animals for exhibition

Please provide details of:

• **The nature of performances**	
• **Duration of performances**	
• **Any apparatus to be used**	
• **Number of performances in one day**	
• **How the animals will be transported**	
• **Where the animals are kept when not performing or being exhibited**	
• **If it is an encounter, what type and where it will take place**	

Please give details of all animals intended to be kept by the applicant(s) for the above-mentioned purposes. Continue on a separate sheet if necessary.

Name	Species / Breed	Age	Sex M/F	Purpose / Exhibition type