

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

APPLICATION FOR AN ANIMAL ACTIVITIES LICENCE

Please complete all the questions in the form.

If you have nothing to record, please state 'Not applicable' or 'None'

PLEASE NOTE CAREFULLY THAT PAYMENT OF AN APPROPRIATE APPLICATION FEE IS A CONDITION OF VALIDATING YOUR APPLICATION. ONCE THIS IS PAID TO THE LOCAL AUTHORITY AS PART OF YOUR APPLICATION, IT IS NOT REFUNDABLE

SECTION 1 – Type of Application

Please tick to indicate which licence(s) you are applying for:

Licence to Operate An Animal Boarding Establishment	<input type="checkbox"/>	Please complete sections (2-6 & 12-20)
Licence to Operate A Dog Breeding Establishment	<input type="checkbox"/>	Please complete sections (2-5, 7 & 12-20)
Licence to Sell Animals	<input type="checkbox"/>	Please complete sections (2-5, 8 & 12-20)
Licence to Hire Out Horses	<input type="checkbox"/>	Please complete sections (2-5, 9 & 12-20)
Licence of the Exhibition or Training of Performing Animals	<input type="checkbox"/>	Please complete sections (2-5 & 10-20)

SECTION 2 – Agent Details (if applicable)

Agent Name	
Building name or number	
Street	
District	
City or Town	
County or Administrative Area	
Post Code	
Country	
E-mail Address	
Main Telephone Number	
Other Telephone Number	

SECTION 3 – Applicant Details

Name	
Building name or number	
Street	
District	
City or Town	
County or Administrative Area	Tyne & Wear
Post Code	
Country	UK
Date of Birth	
National Insurance Number	
E-mail Address	
Main Telephone Number	
Other Telephone Number	

SECTION 4– Applicant Business Details

Please state whether you are applying for a licence as

- an individual or individuals
- as a limited company/limited liability partnership
- as a partnership (other than limited liability)
- as an unincorporated association or
- other (for example a statutory corporation)

Is your business or company registered with companies house	Yes <input type="checkbox"/>
	No <input type="checkbox"/>

Registration Number	
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Is your business or company registered outside the UK	Yes <input type="checkbox"/>
	No <input type="checkbox"/>

VAT number	
The country where your head office is located	
SECTION 5 – Business Address – This should be your official address – The address required of you by law to receive all communication (if different to applicant address)	
Building name or number	
Street	
District	
City or Town	
County or Administrative Area	
Post Code	
Country	
SECTION 6 – Licence to Operate An Animal Boarding Establishment	
What type of Animal Boarding Establishment Licence are you applying for:	
Kennels/Catteries <input type="checkbox"/> Home Boarding <input type="checkbox"/> Day Care <input type="checkbox"/>	
Animals to be accommodated	
Cats in Catteries <input type="checkbox"/>	Maximum number
Dogs in Kennels <input type="checkbox"/>	Maximum number
Dogs for Home Boarding <input type="checkbox"/>	Maximum number of dogs to be boarded
	Maximum number of resident dogs
Day Care Arena <input type="checkbox"/>	Maximum number of dogs
Address at which animals are to be boarded (if different from the business address) – Details for additional properties should be submitted on a separate sheet	
Building name or number	Same as applicant/business address
Street	
District	

City or Town		
County or Administrative Area		
Post Code		
Country		
Maximum number of dogs to be boarded		Maximum number of resident dogs
SECTION 7 – Licence to Operate A Dog Breeding Establishment		
Animals to be accommodated		
Wholly Indoors	Wholly Outdoors <input type="checkbox"/>	Combination of both <input type="checkbox"/>
Breeds of dogs concerned		
Number of bitches kept		
Number owned by the applicant	Number co-owned by the applicant	Number of breeding bitches
Number of studs kept		
Number owned by the applicant	Number co-owned by the applicant	Number of breeding studs
SECTION 8 – Licence to Sell Animals		
Please advise which type of business you intend to operate:		
Pet Shop		<input type="checkbox"/>
Home Sales		<input type="checkbox"/>
Internet Sales		<input type="checkbox"/>
Wholesale		<input type="checkbox"/>
Sale of animals to the public as pets by means of a fixed or minimum donation		<input type="checkbox"/>
Other (please state)		

Application Details				
Do you have any relevant training certificates or qualifications?		Yes	<input type="checkbox"/>	
		No	<input type="checkbox"/>	
If yes, please provide details of training certificates and qualifications				
Please provide details of your relevant experience				
Please provide details of the animals to be sold				
Type		Maximum Number	Details of accommodations including size	Age at which to be sold
Dogs/puppies*	<input type="checkbox"/>			
Cats/kittens*	<input type="checkbox"/>			
Rabbits	<input type="checkbox"/>			
Guinea Pigs	<input type="checkbox"/>			
Hamsters	<input type="checkbox"/>			
Rats, mice & gerbils	<input type="checkbox"/>			
Ferrets	<input type="checkbox"/>			
Parrots, parakeets and macaws	<input type="checkbox"/>			
Pigeons	<input type="checkbox"/>			
Other large birds (please specify)	<input type="checkbox"/>			
Budgerigars, finches and other small birds	<input type="checkbox"/>			
Snakes and lizards	<input type="checkbox"/>			
Tortoises	<input type="checkbox"/>			
Tropical Fish	<input type="checkbox"/>			

* subject to pending legislation

Marine Fish	<input type="checkbox"/>			
Cold Water Fish	<input type="checkbox"/>			
Other Species (please Specify)	<input type="checkbox"/>			

SECTION 9 – Licence to Hire out Horses

Please describe the accommodation available for horses

Stalls (Please give the number)

Boxes (Please give the number)

Covered yard (please give dimensions)

Open Yard (please give dimensions)

Please describe the land available for:

Grazing

Instruction or demonstrating (please give dimensions)

Exercise

Please describe the accommodation available for:

Forage and bedding

Equipment and saddlery

Please describe the accommodation available for:

Water supply and watering horses

Disposal of animal waste

Protection of horses in event of a fire, and fire precautions

Horses	
How many horses are kept under the terms of the Regulations at the present time?	
How many horses is it intended to keep under the terms of the Regulations during the licence period?	
Please provide the following details each of the horses currently kept (Details for additional horses should be submitted on a separate sheet):	
Name of horse	
Description including size	
Sex	
Age	
Horse passport number	
Age range of people who will ride this horse	
Management of the establishment	
Name of the manager/person with direct control of the establishment	
Address of the manager/person with direct control of the establishment	
Building name or number	
Street	
District	
City or Town	
County or Administrative Area	
Post Code	
Country	
Does the manager have any of the following certificates? (tick all that apply)	
Assistant Instructor's Certificate of the British Horse Society	<input type="checkbox"/>
Intermediate Instructor's Certificate of the British Horse Society	<input type="checkbox"/>

Instructor's certificate of the British Horse Society	<input type="checkbox"/>				
Fellowship of the British Horse Society	<input type="checkbox"/>				
Fellowship of the Institute of Horse	<input type="checkbox"/>				
Other (please specify)	<input type="checkbox"/>				
Please give details of the manager's relevant experience					
Does the licence holder or manager live at the establishment	<table border="0"> <tr> <td>Yes</td> <td><input type="checkbox"/></td> </tr> <tr> <td>No</td> <td><input type="checkbox"/></td> </tr> </table>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input type="checkbox"/>				
No	<input type="checkbox"/>				
What are the arrangements in the event of an emergency?					
Will a person who is under 18 years of age be left in charge of the establishment at any time?	<table border="0"> <tr> <td>Yes</td> <td><input type="checkbox"/></td> </tr> <tr> <td>No</td> <td><input type="checkbox"/></td> </tr> </table>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input type="checkbox"/>				
No	<input type="checkbox"/>				
Will a responsible person (of 16 years or older) 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)?	<table border="0"> <tr> <td>Yes</td> <td><input type="checkbox"/></td> </tr> <tr> <td>No</td> <td><input type="checkbox"/></td> </tr> </table>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input type="checkbox"/>				
No	<input type="checkbox"/>				
SECTION 10 – Licence for the Exhibition or Training of Performing Animals					
Type of business/performance					
TV/Film/Social Media	<input type="checkbox"/>				
Theatre	<input type="checkbox"/>				
Circus using domestic animals	<input type="checkbox"/>				
Exhibiting Animals	<input type="checkbox"/>				
Birds of prey shows/exhibits	<input type="checkbox"/>				

Other please state

Application Details

Kinds of animals to be trained and the number of each kind

Kind of animal

Please list species and number

Kind of animal

Please list species and number

Kind of animal

Please list species and number

Kind of animal

Please list species and number

Kinds of animals to be exhibited/encountered and the number of each kind

Kind of animal

Please list species and number

Kind of animal

Please list species and number

Kind of animal

Please list species and number

Kind of animal

Please list species and number

Proposed performance or exhibition

Describe the nature of the performance(s) or exhibition in which the animals will be used or for which they are to be trained, mentioning any apparatus which is used for the purpose of the performance or exhibition. The description must be sufficient to give a general idea of what is done by the animals taking part in the performance or exhibition. If it is an encounter please give details of what type of encounter and where these are to take place.

Approximate duration of the performance(s)

Number of times the performance will be given in one day

Length of time animal exhibited

How will the animals be transported

Where are the animals to be kept when not performing or being exhibited?

SECTION 11 – Premises to be licensed/where animals are to be trained

Name of premises/trading name

Building name or number

Street

District

City or Town

County or Administrative Area

Post Code

Country	
Telephone number of premises	
E-mail Address	
Do you have planning permission for this business use	Yes <input type="checkbox"/> No <input type="checkbox"/>
SECTION 12 – Accommodation and facilities	
Details of the quarters used to accommodate animals, including number, size and type of construction	
Exercise facilities and arrangements	
Heating arrangements:	
Method of ventilation of premises	
Lighting arrangements (natural & artificial)	
Water supply (if not already provided in Section 9)	
Facilities for food storage & preparation	
Arrangements for disposal of excreta, bedding and other waste material	
Isolation facilities for the control of infectious diseases	
Do you keep and maintain a register of animals	Yes <input type="checkbox"/> No <input type="checkbox"/>
How do you propose to minimise disturbance from noise	
Do you use your own vehicle to transport non-resident animals?	Yes <input type="checkbox"/> No <input type="checkbox"/>
SECTION 13 – Veterinary surgeon	
Name of usual veterinary surgeon	
Company name	
Building name or number	

Street	
District	
City or Town	
County or Administrative Area	
Post Code	
Country	
Telephone number	
E-mail Address	
SECTION 14 – Emergency Key Holder (Details for additional key holders should be submitted on a separate sheet)	
Do you have an emergency key holder	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please provide details of the emergency key holder	
Name	
Position/job title	
Building name or number	
Street	
District	
City or Town	
County or Administrative Area	
Post Code	
Country	
Daytime telephone number	
Evening/other telephone number	
Email address	

SECTION 15 – Public liability insurance (required for Hiring out horses and exhibiting/training/performing animals)

Do you have public liability insurance	Yes	<input type="checkbox"/>
	No	<input type="checkbox"/>

If yes, please provide details of the policy

Insurance company	
Policy number	
Period of cover	
Amount of cover (£m)	
Please state what steps you are taking to obtain such insurance	

SECTION 16 – Disqualifications and convictions

Has the applicant, or any person who will have control or management of the establishment, or any member of staff who will have contact with animals, 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 any person who will have control or management of the establishment, or any member of staff who will have contact with animals, been convicted of any offences under the Animal Welfare Act 2006?

Yes/No

Has the applicant, or any person who will have control or management of the establishment, or any member of staff who will have contact with animals, ever had a licence refused, revoked or cancelled?

Yes/No

If yes to any of these questions, please provide details

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SECTION 17 – Additional details

Please provide any additional information which you believe is relevant to the application

SECTION 18 – Additional Information

All applicants to tick to indicate that they have attached the following information:

A plan of the premises

Public liability insurance policy (if applicable)

Operating procedures (cleaning, feeding, exercise, etc.)

Emergency Plan (including fire)

Preventative Health Care Plan

Qualifications

Training records

I have made payment of £.....

Insert Receipt Number Issued for Payment of Fee.....

I understand that if I do not comply with the above requirements my application may be rejected.

SECTION 19 – Declaration

This section must be completed by the applicant (if you are an agent ensure this section is completed by the applicant)

I am aware of the provisions of the relevant Regulations. The details contained in the application form and any attached documents are correct to the best of my knowledge and belief.

I hereby authorise the Council to collect and retain information about me for the purpose of considering whether to grant a licence to operate an establishment under the Animal Welfare (Licensing of Activities Involving Animals) Regulations 2018. I understand that the Council may share information with other enforcement agencies for the purposes of checking the information and the prevention and detection of crime.

I hereby authorise the Council to share this information with external organisations for the purpose of carrying out these checks on the Council's behalf.

I hereby authorise Sunderland City Council to duplicate to other parties (subject to the terms and conditions of the Data Protection Act 2018) any documentation attached to this application form.

This authority is under a duty to protect the public funds it administers, and to this end may use the information you have provided on this form for the prevention and detection of fraud. It may also share the information with other bodies responsible for auditing and administering public funds for these purposes.

Ticking this box indicates that you have read and understood the above declaration

Full Name
Capacity
Signed
Date
SECTION 20. For Official Use Only
Date Application Received:
Application Received By:
Fee(s) Paid:
Receipt Number(s):

IMPORTANT SUBMISSION INFORMATION

Application forms and supporting documents should ideally be sent electronically to the animal licensing mailbox – animal.licensing@sunderland.gov.uk

If being posted as a hard copy, the application should go to the following address:

Animal Licensing Section
Trading Standards Service
City Development Directorate
Sunderland City Council
City Hall
Plater Way
Sunderland SR1 3AA

Payments should be made by debit/credit card by phoning our finance section on **0191 5205550**.