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

**Application for a licence to keep or train animals for exhibition**

*Please complete all the questions in the form. If you have nothing to record, please state "Not applicable" or "None"*

**Premises to be licensed**

|  |  |  |
| --- | --- | --- |
| **1** | **Premises to be licensed** | |
| 1.1 | Name of premises/trading name |  |
| 1.2 | Address of premises | «FULLADDR» |
| 1.3 | Telephone number of premises |  |
| 1.4 | Email address |  |
| 1.5 | Do you have planning permission for this business use. | **Yes/No** |

**Standard applicant profile section**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **1a** | **Agent** | | | | | |
| 1.1 | Are you an agent acting on behalf of the applicant | Yes |  | No |  | **If no, go to 2** |
| **1b** | **Further information about the Agent** | | | | | |
| 1.2 | Name |  | | | | |
| 1.3 | Address |  | | | | |
| 1.4 | Email |  | | | | |
| 1.5 | Main telephone number |  | | | | |
| 1.6 | Other telephone number |  | | | | |

| **2** | **Applicant details** | |
| --- | --- | --- |
| 2.1 | Name |  |
| 2.2 | Address |  |
| 2.3 | Email |  |
| 2.4 | Main telephone number |  |
| 2.5 | Other telephone number |  |

| **3a** | **Applicant Business** | | | | | |
| --- | --- | --- | --- | --- | --- | --- |
| 3.1 | Is your company registered with companies house | Yes |  | No |  | **If no, go to 3.3** |
| 3.2 | Registration Number |  | | | | |
| 3.3 | Is your business registered outside the UK |  | | | | |
| 3.4 | VAT Number |  | | | | |
| 3.5 | Legal status of the business ie sole trader, limited company, partnership |  | | | | |
| 3.6 | Your position in the business |  | | | | |
| 3.7 | The country where your head office is located. |  | | | | |
| **3b** | **Business Address – This should be your official address – The address required of you by law to receive all communication** | | | | | |
| 3.8 | Building name or number |  | | | | |
| 3.9 | Street |  | | | | |
| 3.10 | District |  | | | | |
| 3.11 | City or Town |  | | | | |
| 3.12 | County |  | | | | |
| 3.13 | Post Code |  | | | | |

**Application Details Section**

|  |  |  |
| --- | --- | --- |
| **1** | **Type of business/performance (please tick)** | |
| 1.1 | TV/Film/Social Media |  |
| 1.2 | Theatre |  |
| 1.3 | Circus using domestic animals |  |
| 1.4 | Exhibiting Animals |  |
| 1.5 | Animal Encounters |  |
| 1.6 | Birds of Prey shows/exhibits |  |
| 1.7 | Other please state |  |

| **2a** | **Application Details** | | | | | |
| --- | --- | --- | --- | --- | --- | --- |
| 2.1 | Have you been registered/licenced before | Yes |  | No |  | **If no, go to 2b** |
| 2.2 | Local Authority where registered/licenced |  | | | | |
| 2.3 | Give details of registration e.g type and numbers of animals, type of performance or exhibition. |  | | | | |
| **2b** | **Further information about the applicant** | | | | | |
| 2.4 | Stage name (if any) |  | | | | |

| **3a** | **Kinds of animal to be trained and the number of each kind 1 – if none go to 4** | | |
| --- | --- | --- | --- |
| 3.1 | Kind of animal |  | |
| 3.2 | Number |  | |
| 3.3 | Add another kind of Animal? | **Yes/No** | **If no, go to 4** |
| **3b** | **Kinds of animal to be trained and the number of each kind 2** | | |
| 3.4 | Kind of animal |  | |
| 3.5 | Number |  | |
| 3.6 | Add another kind of Animal? | **Yes/No** | **If no, go to 4** |
| **3c** | **Kinds of animal to be trained and the number of each kind 3** | | |
| 3.7 | Kind of animal |  | |
| 3.8 | Number |  | |
| 3.9 | If you intend to train further kinds of animals please attach a separate list of these animals and the numbers of each. | | |

| **4a** | **Kinds of animal to be exhibited/Encounter and the number of each kind – If none go to 5** | | |
| --- | --- | --- | --- |
| 4.1 | Kind of animal |  | |
| 4.2 | Number |  | |
| 4.3 | Add another kind of Animal? | **Yes/No** | **If no, go to 5** |
| **4b** | **Kinds of animal to be exhibited/Encounter and the number of each kind 2** | | |
| 4.4 | Kind of animal |  | |
| 4.5. | Number |  | |
| 4.6 | Add another kind of Animal? | **Yes/No** | **If no, go to 5** |
| **4c** | **Kinds of animal to be exhibited/Encounter and the number of each kind 3** | | |
| 4.7 | Kind of animal |  | |
| 4.8. | Number |  | |
| 4.9 | If you intend to exhibit further kinds of animals please attach a separate list of these animals and the numbers of each. | | |

| **5** | **Proposed Performance or Encounter** | |
| --- | --- | --- |
| 5.1 | Describe the nature of the performances in which the animals will be exhibited or for which they are to be trained, mentioning any apparatus which is used for the purpose of the performance. The description must be sufficient to give a general idea of what is done by the animals taking part in the performance. If it is an animal encounter please give details of what type of encounter and where these are to take place. |  |
| 5.2. | Approximate duration of the performances. |  |
| 5.3 | Number of times the performance will be given in one day. |  |
| 5.4 | How will the animals be transported |  |
| 5.5 | Where are the animals to be kept when not performing or being exhibited if not at registered address. |  |

| **6** | **Veterinary surgeon** | |
| --- | --- | --- |
| 6.1 | Name of usual veterinary surgeon |  |
| 6.2 | Company name |  |
| 6.3 | Address |  |
| 6.4 | Telephone number |  |
| 6.5 | Email address |  |

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| --- | --- | --- | --- |
| **7a** | **Emergency key holder** | | |
| 7.1 | Do you have an emergency key holder? | **Yes / No** | **If no, go to 8** |
| 7.2 | Name |  | |
| 7.3 | Position/job title |  | |
| 7.4 | Address |  | |
| 7.5 | Daytime telephone number |  | |
| 7.6 | Evening/other telephone number |  | |
| 7.7 | Email address |  | |
| 7.8 | Add another person? | **Yes / No** | **If no, go to 8** |
| **7b** | **Emergency key holder 2** | | |
| 7.9 | Name |  | |
| 7.10 | Position/job title |  | |
| 7.11 | Address |  | |
| 7.12 | Daytime telephone number |  | |
| 7.13 | Evening/other telephone number |  | |
| 7.14 | Email address |  | |

|  |  |  |  |
| --- | --- | --- | --- |
| **8** | **Public liability insurance** | | |
| 8.1 | Do you have public liability insurance? | **Yes / No** | **If no, go to 8.7** |
| 8.2 | Please provide details of the policy |  | |
| 8.3 | Insurance company |  | |
| 8.4 | Policy number |  | |
| 8.5 | Period of cover |  | |
| 8.6 | Amount of cover (£) |  | |
| 8.7 | Please state what steps you are taking to obtain such insurance. |  | |

| **9** | **Disqualifications and convictions** | | |
| --- | --- | --- | --- |
|  | Has the applicant, or any person who will have control or management of the establishment, ever been disqualified from: | | |
| 9.1 | Keeping a pet shop? | | **Yes/No** |
| 9.2 | Keeping a dog? | | **Yes/No** |
| 9.3 | Keeping an animal boarding establishment? | | **Yes/No** |
| 9.4 | Keeping a riding establishment? | | **Yes/No** |
| 9.5 | Having custody of animals? | | **Yes/No** |
| 9.6 | Has the applicant, or any person who will have control or management of the establishment, been convicted of any offences under the Animal Welfare Act 2006? | | **Yes/No** |
| 9.7 | 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** |
| 9.8 | If yes to any of these questions, please provide details, |  | |

| **10** | **Additional details** | |
| --- | --- | --- |
|  | Please check local guidance notes and conditions for any additional information which may be required | |
| 10.1 | Additional information which is required or may be relevant to the application |  |

**Declaration Section**

| **1** | **Model Licence Conditions & Guidance** | |
| --- | --- | --- |
|  | All applicants to tick that they have read the applicable model licence conditions & guidance | |
| 1.1 | To keep animals for training or exhibition |  |

| **2** | **Additional Information** | |
| --- | --- | --- |
|  | Please attach the following Information | |
| 2.1 | A plan of the premises |  |
| 2.2 | Insurance policy |  |
| 2.6 | Qualifications |  |

|  |  |  |
| --- | --- | --- |
| **3** | **Declaration** | |
| 3.1 | This section must be completed by the applicant. If you are an agent please ensure this section is completed by the applicant. | |
| 3.2 | I am aware of the provisions of the relevant Act and model licence conditions. The details contained in the application form and any attached documentation are correct to the best of my knowledge and belief. | |
| 3.3 | Signing this box indicates you have read and understood the above declaration |  |
| 3.4 | Full Name |  |
| 3.5 | Capacity |  |
| 3.6 | Date |  |

**Fees**

|  |  |  |
| --- | --- | --- |
| **1** | **Payment of Fee** | |
| 1.1 | You are able to pay the fee for this licence by cheque posted to our office or by credit/debit card over the telephone or via BACS payment. We cannot proceed with a licence until the payment has been received. A list of up to date fees is available on our website. | |
| 1.2 | Payment by telephone call 0300 1234 000 and select Option 7 (All other enquiries), please have your credit/debit card details ready.   * For premises in Babergh DC **please quote code B4103/H9140**, * For premises within Mid Suffolk DC **quote code M4103/H9140** * You will be given a payment reference number. * You must write that number on this form in the space below at question 1.5. | |
| 1.3 | Payment by cheque   * For premises within Babergh District Council please make your cheque payable to Babergh District Council * For premises within Mid Suffolk District Council please make your cheque payable to Mid Suffolk District Council | |
| 1.4 | You can now pay via our website using the following link <https://www.babergh.gov.uk/business/licensing/boarding-for-cats-and-dogs/> this can be used regardless of the activity you are applying for. | |
| 1.5 | Please complete one of the boxes below | |
| 1.6 | I have paid by telephone | Insert reference number and amount paid |
| 1.7 | I enclose a cheque for |  |
| 1.8 | I have paid online | Payment Reference Number: |

**Completed Application Forms**

|  |  |
| --- | --- |
| **1** | **Completed Application Forms** |
| 1.1 | Completed application forms and the relevant documentation asked for in this application can be emailed to [foodsafety@baberghmidsuffolk.gov.uk](mailto:foodsafety@baberghmidsuffolk.gov.uk) or sent by post to Babergh and Mid Suffolk District Councils, Endeavour House, 8 Russell Road, Ipswich, IP1 2BX |

**Public Register**

We publish a register of our animal licences on our website. This information includes the type of licence and the licenced address.

**Data Protection**

Babergh District Council and Mid Suffolk District Council (BMSDC) will be Data Controller of the information you are providing. That means BMSDC will be responsible for looking after it as required by the Data Protection Act 2018. They will only use the information for the purpose explained on a form. As required by the Data Protection Act 2018 the information will be kept safe, secure, processed and only shared for those purposes or where it is allowed by law. For more information on how we do this and your rights in regards to your personal information and how to access it, visit our website page [How we use your information](http://www.babergh.gov.uk/the-council/your-right-to-information/privacy-policy/), or call customer services on 0300 1234000 and ask to speak to the Data Protection Officer.