

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

Application for a licence to carry on the activity of selling animals as pets

Please complete all the questions in the form.

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

1	Section 1 – Applicant Profile Section	
1.1	Reference for office use only	
1.2	Your reference	

2	Agent	
2.1	Are you an agent acting on behalf of the applicant	Yes <input type="checkbox"/> No <input type="checkbox"/> If no go to 3 <input type="checkbox"/>
2b	Further information about the Agent	
2.2	Name	
2.3	Address	
2.4	Email	
2.5	Main telephone number	
2.6	Other telephone number	

3	Applicant details	
3.1	Name	
3.2	Address	
3.3	Email	
3.4	Main telephone number	
3.5	Other telephone number	
3.6	Applying as a business or organisation, including a sole trader	Yes <input type="checkbox"/> No <input type="checkbox"/>
3.7	Applying as an individual	Yes <input type="checkbox"/> No <input type="checkbox"/>

4	Applicant Business	
4.1	Is your company registered with companies house	yes <input type="checkbox"/> No <input type="checkbox"/> If no go to 4.3 <input type="checkbox"/>
4.2	Registration Number	

4	Applicant Business		
4.3	Is your business registered outside the UK		
4.4	VAT Number		
4.5	Legal status of the business		
4.6	Your position in the business		
4.7	The country where your head office is located.		
4b	Business Address – This should be your official address – The address required of you by law to receive all communication		
4.8	Building name or number		
4.9	Street		
4.10	District		
4.11	City or Town		
4.12	County or administrative area		
4.13	Post Code		
4.14	Country		

5	Type of Business		
5.1	Pet Shop		
5.2	Home Sales		
5.3	Internet Sales		
5.4	Wholesales		
5.5	Third Party Sales		
5.6	Hobby Sales (Pet Fairs)		
5.7	Sale of animals to the public as pets by means of a fixed or minimum donation		
5.8	Other please state		

6	Type of Application	New		Renewal		If new, go to 6.a	
6.2	Existing licence number						
6a	Further details about the applicant						
6.3	Do you have any training certificates or qualifications?	Yes / No	If no, go to 6.5				
6.4	Please provide details of training certificates and qualifications						
6.5	Please provide details of relevant experience						
6.6	Date of birth						

7	Premises to be licensed		
7.1	Name of premises/trading name		
7.2	Address of premises		
7.3	Telephone number of premises		
7.4	Email address		

7.5	Do you have planning permission for this business use.	Yes/No	
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8 Accommodation and facilities			
8.1	Number and size of rooms to be used		
8.2	Heating arrangements		
8.3	Method of ventilation of premises		
8.4	Lighting arrangements (natural & artificial)		
8.5	Water supply		
8.6	Facilities for food storage & preparation		
8.7	Arrangements for disposal of excreta, bedding and other waste material		
8.8	Isolation facilities for the control of infectious diseases		
8.9	Fire precautions/equipment and arrangements in the case of fire		
8.10	Do you keep and maintain a register of animals?	Yes / No	
8.11	When the premises are closed what arrangements are in place to ensure the welfare of animals.		

9 Animals to be sold					
Please provide details of the animals to be sold					
	Type		Maximum Number	Details of accommodation including size	Age at which to be sold
9.1	Dogs / puppies	Yes/No			
9.2	Cats /kittens	Yes/No			
9.3	Chipmunks	Yes/No			
9.4	Rabbits & cavies	Yes/No			

9		Animals to be sold			
Please provide details of the animals to be sold					
9.5	Hamsters	Yes/No			
9.6	Rats, mice & gerbils	Yes/No			
9.7	Larger domesticated mammals, e.g. goats, pot-bellied pigs	Yes/No			
9.8	Primates e.g. marmosets	Yes/No			
9.9	Parrots, parakeets and macaws	Yes/No			
9.10	Pigeons	Yes/No			
9.11	Other large birds (please specify)	Yes/No			
9.12	Budgerigars, finches and other small birds	Yes/No			
9.13	Tortoises	Yes/No			
9.14	Snakes and lizards	Yes/No			
9.15	Tropical fish	Yes/No			
9.16	Marine fish	Yes/No			
9.17	Cold water fish	Yes/No			
9.18	Any other species (please specify)	Yes/No			

10		Veterinary surgeon	
10.1	Name of usual veterinary surgeon		
10.2	Company name		
10.3	Address		
10.4	Telephone number		
10.5	Email address		

11		Emergency key holder	
11.1	Do you have an emergency key holder?	Yes / No	If no, go to 12
11.2	Name		
11.3	Position/job title		
11.4	Address		

11.5	Daytime telephone number		
11.6	Evening/other telephone number		
11.7	Email address		
11.8	Add another person?	Yes / No	If yes, 11.2 to 11.8 will be repeated

12	Disqualifications and convictions		
	Has the applicant, or any person who will have control or management of the establishment, ever been disqualified from:		
12.1	Keeping a pet shop?	Yes/No	
12.2	Keeping a dog?	Yes / No	
12.3	Keeping an animal boarding establishment?	Yes/No	
12.4	Keeping a riding establishment?	Yes/No	
12.5	Having custody of animals?	Yes/No	
12.6	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	
12.7	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	
12.8	If yes to any of these questions, please provide details,		

13	Additional details		
	Please check local guidance notes and conditions for any additional information which may be required		
13.1	Additional information which is required or may be relevant to the application		

14	Payment		
14.1	Payment must be made at the time of making the application		
14.2	Follow the instructions at the Animal Licensing page: at leicester.gov.uk		

15	Model Licence Conditions & Guidance		
	All applicants to tick that they have read the applicable model licence conditions & guidance		
15.1	Pet Vending		
15.2	Animal Boarding		
15.3	Performing Animals		
15.4	Riding Establishments		
15.5	The Breeding and Sale of Dogs		

16	Additional Information		
	Please attach the following Information with the printed application form		
16.1	A plan of the premises		
16.2	Insurance policy		
16.3	Operating procedures		
16.4	Risk Assessments (including Fire)		
16.5	Infection control procedure		
16.6	Qualifications		
16.7	Training records		

17	Declaration		
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	This section must be completed by the applicant. If you are an agent please ensure this section is completed by the applicant.	
17.1	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.	
17.2	Ticking this box indicates you have read and understood the above declaration	
17.3	Full Name	
17.4	Capacity	
17.5	Date	

NOTE

Any personal data that you provide will be processed in accordance with current data protection laws. It will be used by Leicester City Council and our partners to deliver and improve services and fulfil our legal duties. We will not disclose any personal information to anyone else unless required or allowed to do so by law. Read more about how we use personal data in our Privacy Notice on our website at.leicester.gov.uk