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

**Application/Renewal for a licence to breed dogs**

*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 |  |
| 2.6 | Are you certified by a UKAS accredited body?  | Yes |  | No |  | **If no, go to 3** |
| 2.7 | How long have you held this accreditation? |  |
| 2.8 | Who is this accreditation with? |  |

| **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 |  |
| 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**

| **1a** | **Type of Application** |
| --- | --- |
| 1.1 | Type of Application | New |  | Renewal |  |  |
| 1.2 | Existing licence number |  |
| **1b** | **Animals to be accommodated** |
| 1.3 | Wholly Indoors |  | Wholly outdoors |  | Combination of outdoors and indoors |  |
| 1.4 | Breeds of dogs concerned  |  |
| 1.5 | Number of bitches kept for breeding. |  |
| 1.6 | Owned by the applicant |  | Co owned by the applicant |  | On breeding terms |  |
| 1.7 | Provide details of the ages of bitches kept for breeding. |  |
| 1.8 | Number of studs kept |  |
| 1.9 | Owned by the applicant |  | Co owned by the applicant |  | On breeding terms |  |
| 1.10 | Provide details of the ages of the studs kept |  |

| **2** | **Accommodation and facilities** |
| --- | --- |
|  | **If a renewal and there are no changes go to the next section** |
| 2.1 | Details of the quarters used to accommodate animals, including number, size and type of construction |  |
| 2.2. | Exercise facilities and arrangements |  |
| 2.3 | Heating arrangements |  |
| 2.4 | Method of ventilation of premises |  |
| 2.5 | Lighting arrangements (natural & artificial) |  |
| 2.6 | Water supply |  |
| 2.7 | Facilities for food storage & preparation |  |
| 2.8 | Arrangements for disposal of excreta, bedding and other waste material |  |
| 2.9 | Isolation facilities for the control of infectious diseases |  |
| 2.10 | Fire precautions/equipment and arrangements in the case of fire |  |
| 2.11 | Do you keep and maintain a register of animals? | **Yes/No** |

| **3** | **Veterinary surgeon** |
| --- | --- |
| 3.1 | Name of usual veterinary surgeon |  |
| 3.2 | Company name |  |
| 3.3 | Address |  |
| 3.4 | Telephone number |  |
| 3.5 | Email address |  |

|  |  |
| --- | --- |
| **4a** | **Emergency key holder** |
| 4.1 | Do you have an emergency key holder? | **Yes/No** | **If no, go to 5** |
| 4.2 | Name |  |
| 4.3 | Position/job title |  |
| 4.4 | Address  |  |
| 4.5 | Daytime telephone number |  |
| 4.6 | Evening/other telephone number |  |
| 4.7 | Email address |  |
| 4.8 | Add another person? | **Yes/No** | **If no, go to 5** |
| **4b** | **Emergency key holder 2** |
| 4.9 | Do you have an emergency key holder? | **Yes/No** | **If no, go to 5** |
| 4.10 | Name |  |
| 4.11 | Position/job title |  |
| 4.12 | Address  |  |
| 4.13 | Daytime telephone number |  |
| 4.14 | Evening/other telephone number |  |
| 4.15 | Email address |  |

|  |  |
| --- | --- |
| **5** | **Public liability insurance** |
| 5.1 | Do you have insurance? | **Yes/No** | **If no, go to 5.3** |
| 5.2 | Please provide us with a copy of your insurance |  |
| 5.3 | Please state what steps you are taking to obtain such insurance |  |

|  |  |
| --- | --- |
| **6** | **Management of the Establishment** |
| 6.1 | Do you hold any relevant formal qualifications  | **Yes/No** | **If no, go to 6.3** |
| 6.2 | Please list relevant qualifications. |  |
| 6.3 | Do you employee any staff | **Yes/No** | **If no, go to7** |
| 6.4 | How many staff do you employee |  |
| 6.5 | What training qualifications do they hold? |  |

| **7** | **Disqualifications and convictions** |
| --- | --- |
|  | Has the applicant, or any person who will have control or management of the establishment, ever been disqualified from: |
| 7.1 | Keeping a pet shop?  | **Yes/No** |
| 7.2 | Keeping a dog?  | **Yes/No** |
| 7.3 | Keeping an animal boarding establishment? | **Yes/No** |
| 7.4 | Keeping a riding establishment?  | **Yes/No** |
| 7.5 | Having custody of animals?  | **Yes/No** |
| 7.6 | 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** |
| 7.7 | 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** |
| 7.8 | If yes to any of these questions, please provide details,  |  |

| **8** | **Additional details** |
| --- | --- |
|  | Please check local guidance notes and conditions for any additional information which may be required |
| 8.1 | 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 | Breeding Dogs |  |

| **2** | **Additional Information**  |
| --- | --- |
|  | Please attach the following Information |
| 2.1 | A plan of the premises |  |
| 2.2 | Insurance |  |
| 2.3 | 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 Receipt 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 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.