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

**Application for a licence to breed dogs**

This form is for new and renewal applications for the activities indicated above.

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

**Part A - Applicant details**

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| **1** | **Reference number** |  |
| 1.1 | System reference Number (if known) |  |
| 1.2 | Your reference (if known) |  |

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| **2a** | **Agent** |  |
| 2.1 | Are you an agent acting on behalf of the applicant | **Yes/No** (if no, go to 3.1) |
| **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 |  |

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| **3** | **Applicant details** |  |
| 3.1 | Name |  |
| 3.2 | Address |  |
| 3.3 | Email |  |
| 3.4 | Main telephone number |  |
| 3.5 | Other telephone number |  |
| 3.6 | Date of birth |  |
| 3.7 | Are you applying as a business or organisation, including a sole trader | **Yes/No** |
| 3.8 | Are you applying as an individual | **Yes/No** |

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| **4a** | **Applicant Business** |  |
| 4.1 | Is your company registered with companies house | **Yes/No (If no, go to 4.3)** |
| 4.2 | Registration Number |  |
| 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 |  |

**Part B – Activity details**

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

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| **2** | **Premises to be licensed** |  |
| 2.1 | Name of premises/trading name |  |
| 2.2 | Address of premises |  |
| 2.3 | Telephone number of premises |  |
| 2.4 | Email address |  |
| 2.51 | Do you have planning permission for this business use? | **Yes/No** |
| 2.52 | Is any planning application pending? | **Yes/No** |

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| **3** | **Accommodation and facilities** |  |
| 3.1 | Details of the quarters used to accommodate animals, including number, size and type of construction |  |
| 3.2. | Exercise facilities and arrangements |  |
| 3.3 | Heating arrangements: |  |
| 3.4 | Method of ventilation of premises |  |
| 3.5 | Lighting arrangements (natural & artificial) |  |
| 3.6 | Water supply |  |
| 3.7 | Facilities for food storage & preparation |  |
| 3.8 | Arrangements for disposal of excreta, bedding and other waste material |  |
| 3.9 | Isolation facilities for the control of infectious diseases |  |
| 3.10 | Fire precautions/equipment and arrangements in the case of fire |  |
| 3.11 | Do you keep and maintain a register of animals? | **Yes/No** |
| 3.12 | How do you propose to minimise disturbance from noise? |  |

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| **4** | **Veterinary surgeon** |  |
| 4.1 | Name of usual veterinary surgeon |  |
| 4.2 | Company name |  |
| 4.3 | Address |  |
| 4.4 | Telephone number |  |
| 4.5 | Email address |  |

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| **5a** | **Emergency key holder** |  |
| 5.1 | Do you have an emergency key holder? | **Yes/No (If no, go to 6.1)** |
| 5.2 | Name |  |
| 5.3 | Position/job title |  |
| 5.4 | Address |  |
| 5.5 | Daytime telephone number |  |
| 5.6 | Evening/other telephone number |  |
| 5.7 | Email address |  |
| 5.8 | Add another person? | **Yes/No (If no, go to 6.1)** |
| **5b** | **Emergency key holder 2** |  |
| 5.9 | Name |  |
| 5.10 | Position/job title |  |
| 5.11 | Address |  |
| 5.12 | Daytime telephone number |  |
| 5.13 | Evening/other telephone number |  |
| 5.14 | Email address |  |

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| **6** | **Public liability insurance** |  |
| 6.1 | Do you have public liability insurance? | **Yes/No (If no, go to 6.7)** |
| 6.2 | Please provide details of the policy |  |
| 6.3 | Insurance company |  |
| 6.4 | Policy number |  |
| 6.5 | Period of cover |  |
| 6.6 | Amount of cover (£) |  |
| 6.7 | Please state what steps you are taking to obtain such insurance |  |

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| **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 |  |

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| **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. |

**Part C- Declaration section**

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| **1** | **Model Licence Conditions & Guidance** |  |
|  | Please tick to confirm you have read the relevant licence conditions & guidance |  |
| 1.1 | Dog breeding |  |

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| **2** | **Additional information** |  |
|  | Please attach the following relevant information. Tick alongside the information to confirm it has been enclosed with the application. |  |
| 2.1 | A plan of the premises |  |
| 2.2 | Insurance policy |  |
| 2.3 | Operating procedures |  |
| 2.4 | Risk Assessments (including Fire) |  |
| 2.5 | Infection control procedure |  |
| 2.6 | Qualifications |  |
| 2.7 | Training records |  |

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| **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 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 |  |

Please send completed forms to; Licensing, Reigate and Banstead Borough Council, Town Hall, Castlefield Road. Reigate, Surrey RH2 0SH

Email; [licensing@reigate-banstead.gov.uk](mailto:licensing@reigate-banstead.gov.uk)

Telephone; 01737 276672

**Data Protection Notice**

We will store and may further process the information you provide. Applicant details will be displayed on our public register online. Our lawful basis for doing this enables us to carry out our public duty to administer animal welfare licensing legislation. Our privacy notice relating to our storage and sharing of information is published on our web site [www.reigate-banstead.gov.uk](http://www.reigate-banstead.gov.uk)