

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

Application for a licence to sell animals

Standard applicant profile section							
Reference number							
System reference Number							
Your reference							
Agent							
Are you an agent acting on beha	If y	es		No			
of the applicant							
Further information about the	Ager	nt					
Name							
Address							
Email							
Main telephone number							
Other telephone number						1	
Applicant details							
Name							
Address							
Email							
Main telephone number							
Other telephone number		·		No			
Applying as a business or	ľ	es		No			
organisation, including a sole trader							
Applying as an individual		es		No			
Further information about the				110			
Date of birth							
Applicant Business							
Is your company registered with	V	es		No			
companies house							
Registration Number			•		•		
Is your business registered							
outside the UK							
VAT Number							
Legal status of the business							
Your position in the business							
The country where your head							
office is located.							
Business Address – This should be your official address – The address required of you by law to receive all communication							
Building name or number		-					
Street							
District							
City or Town							
5, 5. 15	1						

County or administrative area						
Post Code						
Country						
If you have nothing	complete all th to record, plea			"None	, "	
Type of Business						
Pet Shop						
Home Sales						
Internet Sales						
Wholesales						
Third Party Sales						
Hobby Sales (Pet Fairs)						
Sale of animals to the public as pets by means of a fixed or minimum donation						
Other please state						
Type of Application	New	Renewal				
Existing licence number						
Further details about the applica	nt					
Do you have any training certificates or qualifications?	Yes / No					
Please provide details of training certificates and qualifications						
Please provide details of relevant experience						
Date of birth						
Premises to be licensed	Γ					
Name of premises/trading name						
Address of premises						-
Telephone number of premises						
Email address						
Do you have planning permission for this business use.	Yes/No					
Accommodation and facilities						
Number and size of rooms to be used						
Heating arrangements						
Method of ventilation of premises						

Lighting arrangements (natural & artificial)

Water supply		
Facilities for food storage & preparation		
Arrangements for disposal of excreta, bedding and other waste material		
Isolation facilities for the control of infectious diseases		
Fire precautions/equipment and arrangements in the case of fire		
Do you keep and maintain a register of animals?	Yes / No	
When the premises is closed what arrangements are in place to ensure the welfare of animals.		

Animals to be sold				
Please provide details of the anir	nals to be	sold		
Туре		Maximu m Number	Details of accommodation including size	Age at which to be sold
Dogs / puppies	Yes/N o			
Cats /kittens	Yes/N o			
Chipmunks	Yes/N o			
Rabbits & cavies	Yes/N o			
Hamsters	Yes/N o			
Rats, mice & gerbils	Yes/N o			
Larger domesticated mammals, e.g. goats, pot-bellied pigs	Yes/N o			
Primates e.g. marmosets	Yes/N o			
Parrots, parakeets and macaws	Yes/N o			
Pigeons	Yes/N o			
Other large birds (please specify)	Yes/N o			
Budgerigars, finches and other small birds	Yes/N o			
Tortoises	Yes/N o			
Snakes and lizards	Yes/N o			
Tropical fish	Yes/N o			

Animals to be sold						
Please provide details of the anim		sold			T	
Marine fish	Yes/N					
Cold water fish	o Yes/N					
Cold water fish	0					
Any other species (please	Yes/N					
specify)	0					
			1		1	1
Veterinary surgeon	_					
Name of usual veterinary surgeon	1					
Company name						
Address						
Telephone number						
Email address						
Emergency key holder	T					
Do you have an emergency key holder?	Yes / N	No				
Name						
Position/job title						
Address						
Daytime telephone number						
Evening/other telephone number						
Email address						
Add another person?	Yes / N	No				
Disqualifications and convictions						
Has the applicant, or any person who will have control or management of the establishment, 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	1		
Having custody of animals?			Yes/No			
Has the applicant, or any person who will have						
control or management of the establishment, been			Yes/No			
convicted of any offences under the Animal						
Welfare Act 2006?						
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			
If yes to any of these questions, p						
details,						

Additional details				
	and conditions for any additional information which			
Please check local guidance notes and conditions for any additional information which may be required				
may be required				
Additional information which is requ	uired or			
may be relevant to the application				
Payment				
Payment must be made at the tin	ne of making the application			
Model Licence Conditions & Gui				
All applicants to tick that they have	read the applicable model licence conditions & guidance			
Pet Vending				
Animal Boarding				
Performing Animals				
Riding Establishments				
The Breeding and Sale of Dogs				
Additional Information				
Please attach the following Infor	mation			
A plan of the premises				
Insurance policy				
Operating procedures				
Risk Assessments (including				
Fire)				
Infection control procedure				
Qualifications				
Training records				
Training records				
Declaration				
	by the applicant. If you are an agent please ensure			
this section is completed by the				
	he relevant Act and model licence conditions. The			
	on form and any attached documentation are correct			
to the best of my knowledge and				
Ticking this box indicates you				
have read and understood the				
above declaration				
Full Name				
i uli Nallie				
Capacity				
σαρασιτή				
Date				
Date				