

**THE ANIMAL WELFARE (LICENSING OF ACTIVITIES INVOLVING ANIMALS) (ENGLAND) REGULATIONS 2018 LICENCE APPLICATION FOR:**

**SELLING ANIMALS AS PETS**

***Please complete all sections with as much information as possible. Any omissions or errors may delay the processing of your application.***

# LICENCE DETAILS

New Application  Renewal

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Pet Shop |  | Home Sales |  | Wholesale |  |
|  |  |  |  |  |  |

# DETAILS OF APPLICANT

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Operator |  | DOB |  |
| Home Address |  | | |
| Telephone |  | | |
| e-mail |  | | |

1. **PREMISES DETAILS**

|  |  |
| --- | --- |
| Trading Name |  |
| Address |  |
| Telephone |  |
| e-mail |  |
|  | |
| Details of any webpages or  social media |  |

1. **ACCOMMODATION AND FACILITIES (please specify in detail how you meet these requirements)**

|  |  |  |
| --- | --- | --- |
| a. | Number and size of rooms at the premises |  |
| b. | Heating arrangements |  |
| c. | Method of ventilation |  |
| d. | Lighting arrangement (both natural and artificial) |  |
| e. | Water supply |  |
| f. | Facilities for food storage and preparation |  |
| g. | Arrangements for disposal of excreta, bedding and other waste material |  |
| h. | Isolation facilities for the control of infectious diseases |  |
| i. | Fire precautions/equipment and arrangements in the case of fire |  |
| j. | Arrangements for keeping a register/record of animals |  |
| k. | Normal times of attendance at the premises when they are closed to public |  |
| l. | Details of training certificates or other qualification and experience in pet management |  |

1. **SCHEDULE OF ANIMALS (please give details)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Type of animals | Proposed numbers | Details of accommodation e.g size of tank/cage/aviary, numbers per tank/cage/aviary | Age at which sold |
|  | Puppies & kittens |  |  |  |
|  | Parrots, parakeets and macaws |  |  |  |
| Other Birds | Budgerigars, finches and other small birds |  |  |  |
| Other large birds |  |  |  |
| Small Mammals | Rabbits and Cavies |  |  |  |
| Hamsters |  |  |  |
| Rats, Mice, Gerbils |  |  |  |
| Reptiles | Tortoises |  |  |  |
| Snakes and Lizards |  |  |  |
|  | Amphibians |  |  |  |
| Fish | Fish: Cold water |  |  |  |
| Fish: Marine |  |  |  |
| Fish: Tropical |  |  |  |
|  | Other  (specify details) |  |  |  |

1. **DISQUALIFICATIONS AND CONVICTIONS**

Has the applicant or any person who will have control or management of the establishment ever been:-

**Please select box**

|  |  |  |
| --- | --- | --- |
| a. disqualified from keeping a pet shop, dog, animal boarding establishment, riding establishment or custody of any animal? | YES | NO |
| b. convicted of any offence(s) under Animal Welfare or Wildlife Legislation? | YES | NO |
| c. refused a licence refused or had one revoked or cancelled? | YES | NO |

If **YES** provide further details:

# SUPPORTIVE INFORMATION

**Please enclose the following documents in support of your application, failure to provide this information may delay your application.**

Operating procedures as outlined in the Regulations for example risk assesments, feeding regimes, cleaning procedures, transport procedure, infection control, emergency procedures

Training records and qualifications

Please provide any additional supportive information you feel is relevant to your application:

# DECLARATION

I certify that to the best of my knowledge and belief, the above particulars are true and apply for a licence at the premises, as specified, under the LAIA Regulations.

I have read and understood the legislative requirement, licensing conditions and associated guidance in relation to such activities.

I agree to pay the appropriate licence fees. Note payment can only be made by a debit /credit card via an online link which will be sent to you when we have received your application.

I agree to the Council sharing information with relevant agencies such as the Council’s appointed Veterinary Surgeons.

|  |  |  |  |
| --- | --- | --- | --- |
| Signed |  | Date |  |
| Designation |  | | |

Send to: **Department of Place**

Environmental Health

5th Floor, Britannia House

Hall Ings, Bradford, BD1 1HX

Email: eh.admi eh.admin@bradford.gov.uk