



## The Animal Welfare (Licensing of Activities Involving Animals) Regulations 2018 Application for a licence to sell animals

|     | , pp  |          |                  |        |                   |   |
|-----|---|----------|------------------|--------|-------------------|---|
| 1   | Standard applicant profile section  |          |                  |        |                   |   |
|     | Please complete   | •        |                  | " or " | None"             | 1 |
| 2   | Type of Business  |          |                  |        |                   |   |
| 2.1 | Pet Shop  |          |                  |        |                   |   |
| 2.2 | Home Sales  |          |                  |        |                   |   |
| 2.3 | Internet Sales  |          |                  |        |                   |   |
| 2.4 | Wholesales  |          |                  |        |                   |   |
| 2.5 | Third Party Sales   |          |                  |        |                   |   |
| 2.6 | Hobby Sales (Pet Fairs)   |          |                  |        |                   |   |
| 2.7 | Sale of animals to the public as pets by means of a fixed or minimum donation |          |                  |        |                   |   |
| 2.8 | Other please state  |          |                  |        |                   |   |
|     |   |          |                  |        |                   |   |
| 3   | Type of Application   | New      | Renewal          |        | If new, go to 3.a |   |
| 3.2 | Existing licence number   |          |                  |        |                   |   |
| 3a  | Further details about the applicant   |          |                  |        |                   |   |
| 3.3 | Do you have any training certificates or qualifications?                      | Yes / No | If no, go to 3.5 | )      |                   |   |
| 3.4 | Please provide details of training certificates and qualifications            |          |                  |        |                   |   |
| 3.5 | Please provide details of relevant experience                                 |          |                  |        |                   |   |
| 3.6 | Date of birth   |          |                  |        |                   |   |
|     |   |          |                  |        |                   |   |
| 4   | Premises to be licensed   |          |                  |        |                   |   |
| 4.1 | Name of premises/trading name   |          |                  |        |                   |   |
| 4.2 | Address of premises   |          |                  |        |                   |   |
| 4.3 | Telephone number of premises  |          |                  |        |                   |   |
| 4.4 | Email address   |          |                  |        |                   |   |
| 4.5 | Do you have planning permission for this business use?                        | Yes/No   |                  |        |                   |   |
| 5   | Accommodation and facilities  |          |                  |        |                   |   |
| 5.1 | Number and size of rooms to be used   |          |                  |        |                   |   |
|     | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1   |          |                  |        |                   |   |
| 5.2 | Heating arrangements  |          |                  |        |                   |   |
| 5.3 | Method of ventilation of premises   |          |                  |        |                   |   |
| 5.4 | Lighting arrangements (natural & artificial)                                  |          |                  |        |                   |   |
| 5.5 | Water supply  |          |                  |        |                   |   |





| 5.6  | Facilities for food storage & preparation  |          |  |
|------|--|----------|--|
| 5.7  | Arrangements for disposal of excreta, bedding and other waste material                       |          |  |
| 5.8  | Isolation facilities for the control of infectious diseases                                  |          |  |
| 5.9  | Fire precautions/equipment and arrangements in the case of fire                              |          |  |
| 5.10 | Do you keep and maintain a register of animals?  | Yes / No |  |
| 5.11 | When the premises is closed what arrangements are in place to ensure the welfare of animals. |          |  |

| 6    | Animals to be sold                               |        |                   |   |                         |  |
|------|--|--------|-------------------|---|-------------------------|--|
|      | Please provide details of the animals to be sold |        |                   |   |                         |  |
|      | Туре   |        | Maximum<br>Number | Details of accommodation including size | Age at which to be sold |  |
| 6.1  | Dogs / puppies                                   | Yes/No |                   |   |                         |  |
| 6.2  | Cats /kittens                                    | Yes/No |                   |   |                         |  |
| 6.3  | Rabbits  | Yes/No |                   |   |                         |  |
| 6.4  | Guinea Pigs                                      | Yes/No |                   |   |                         |  |
| 6.5  | Ferrets  | Yes/No |                   |   |                         |  |
| 6.6  | Domestic small rodents                           | Yes/No |                   |   |                         |  |
| 6.7  | Other non-domestic species (mammals)             | Yes/No |                   |   |                         |  |
| 6.8  | Birds  | Yes/No |                   |   |                         |  |
| 6.9  | Reptiles and Amphibians                          | Yes/No |                   |   |                         |  |
| 6.10 | Fish   | Yes/No |                   |   |                         |  |

| 7   | Veterinary surgeon               |  |
|-----|----------------------------------|--|
| 7.1 | Name of usual veterinary surgeon |  |
| 7.2 | Company name                     |  |
| 7.3 | Address                          |  |
| 7.4 | Telephone number                 |  |
| 7.5 | Email address                    |  |

| 8   | Emergency key holder                 |          |                  |  |
|-----|--------------------------------------|----------|------------------|--|
| 8.1 | Do you have an emergency key holder? | Yes / No | If no, go to 9.1 |  |
| 8.2 | Name                                 |          |                  |  |
| 8.3 | Position/job title                   |          |                  |  |



Operating procedures



|      | 2.560 654/16/1  |              |                   |                          |   |
|------|---|--------------|-------------------|--------------------------|---|
| 8.4  | Address   |              |                   |                          |   |
|      |   |              |                   |                          |   |
| 8.5  | Daytime telephone number  |              |                   |                          |   |
| 8.6  | Evening/other telephone number  |              |                   |                          |   |
| 8.7  | Email address   |              |                   |                          |   |
|      |   |              |                   |                          |   |
| 9    | Disqualifications and convictions   |              |                   |                          |   |
|      | Has the applicant, or any person who will have condisqualified from:  | trol or man  |                   | establishment, ever been |   |
| 9.1  | Keeping a pet shop?   |              | Yes/No            |                          |   |
| 9.2  | Keeping a dog?  |              | Yes / No          |                          |   |
| 9.3  | Keeping an animal boarding establishment?   |              | Yes/No            |                          |   |
| 9.4  | Keeping a riding establishment?   |              | Yes/No            |                          |   |
| 9.5  | Having custody of animals?  |              | Yes/No            |                          |   |
| 9.6  | Has the applicant, or any person who will have commanagement of the establishment, been convicted offences under the Animal Welfare Act 2006? |              | Yes/No            |                          |   |
| 9.7  | Has the applicant, or any person who will have commanagement of the establishment, ever had a licent refused, revoked or cancelled?           |              | Yes / No          |                          |   |
| 9.8  | If yes to any of these questions, please provide det  | ails,        |                   |                          |   |
| 40   |   |              |                   |                          |   |
| 10   | Additional details  Please check local guidance notes and conditions for  | r anv additi | onal information  | which may be required    |   |
|      | Thouse officer four gardanes frotes and containent to   |              |                   | willow may be required   |   |
|      | Additional information which is required or may be  |              |                   |                          |   |
| 10.  | relevant to the application   |              |                   |                          |   |
|      |   |              |                   |                          |   |
|      |   |              |                   |                          |   |
| 11   | Standard declaration and signature section  |              |                   |                          |   |
| 11.1 | Payment   |              |                   |                          |   |
|      | Payment must be made at the time of making the a  | pplication   |                   |                          |   |
| 44.0 | I Market Complete and Continue  |              |                   |                          |   |
| 11.2 | Model Licence Conditions & Guidance  All applicants to tick that they have read the applica   | ble model    | licence condition | ns & guidance            |   |
|      | Pet Vending   |              |                   | io di gandano            |   |
|      | Animal Boarding   |              |                   |                          |   |
|      | Performing Animals  |              |                   |                          |   |
|      | Riding Establishments   |              |                   |                          |   |
|      | The Breeding and Sale of Dogs   |              |                   |                          |   |
|      | ,   |              |                   |                          | 1 |
| 11.3 | Additional Information  |              |                   |                          |   |
|      | Please attach the following Information   |              |                   |                          |   |
|      | A plan of the premises  |              |                   |                          |   |
| I    | Insurance policy  |              |                   |                          | 1 |





| 11.3 | Additional Information            |  |
|------|-----------------------------------|--|
|      | Risk Assessments (including Fire) |  |
|      | Infection control procedure       |  |
|      | Qualifications                    |  |
|      | Training records                  |  |

| 11.4 | Declaration   |                                     |  |  |  |  |  |
|------|---|-------------------------------------|--|--|--|--|--|
|      | This section must be completed by the applicant. If you are an agent, please ensure this section is comple by the applicant.  |                                     |  |  |  |  |  |
|      | 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. |                                     |  |  |  |  |  |
|      | Ticking this box indicates you have read a  | nd understood the above declaration |  |  |  |  |  |
|      | Full Name   |                                     |  |  |  |  |  |
|      | Capacity  |                                     |  |  |  |  |  |
|      | Signature   |                                     |  |  |  |  |  |
|      | Date  |                                     |  |  |  |  |  |