

The Animal Welfare (Licensing of Activities Involving Animals) (Scotland) Regulations 2021

ANGUS COUNCIL

APPLICATION FOR LICENCE FOR ANIMAL WELFARE ESTABLISHMENTS

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| Section 1: Licence Details To be completed by all applicants | |
| Is this a new or renewal application? | <input type="checkbox"/> New <input type="checkbox"/> Renewal Licence Ref: |
| Will the Licence be held by an Individual or a Company/ Partnership/other Organisation? | <input type="checkbox"/> Individual <input type="checkbox"/> Company/Partnership/Organisation |

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| Section 2: Your Details To be completed by all individual applicants or by the person applying on behalf of a company, partnership or organisation detailed at Section 6 | |
| First name(s): | Surname: |
| All former names: | Phone number: |
| Home address (<i>inc. postcode</i>): | Date of birth |
| | Place of birth: |
| Email: | |
| What is your relationship to the business: | |
| Will you be responsible for the day to day management of the business? | <input type="checkbox"/> Yes <input type="checkbox"/> No (please also complete section 3) |
| Will you be at or within a reasonable distance of the premises at all times? | <input type="checkbox"/> Yes <input type="checkbox"/> No (please also complete section 4) |

| | |
|--|-----------------|
| Section 3: Person responsible for day to day management of the business (if different from section 2) | |
| First name(s): | Surname: |
| All former names: | Phone number: |
| Home address (<i>inc. postcode</i>): | Date of birth: |
| | Place of birth: |
| Email: | |

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Section 4: Person who, or whose substitute stated below, will be at or within a reasonable distance of the premises at all times, (if different from Section 2)

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|--|-----------------|
| First name(s): | Surname: |
| All former names: | Phone number: |
| Home address (<i>inc. postcode</i>): | Date of birth: |
| | Place of birth: |

Email:

Substitute person who will be at or within a reasonable distance of the premises so that cover is provided at all times.

| | |
|--|-----------------|
| First name(s): | Surname: |
| All former names: | Phone number: |
| Home address (<i>inc. postcode</i>): | Date of birth: |
| | Place of birth: |

Email:

Section 5: Premises details To be completed by all applicants

| | |
|---|---|
| Is the premises address, phone number and email address the same as section 2? If there are more than one premises please attach a separate sheet giving the requested details in respect of each location. | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Premises Address (<i>inc. postcode</i>): | Premises phone number: |

Premises email:

Section 6: Directors/Partners of the organisation To be completed if a Company/Partnership/other Organisation is applying for the licence

Name of the Company/Partnership/other Organisation

Address

Email

Company Registration Number:

Registered Partnership Number.

Registered Charity Number

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How many Directors/Partners/Trustees/other persons having control of the organisation, does the organisation have?

Please provide details for first Director/Partner/Trustee – if there is more than one please attach a separate sheet giving the personal details of each Director/Partner/Trustee

| | |
|--|-----------------|
| First name(s): | Surname: |
| All former names: | Phone number: |
| Home address (<i>inc. postcode</i>): | Date of birth: |
| | Place of birth: |
| Email: | |

Section 7: Emergency contact (A second individual who can provide access to the premises) To be completed by all applicants

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| First Name(s): | Surname: |
| Home Address (<i>inc. postcode</i>): | |
| Phone number: | Email: |

Section 8: Pet rehoming details To be completed by all applicants

| Which animals are you intending to keep? | Animal Species (State exact species) | Maximum number of animal intended to be kept |
|--|--|--|
| | <input type="checkbox"/> Dogs | |
| | <input type="checkbox"/> Cats | |
| | <input type="checkbox"/> Rabbits | |
| | <input type="checkbox"/> Guinea Pigs | |
| | <input type="checkbox"/> Arachnids <i>E.g. Tarantulas, etc.</i> | |
| | <input type="checkbox"/> Fish <i>E.g. Tropical or Cold Water</i> | |
| | <input type="checkbox"/> Amphibians <i>E.g. Toads, Frogs etc.</i> | |

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| | <input type="checkbox"/> Reptiles <i>E.g. Snakes, Lizards, Tortoises, etc.</i> | |
| | <input type="checkbox"/> Birds <i>E.g. Parrots, Budgerigars, Finches etc.</i> | |
| | <input type="checkbox"/> Wildlife <i>E.g. Hedgehogs, hares</i> | |
| | <input type="checkbox"/> Any other Species <i>E.g. Please specify</i> | |

Section 9: Animal Accommodation To be completed by all applicants. ****Note:** For each species of animal provide the type of accommodation. If you have more than one type of accommodation, provide information on each. If required attach a separate sheet of paper answering all the questions.

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| What type of accommodation is used to house the different species of animal? | |
| State the material each type of accommodation is made from. | |
| What are the dimensions of the accommodation? <i>Kennels, cattery, hutch, tank etc</i> | Height: Depth: Width: |
| How will the accommodation be heated? | |
| How will the accommodation be ventilated? | |
| How will the humidity/temperature be monitored within the accommodation? | |
| What material is provided within the accommodation to represent a natural habitat? <i>(Where required)</i> | |
| What process is in place to clean the accommodation? | |
| What lighting is available within the accommodation? | |
| State which water source is used for the premises | <i>E.g. mains supply, private supply etc.</i> |

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| What arrangements are in place for the disposal of excreta? | |
| What arrangements are in place for the disposal of other waste material? | |
| Describe the process for the control of infectious diseases including the location of the isolation facility. | |
| Are you transporting any animal over 65km? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

Section 10: Health and Safety To be completed by all applicants

| | | |
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| Have you provided a copy of your written policy & procedure which details the protection of animals and persons in case of fire or other emergency (including emergency exits)? | <input type="checkbox"/> Yes – Copy provided <input type="checkbox"/> No – State the reason a copy has not been provided | |
| Have you provided a copy of the information to be supplied to the purchaser on the appropriate care of the animals to be rehomed as a pets? | <input type="checkbox"/> Yes – Copy provided <input type="checkbox"/> No – State the reason a copy has not been provided | |
| Name and address of your Vet (inc. postcode): | Vet phone number: | |

Section 11: Experience and Qualifications To be completed by all applicants

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| Detail any relevant qualifications and certificates held by anyone named in this application or employed by the organisation | <i>Provide copies with the application</i> |
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| Describe any relevant experience held by anyone named in this application or employed by the organisation. | |
| Do you use foster homes to provide accommodation whilst awaiting suitable homes? <i>Please indicate the number of foster homes</i> | |

Section 12: Previous licence refusals and offences To be completed by all applicants

Has anyone named in this application ever been disqualified under the Animal Health and Welfare (Scotland) Act 2006, the Animal Welfare Act 2006, the Welfare of Animals Act (Northern Ireland) 2011 and the Protection of Animals (Amendment) Act 1954.

from:

- Owning or keeping animals (or both)
- dealing in animals
- transporting animals; arranging their transport
- working with or using animals
- providing any service relating to animals (including, in particular, for their care) which involves taking possession of animals
- taking possession of animals for the purpose of; an activity in respect of which a disqualification mentioned above is imposed; riding or driving them
- taking charge of animals for any, or any other, purpose
- participating in keeping animals, being a party to an arrangement which entitles the control or influence of the way in which animals are kept
- having custody of any animal or any specified kind of animal

- ☐ No
☐ Yes – Please provide details

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Section 13: Declarations To be completed by all applicants.

It is a **CRIMINAL OFFENCE** for the purpose of obtaining or holding a licence to make a statement required by or under the Regulations to a licensing authority (or someone acting on its behalf) which you know, or ought reasonably to have known, is to a material extent false or misleading, or to recklessly make a statement required by or under the Regulations to the licensing authority (or somebody acting on its behalf) which is to a material extent false or misleading. The penalty for such an offence is a fine not exceeding £40,000, or to imprisonment for a term not exceeding 12 months, or both.

I/WE HEREBY DECLARE that to the best of my/our knowledge and belief, the particulars provided by me/us are true.

Applicant Signature:

Date:

HOW WE USE YOUR PERSONAL INFORMATION

The information you have provided will be used to process your licensing application. It may therefore be shared between the Council's departments, elected members when considering the application, veterinary professionals consulted with respect to your application, the premises or licensed activity, and other agencies where necessary and/or in accordance with statute. If granted a licence, your name, the postcodes of premises identified on this form, and details of the licence will be held on an electronic register open to public inspection. Angus Council is the registered Data controller and has a duty to process your information fairly. The information held must be accurate, up to date and will be kept in line with the Scottish Council on Archives and Retention Schedule. Queries should be directed to Information Governance at Angus House, Orchardbank Business Park, Forfar DD8 1AN or by email to InformationGovernance@angus.gov.uk or call 03452 777 778. A copy of Angus Council's Data Protection Policy can be obtained from the Council's website.

Please send the completed application form and application fee to:

Angus Council, Legal and Democratic Services, Angus House, Orchardbank Business Park, FORFAR, DD8 1AN or by email to LawLicensing@angus.gov.uk

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Payment

Applications will not be processed until the appropriate application fee is paid.

Payment can be made by one of the following options (please tick which option you are using):

☐

Credit/debit card – by calling Angus Council on **01307 492299**. Please quote the type of licence you are applying for, and if renewing an existing licence, quote the licence number .

☐

Cheque - made payable to Angus Council. Please send cheque with application form to Angus Council, Legal and Democratic Services, Angus House, Orchardbank Business Park, FORFAR, DD8 1AN

☐

By EBACS – Please quote the licence type and if you are renewing your licence, the licence number, as reference:

Account Name – Angus Council
Sort code – 82-63-18
Account No - 60114506

Please note the fee charged is for the processing of the Licence. No refund will be given if an application is refused or is withdrawn.