

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

Application for a licence to carry on the activity of breeding dogs

Standard applicant profile section 1

| 1. Reference number | |
|---------------------|-------------------------|
| 1.1 | System reference Number |
| 1.2 | Your reference |

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

| 2. Agent | | | | | |
|---|--|-----|--|----|---------------|
| 2.1 | Are you an agent acting on behalf of the applicant | Yes | | No | If no go to 3 |
| 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 | | | | |

| 3. Applicant details | | | | | |
|----------------------|---|-----|--|----|--|
| 3.1 | Name | | | | |
| 3.2 | Address | | | | |
| 3.3 | Email | | | | |
| 3.4 | Main telephone number | | | | |
| 3.5 | Other telephone number | | | | |
| 3.6 | Applying as a business or organisation, including a sole trader | Yes | | No | |
| 3.7 | Applying as an individual | Yes | | No | |

| 4. Applicant Business | | | | | |
|-----------------------|---|-----|--|----|-----------------|
| 4.1 | Is your company registered with companies house | Yes | | No | If no go to 4.3 |
| 4.2 | Registration Number | | | | |

| 4. Applicant Business | | | |
|---|--|--|--|
| 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 | | |

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

| 5. Type of Application | | | | | | | |
|---|--|-----|---------------------------|---------|-------------------------------------|-----------------|--|
| 5.1 | Type of Application | New | | Renewal | | If new go to 5a | |
| 5.2 | Existing licence number | | | | | | |
| 5a. Animals to be accommodated | | | | | | | |
| 5.3 | Wholly Indoors | | Wholly outdoors | | Combination of outdoors and indoors | | |
| 5.4 | Breeds of dogs concerned | | | | | | |
| 5.5 | Number of bitches kept | | | | | | |
| 5.6 | Owned by the applicant | | Co owned by the applicant | | On breeding terms | | |
| 5.7 | Provide details of the ages of bitches kept. (Please use an additional sheet or spreadsheet if necessary) | | | | | | |
| 5.8 | Number of studs kept | | | | | | |
| 5.9 | Owned by the applicant | | Co owned by the applicant | | On breeding terms | | |
| 5.10 | Provide details of the ages of the studs kept (Please use an additional sheet or spreadsheet if necessary) | | | | | | |
| 5b. Further information about the applicant | | | | | | | |
| 5.11 | Date of birth | | | | | | |

| 6. Premises to be licensed | | |
|----------------------------|-------------------------------|--|
| 6.1 | Name of premises/trading name | |

| | | | | | |
|-----|--|-----|--|----|--|
| 6.2 | Address of premises | | | | |
| 6.3 | Telephone number of premises | | | | |
| 6.4 | Email address | | | | |
| 6.5 | Do you have planning permission for this business use. | Yes | | No | |

| 7. Accommodation and facilities | | | | | |
|---------------------------------|--|-----|--|----|--|
| 7.1 | Details of the quarters used to accommodate animals, including number, size and type of construction | | | | |
| 7.2. | Exercise facilities and arrangements | | | | |
| 7.3 | Heating arrangements: | | | | |
| 7.4 | Method of ventilation of premises | | | | |
| 7.5 | Lighting arrangements (natural & artificial) | | | | |
| 7.6 | Water supply | | | | |
| 7.7 | Facilities for food storage & preparation | | | | |
| 7.8 | Arrangements for disposal of excreta, bedding and other waste material | | | | |
| 7.9 | Isolation facilities for the control of infectious diseases | | | | |
| 7.10 | Fire precautions/equipment and arrangements in the case of fire | | | | |
| 7.11 | Do you keep and maintain a register of animals? | Yes | | No | |
| 7.12 | How do you propose to minimise disturbance from noise? | | | | |

| 8. Veterinary surgeon | |
|-----------------------|----------------------------------|
| 8.1 | Name of usual veterinary surgeon |
| 8.2 | Company name |
| 8.3 | Address |
| 8.4 | Telephone number |
| 8.5 | Email address |

| 9. Emergency key holder | | | | | | |
|-------------------------|--------------------------------------|-----|--|----|--|--|
| 9.1 | Do you have an emergency key holder? | Yes | | No | | If no, go to 10.1 |
| 9.2 | Name | | | | | |
| 9.3 | Position/job title | | | | | |
| 9.4 | Address | | | | | |
| 9.5 | Daytime telephone number | | | | | |
| 9.6 | Evening/other telephone number | | | | | |
| 9.7 | Email address | | | | | |
| 9.8 | Is there another key holder? | Yes | | No | | If yes please include details in the Additional Information section at 12.1 |

| 10. Public liability insurance | | | | | | |
|--|---|-----|--|----|--|----------------------------|
| 10.1 | Do you have public liability insurance? | Yes | | No | | If no, go to question 10.6 |
| If yes, please provide details of the policy | | | | | | |
| 10.2 | Insurance company | | | | | |
| 10.3 | Policy number | | | | | |
| 10.4 | Period of cover | | | | | |
| 10.5 | Amount of cover (£5million minimum required) | | | | | |
| 10.6 | Please state what steps you are taking to obtain such insurance | | | | | |

| 11. Disqualifications and convictions | | | | | |
|---|---|-----|--|----|--|
| Has the applicant, or any person who will have control or management of the establishment, ever been disqualified from: | | | | | |
| 11.1 | Keeping a pet shop? | Yes | | No | |
| 11.2 | Keeping a dog? | Yes | | No | |
| 11.3 | Keeping an animal boarding establishment? | Yes | | No | |
| 11.4 | Keeping a riding establishment? | Yes | | No | |
| 11.5 | Having custody of animals? | Yes | | No | |
| 11.6 | Has the applicant, or any person who will have control or management of the establishment, been disqualified or convicted of any offences under the: Animal Welfare Act 2006 Animal Welfare (Scotland) Act 2006 Dangerous Dogs Act 1991 Any other legislation listed in Schedule 8 of the LAIA Regulations 2018 | Yes | | No | |
| 11.7 | 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 | |
| 11.8 | If yes to any of these questions, please provide details | | | | |

| 12. Additional details | | |
|------------------------|---|--|
| | Please check local guidance notes and conditions for any additional information which may be required | |
| 12.1 | Additional information which is required or may be relevant to the application | |

Standard payment and declaration section

| 13. Payment | |
|-------------|--|
| 13.1 | Payment must be made in full at the time of making the application |
| 13.2 | Confirmation of when and how payment made, including payment reference number, if applicable |

| 14. Statutory Guidance | | |
|--|--|--|
| All applicants to tick that they have read the applicable statutory guidance and conditions | | |
| 14.1 | Breeding Dogs | |
| 15. Standard Operating Procedures (SOP) | | |
| See guidance attached from the City of London referenced by the number in the second column. | | |
| Please attach the following documents with your application | | |
| 15.1 | 4.3 Staff Training Policy | |
| 15.2 | 5.5 Cleaning & Hygiene SOP | |
| 15.3 | 6.1 & 9.1 Feeding & Diet SOP | |
| 15.4 | 8.1 & 4.1 Enrichment & socialisation SOP | |
| 15.5 | 8.1 & 5.3 Dog Handling SOP (including abnormal behaviour) & Protection from pain, suffering, injury or disease | |
| 15.6 | 8.2 Social grouping SOP | |
| 15.7 | 9.1 i) feeding regimes | |
| | 9.1 ii) cleaning regimes | |
| | 9.1 iii) transportation | |
| | 9.1 iv) prevention of & control of spread of disease | |
| | 9.1 v) monitoring and ensuring health and welfare of animals | |
| | 9.1 vi) death of escape of animal | |
| 15.8 | 10.1 & 10.2 Written Emergency Plan – see attached guidance | |
| 15.9 | 6.12 Preventive Healthcare Plan | |
| N.B. Records that will be examined by the Inspecting Officer are also outlined in the attached guidance. | | |

| 16. Additional Information | | |
|---|--------------------------------------|--|
| Please attach the following Information | | |
| 16.1 | A plan of the premises | |
| 16.2 | Insurance policy (minimum £5million) | |
| 16.3 | Qualification certificates | |
| 16.4 | Training records | |

| 17. Declaration | |
|-----------------|--|
| 17.1 | This section must be completed by the applicant. If you are an agent please ensure this section is completed by the applicant. |
| 17.2 | <p>I am aware of the provisions of the relevant Act, Regulations and Statutory Guidance. The details contained in the application form and any attached documentation are correct to the best of my knowledge and belief.</p> <p>I understand that a person authorised by the Council will inspect the premises before a licence is issued.</p> <p>I understand that a person authorised by the council may inspect the premises either by appointment or unannounced at any reasonable time.</p> <p>I understand that a person authorised by the council may take photographs or video footage whilst carrying out inspections or visits to the premises.</p> <p>I am aware that a fee is payable for this licence application.</p> <p>I accept that all veterinary fees incurred by the authority in respect to the licence application will be recoverable at cost.</p> <p>I accept that in the event of my application being refused I withdrawn it, I will not be refunded the application fee or any part thereof under any circumstances.</p> <p>I apply under the above legislation for a licence to carry on the activity of Dog Breeding at the above premises.</p> <p>I accept that on occasion the council has to provide information to third parties in response to requests made under the Environmental Information Regulations 2004, Data Protection Act 1998 and Freedom of Information Acts.</p> |
| 17.3 | Ticking this box indicates you have read and understood the above declaration |
| 17.4 | Signature |
| 17.5 | Full Name |
| 17.6 | Capacity/Position of Signatory |
| 17.7 | Date |