Official use only:	Date received
Payment received	Case Ref:





APPLICATION FOR A LICENCE TO SELL ANIMALS THE ANIMAL WELFARE (LICENSING OF ACTIVITIES INVOLVING ANIMALS) REGULATIONS 2018

Please complete all questions on the form. If you have nothing to record, please state 'not applicable' or 'none'. Before completing the form you may wish to refer to the application guidance notes for new applications which can be found on the Councils website.

if nec	are completing this form by hand, please ressary (marked with the number of the leted form for your records.							
Section 1 – Standard Applicant Profile Section								
1	Agent							
1.1	Are you an agent acting on behalf of the applicant?	Yes		No		If not go to section 2		
1b	Further information about the Agent							
1.2	Name							
1.3	Address							
1.4	Email							
1.5	Contact telephone number(s)							
	A 15 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1			41				
2	Applicant details (this will be the name	ea licence	e nolaer c	on the lice	ence)			
2.1	Name							
2.2	Address							
2.3	Email							
2.4	Contact telephone number(s)							
3	Applicant Business (a licence will only	, ha issua	ad to an ir	ndividual	1			
3.1	Is your company registered with companies house	Yes		No		If no go to 3.3		
3.2	Registration Number							
3.3	Is your business registered outside the UK							
3.4	VAT Number							
3.5	Legal status of the business							
3.6	Your position in the business							
3.7	The country where your head office is located.							

3b	Business Address – This should be yo to receive all communication	ur official	address	- The add	lress requ	uired of you by	law		
3.8									
		o		•					
	Section	2 – Premis	es Detai	IS					
1	Type of Business								
1.1	Pet Shop	1.2 Home Sales							
1.3	Internet Sales	+=+-	1.4 Wholesales						
1.5	Third Party Sales	1.6		by Sales (p					
1.7	Sale of animals to the public as pets by m	neans of a f	ixed or m	ninimum do	nation				
1.8	Other please state								
2	Type of Application	New	ПП	Renewal		If new, go to 2	a		
2.1	Existing licence number					, 0			
2a	Further details about the applicant								
2.2	Do you have any training certificates or qualifications?	Yes		No		If no, go to 2.5			
2.3	Please provide details of training certificates and qualifications								
2.4	Please provide details of relevant experience								
2.5	Date of birth								
3	Premises to be licensed								
3.1	Name of premises/trading name								
3.2	Address of premises								
3.3	Telephone number of premises								
3.4	Email address								
3.5	Do you have planning permission for this business use?	Yes		No					
4	Accommodation and facilities (continu	ue on sepa	rate shee	et is neces	sarv)				
4.1	Number and size of rooms to be used								
4.2	Heating arrangements								

4.3	Method of ventilation of premises							
4.4	Lighting arrangements (natural & artificial)							
4.5	Water supply							
4.6	Facilities for food storage & preparation							
4.7	Arrangements for disposal of excluded bedding and other waste material							
4.8	Isolation facilities for the control o infectious diseases	f						
4.9	Fire precautions/equipment and arrangements in the case of fire							
4.10	Do you keep and maintain a register of animals?			es	No)		
4.11	When the premises is closed what arrangements are in place to ensure the welfare of animals?				·			
5	Animals to be sold							
	e provide details of the animals t	to be so	old					
Туре		_		Maxin Num	Deta		accommouding size	Age at which to be sold
5.1	Dogs / puppies	Yes No]					
5.2	Cats /kittens	Yes _ No _]]					
5.3	Chipmunks	Yes No]					
5.4	Rabbits & cavies	Yes [
5.5	Hamsters	Yes [No [
5.6	Rats, mice & gerbils	Yes [
5.7	Larger domesticated mammals, e.g. goats, pot-bellied pigs	Yes [
5.8	Primates e.g. marmosets	Yes No	-					
5.9	Parrots, parakeets and macaws	Yes [

5 Pleas	Animals to be sold e provide details of the animals to	he s	hlo							
5.10	Pigeons	Yes [
3.10	- I	No [<u> </u>							
5.11	3 (1	Yes [No [
5.12	3 - 3 - 7	Yes [No [
5.13	INO L									
5.14	Vas									
5.15	I I ronical fien	Yes [No [
5.16	Marine fish	Yes [No [
5.17	L COLD Water tich	Yes [No [
5.18	7 1 1	Yes [No [
6	Veterinary surgeon									
6.1	Name of usual veterinary surgeon									
6.2	Company name									
6.3	Address									
6.4	Telephone number									
6.5	Email address									
7	Emergency key holder									
7	Do you have an emergency key hole	der?	Υ	es			No		If no	, go to 8.1
7.1	Name						I			
7.2	Position/job title									
7.3	Address									
7.4	Contact telephone number(s)									
7.5	Email address									
7.6	Add another person?		Y	es			No			7.1 to 7.5 epeated
8	Disqualifications and convictions									
Has th	ne applicant, or any person who wi disqualified from:	ill ha	ve (control	or ma	nage	ement of t	he estal	blishment,	ever
8.1	Keeping a pet shop?		Υ	es 🗌			No 🗌			
8.2	Keeping a per snop? Keeping a dog?		-	es 🗌			No 🗌			
8.3	Keeping a dog: Keeping an animal boarding establishment?			es 🗌			No 🗌			
8.4	Keeping a riding establishment?		Υ	es 🗌			No 🗌			
8.5	Having custody of animals?		Υ	es 🗌			No 🗌			

8	Disqualification	ons and convictions			
8.6	will have cont establishmen	cant, or any person who trol or management of the t, been convicted of any er the Animal Welfare Act	Yes 🗌	No 🗌	
8.7	will have cont establishmen	cant, or any person who trol or management of the t, ever had a licence ked or cancelled?	Yes 🗌	No 🗌	
8.8	If yes to any of provide detail	of these questions, please s,			
			<u> </u>		
9	Additional det	ails			
Additi	onal information	n which may be relevant to	the application		
		Section 3	 Declaration Section 	on	
1	Model Licen	ce Conditions & Guidance	2		
All ap		that they have read the app		conditions & guida	ance
1.1	To sell anima			J	
2 Pleas	Additional In	iformation lowing Information			
2.1	A plan of the				
2.3	Insurance po		<u> </u>		
2.4	Operating pro		<u> </u>		
2.5		nents (including Fire)	<u></u>		
2.6		rol procedure [<u>-</u> 		
2.7	Qualifications	•	<u> </u>		
2.8	Training reco	rds [
			<u> </u>		
3	Declaration				
3.1		must be completed by the		d by the applican	^
		agent please ensure this f the provisions of the relevant			
3.2		n form and any attached do			
	belief.				T
3.3	Ticking this b	ox indicates you have read	and understood the al	oove declaration	
3.4	Full Name				
3.5	Capacity				
3.6	Date				

Section 4 – Payment Details

Freedom of information

The Freedom of Information Act gives people the right to obtain information held by public authorities unless there are good reasons to keep it confidential. Please be aware that information supplied on this form may be released in response to a freedom of information request. To comply with financial regulations, details of license holders may also be disclosed to authorise Government agencies.

London Borough of Sutton applicants:

The completed application should be sent to:-

London Borough of Sutton, Licensing Team, Civic Offices, St Nicholas Way, Sutton SM1 1EA.

Alternatively you can send a scanned PDF copy of your application to licensing@sutton.gov.uk

The following Payment Options are available:

- Online: Debit and Credit Card payments can be made using our online payment facility at https://www.sutton.gov.uk/info/200466/pay_for_it
- **Telephone:** Debit and Credit Card payments can be made by telephoning our contact centre on 020 8770 5000, selecting options 5 then 2
- Post: Cheques or postal orders should be made payable to 'Sutton Council'

Please note any statutory consultation periods will not commence until payment has been made and we have received your application form. It is your responsibility to contact us if you experience a problem in paying for your application.

Royal Borough of Kingston upon Thames applicants:

The completed application should be sent to:-

Royal Borough of Kingston upon Thames, Licensing Team, Guildhall 2, High Street, Kingston, KT1 1EU.

Alternatively you can send a scanned PDF copy of your application to licensing@sutton.gov.uk

The following Payment Options are available:

- **Telephone:** Debit and Credit Card payments can be made by telephoning our contact centre on 020 8547 5080
- Post: Cheques or postal orders should be made payable to 'Kingston Council'

If you wish to pay in this way, give clear telephone contact details on the top of the application form or in a covering letter. We will then contact you once we have received your form.

Please note any statutory consultation periods will not commence until payment has been made and we have received your application form. It is your responsibility to contact us if you experience a problem in paying for your application.