

The Licensing Section
Causeway House
Bocking End
Braintree, Essex
CM7 9HB
01376 557790
Licensing@braintree.gov.uk

## The Animal Welfare (Licensing of Activities Involving Animals) (England) Regulations 2018 Application for a licence to breed dogs

Please complete all the questions in the form.

If you have nothing to record, please state "Not applicable" or "None"

Section 1 Standard applicant p	orotile
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		-
1	Reference number	
1.1	System reference Number (if known)	
1.2	Your reference (if known)	

Please complete all the questions in the form.

If you have nothing to record, please state "Not applicable" or "None"

2a	Agent				
2.1	Are you an agent acting on behalf of the applicant	Yes	No	·	If no, go to 3.1
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	Are you applying as a business or organisation, including a sole trader	Yes	No	
3.7	Are you applying as an individual	Yes	No	

4a	Applicant Business			
4.1	Is your company registered with companies house	Yes	No	If no, go to 4.3
4.2	Registration Number			
4.3	Is your business registered outside the UK			
4.4	VAT Number			
4.5	Legal status of the business			

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4a	Applicant Business	
4.6	Your position in the business	
4.7	The country where your head office is located.	
4b	Business Address – This should be you receive all communication	ır official address – The address required of you by law to
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	

## Section 2 Application for a licence to breed dogs

5a	Type of Applicati	ion						
5.1	Type of Applicatio	n		New	Renewal			
5.2	Existing licence nu	umber						
5b	Animals to be ac	commo	dated					
5.3	Wholly Indoors Wholly out			doors	Combination of indo		oors and	
5.4	Breeds of dogs co	ncerned						
5.5	Number of bitches	s kept						
5.6	Owned by the applicant		Co owned applica		On breedi	ng tei	ms	
5.7	Provide details of kept.	the ages	s of bitches					
5.8	Number of studs k	kept						
5.9	Owned by the applicant		Co owned applica		On breedi	ng tei	ms	
5.10	Provide details of kept	the ages	of the studs					
5c	Further informati	ion abou	ut the applicant					
5.11	Date of birth							
6	Premises to be li	censed						
6.1	Name of promises	c/trading	namo		·			

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:	

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7	Accommodation and facilities		
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		
0.0	2		
9a	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	Add another person?	Yes/No	If no, go to 10.1
9b	Emergency key holder 2		
9.9	Do you have an emergency key holder?	Yes/No	If no, go to 10.1
9.10	Name		
9.11	Position/job title		
9.12	Address		
9.13	Daytime telephone number		
9.14	Evening/other telephone number		
9.15	Email address		
10	Public lighility incures		
10.1	Public liability insurance  Do you have public liability insurance?	Yes/No	If no, go to 10.7
10.1	Please provide details of the policy	1 69/140	ii iio, go to 10.7
10.2	Insurance company		
10.3	Policy number		
	-		
10.5	Period of cover		
10.6	Amount of cover (£)  Please state what steps you are taking		
10.7	to obtain such insurance		

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11	Additional details	
	Please check local guidance notes	s and conditions for any additional information which may be required
11.1	Additional information which is required or may be relevant to the application	

12	Disqualifications and convictions				
	Has the applicant, or any person who will have control or management disqualified from:	nt of the establishment, ever been			
12.1	Keeping a pet shop?	Yes/No			
12.2	Keeping a dog?	Yes/No			
12.3	Keeping an animal boarding establishment?	Yes/No			
12.4	Keeping a riding establishment?	Yes/No			
12.5	Having custody of animals?	Yes/No			
12.6	Has the applicant, or any person who will have control or management of the establishment, been convicted of any offences under the Animal Welfare Act 2006?	Yes/No			
12.7	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			
12.8	If yes to any of these questions, please provide details,				

## **Section 3 Declarations**

13	Model Licence Conditions & Guidance	
	All applicants to tick that they have read the applicable model licence conditions & guidance	
13.1	The Breeding and Sale of Dogs	

14	Additional Information
	Please attach the following Information
14.1	A plan of the premises
14.2	Insurance policy
14.3	Operating procedures
14.4	Risk Assessments (including Fire)
14.5	Infection control procedure
14.6	Qualifications
14.7	Training records

15	Declaration	
15.1	This section must be completed by the applicant. If you are an agent please ensure this section is completed by the applicant.	
15.2	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.	
15.3	Signing this box indicates you have read and understood the above declaration	
15.4	Full Name	
15.5	Capacity	
15.6	Date	

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## DATA PROTECTION STATEMENT

The Council will use the information you provide in this form and in any supporting documents to process and determine your application for a licence. The information will be held on internal databases and electronic document management systems, and included in a public register. The information supplied may be passed to other bodies, including law enforcement agencies and government departments, as allowed by law. The Council may check information you have provided, or information about you that another person has provided, with other information we hold. The Council may also obtain information about you from, or provide information to, organisations such as government departments, law enforcement agencies, other local authorities, and private sector organisations such as banks, insurance companies or legal firms, to:

- -Verify the accuracy of information,
- -Prevent or detect crime, or
- -Protect public funds.

Braintree District Council is the data controller. Further information about your Data Protection rights in line with the provisions of the General Data Protection Regulations and Data Protection Act 2018, for example how the Council will use your information, how we maintain the security of your information, your rights to access the information we hold on you, including correcting or removing your information, how to contact the Data Protection Officer, how long your information is held or how we process your personal information can be found at: www.braintree.gov.uk/ Privacy. The Data Protection Officer can be contacted at dpo@braintree.gov.uk or on 01376 552525.

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