

The Licensing Section
Causeway House
Bocking End
Braintree, Essex
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Licensing@braintree.gov.uk

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

Application for a licence to provide or arrange for the provision of boarding for cats or 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 profile

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			
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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			

4a	Applicant Business									
4.5	Legal status of the business									
4.6	Your position in the business									
4.7	The country where your head located.									
4b	Business Address – This shreceive all communication	ould be your	official a	ddre	ess – The	e address	s requi	red of yo	u 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 5a	Type of Application		ne prov	isi	on of I	ooardi	ng fo	r cats	or dog	S
5.1	Commercial Boarding	Home Boarding		Da	ay Care					
5.2	Type of Application	Boarding	New			Renewa	ı			
5.3	Existing licence number (if ap	plicable)						•		
5b	Animals to be accommodat	ed			ı					
5.4	Cats		Yes/No)	Maximu	ım numbe	er			
5.5	Dogs		Yes/No)	Maximu	ım numbe	er			
5c	Further information about the	ne applicant								
5.6	Date of birth									
6	Premises to be licensed									
6.1	Name of premises/trading nar	me								
6.2	Address of premises									
6.3	Telephone number of premise	es								
6.4	Email address									
6.5	Do you have planning permist this business use?	sion for				Ye	s/No			
7	Accommodation and faciliti	es								
7.1	Details of the quarters used to accommodate animals, include number, size and type of cons	ing								
7.2	Exercise facilities and arrange									
7.3	Heating arrangements:									
7.4	Method of ventilation of premi	ses								
7.5	Lighting arrangements (natura artificial)	al &								
7.6	Water supply									
7.7	Facilities for food storage & p	•								
7.8	Arrangements for disposal of bedding and other waste mate									
7.9	Isolation facilities for the contrinfectious diseases									

7	Accommodation and facilities	
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?	
Ω	Veterinary surgeon	

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

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	Name		
9.10	Position/job title		
9.11	Address		
9.12	Daytime telephone number		
9.13	Evening/other telephone number		
9.14	Email address		

10	Public liability insurance		
10.1	Do you have public liability insurance?	Yes/No	If no, go to 10.7
10.2	Please provide details of the policy		
10.3	Insurance company		
10.4	Policy number		
10.5	Period of cover		
10.6	Amount of cover (£)		
10.7	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	Disqualifications and convictions			
11.6	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		
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	s and conditions for any additional information which may be required
12.1	Additional information which is required or may be relevant to the application	

Section 3 Declarations

13	Model Licence Conditions & Guidance		
	All applicants to tick that they have read the applicable model licence conditions & guidance		
13.1	Animal Boarding		

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		

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.