

APPLICATION FOR LICENCE FOR ANIMAL WELFARE ESTABLISHMENTS

Section 1: Licence Details To be completed by all applicants	
Is this a new or renewal application? New Renewal	
Will the Licence be held by an Individual or a Company/ Partnership?	Individual Company/ Partnership

Section 2: Your Details To be completed by all applicants			
First name(s):	Surname:		
Maiden name (<i>if applicable</i>):	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?	Yes No (please also complete section 3)		
Will you be at or within a reasonable distance of the premises at all times?	Yes 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:		
Maiden name (<i>if applicable</i>):	Phone number:		
Home address (inc. postcode):	Date of birth:		
	Place of birth:		
Email:			

Section 4: Person who 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:
Maiden name (<i>if applicable</i>):	Phone number:
Home address (inc. postcode):	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?	YES		
	NO		
Premises Address (inc. postcode):	Premises phone number:		
Premises email:			
Registered Charity Number:			

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

Name of the Company/Partnership:

How many Directors/Partners does the business have?

Please provide details for first Director/Partner – if there is more than one please attached a separate sheet giving each Director/Partner's personal details

First name(s):	Surname:
Maiden name (<i>if applicable</i>):	Phone number:
Home address (inc. postcode):	Date of birth:
	Place of birth:
Email:	



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Section 7: Emergency contact (A second individual who can provide access to the premises) To be completed by all applicants			
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 intending to be kept		
	Dogs			
	Cats			
	Rabbits			
	Guinea Pigs			
	Arachnids			
	E.g. Tarantulas, etc.			
	Fish			
	E.g. Tropical or Cold Water			
	Amphibians			
	E.g. Toads, Frogs etc.			
	Reptiles			
	E.g. Snakes, Lizards, Tortoises, etc.			
	Birds			
	E.g. Parrots, Budgerigars, Finches etc.			
	Wildlife			
	E.g. Hedgehogs, hares			



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Any other species	
E.g. Please specify	

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.

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:
Kenneis, Callery, nulcii, lank elc	
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?	
(Where required)	
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	E.g. mains supply, private supply etc.
What arrangements are in place for the disposal of excreta?	
What arrangements are in place for the disposal of other waste material?	



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Describe the process for the control of infectious diseases including the location of the isolation facility.			
Are you transporting any animal over 65km?	YES	NO	
Do you use foster homes to accommodate animals?	YES	NO	
Please detail how may foster carers used			

Section 11: Health and Safety To be completed by all applicants				
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)?	YES - Copy provided 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?	YES - Copy provided NO - State the reason a copy has not been provided			
Do you have your insurance documents?	YES - Copy to be provided with the application NO - A copy must be sent within a week of a week of approval of the application			
Name and address of your Vet (inc.	postcode):	Vet phone number:		

Section 12: Experience and Qualifications To be completed by all applicants			
Detail any relevant qualifications and certificates held by any one named in this application or employed by the business.	Provide copies with the application		
Describe any relevant experience held by anyone named in this application or employed by the business.			



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Section 13: 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 from:	NO YES - Please provide details:			
 owning or keeping animals (or both) 				
dealing in animals				
transporting animals				
 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				
• taking charge of animals for any, or any other,				
purpose				

Section 14: Declarations To be completed by all applicants.	
I/We declare that the particulars given on this form are correct to the best of my knowledge and belief	
I/We understand that the information supplied by me/us as detailed in this form may be stored on a computer system by this Authority for the purpose of Licencing and that information may be disclosed to the police and other relevant parties for vetting and background enquiries whilst processing this application.	
I/We understand that this authority is under a duty to protect the public funds it administers and to this end may use the information you have provided on this form for the prevention and detection of fraud. It may also share this information with other bodies responsible for auditing or administering public funds for these purposes.	
Applicant Signature:	
	Date:
Discourse the completed explication forms to:	1

Please return the completed application form to:

Community & Places (Environmental Health)

The Highland Council

38 Harbour Road,

Inverness

IV1 1UF