

Tonbridge & Malling Borough Council The Animal Welfare (Licensing of Activities Involving Animals) Regulations 2018

Application for a licence to sell animals

Please complete all the questions in this form.

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

Agent:			
Are you an agent acting on behalf of the applicant	Yes	No	If no, go to applicant details section
Further information about the Ag	gent:		
Name			
Address			
Email			
Main telephone number			
Other telephone number			
Applicant details:			
Name			
Address			
Email			
Main telephone number			
Other telephone number			
Applying as a business or organisation (including a sole trader)	Yes	No	
Applying as an individual	Yes	No	
Date of birth			

Type of Business: Please tick				
Pet Shop				
Home Sales				
Internet Sales				
Wholesales				
Third Party Sales				
Hobby Sales (Pet Fairs)				
Sale of animals to the public as pets by means of a fixed or minimum donation				
Other please state				
Type of Application.	T.,	1	<u> </u>	
Type of Application:	New		Renewal	
Existing licence number				
Further details about the applica				
Do you have any training certificates or qualifications?	Yes / No			
Please provide details of training certificates and qualifications				
Please provide details of relevant experience				
Date of birth				
Premises to be licensed:				
Name of premises/trading name				
Address of premises				
Telephone number of premises				
Email address				
Do you have planning permission for this business use	Yes/No			
Accommodation and facilities:				
Number and size of rooms to be used				
Heating arrangements				
Method of ventilation of premises				
Lighting arrangements (natural & artificial)				
Water supply				

Facilities for food storage & preparation		
Arrangements for disposal of excreta, bedding and other waste material		
Isolation facilities for the control of infectious diseases		
Fire precautions/equipment and arrangements in the case of fire		
Do you keep and maintain a register of animals?	Yes / No	
When the premises is closed what arrangements are in place to ensure the welfare of animals.		

Please provide details of the anir	nals to be	sold		
Type		Maximum Number	Details of accommodation including size	Age at which to be sold
Dogs / puppies	Yes/No		_	
Cats /kittens	Yes/No			
Chipmunks	Yes/No			
Rabbits & cavies	Yes/No			
Hamsters	Yes/No			
Rats, mice & gerbils	Yes/No			
Larger domesticated mammals, e.g. goats, pot-bellied pigs	Yes/No			

Animals to be sold :				
Please provide details of the anin	nals to be	sold		
Primates e.g. marmosets	Yes/No			
Parrots, parakeets and macaws	Yes/No			
Pigeons	Yes/No			
Туре		Maximum Number	Details of accommodation including size	Age at which to be sold
Other large birds (please specify)	Yes/No			
Budgerigars, finches and other small birds	Yes/No			
Tortoises	Yes/No			
Snakes and lizards	Yes/No			
Tropical fish	Yes/No			
Marine fish	Yes/No			
Cold water fish	Yes/No			
Any other species (please specify)	Yes/No			

Veterinary surgeon:			
Name of usual veterinary surgeon			
,			
Company name			
Address			
Talanhana numbar			
Telephone number			
Email address			
Emergency key holder:			
Do you have an emergency key	Yes/N	lo	If Yes please fill out details below:
holder?			
Name of key holder			
Position/job title			
Address			
Address			
Daytime telephone number			
Evening/other telephone number			
Email address			
Email address			
	<u>. </u>		
Bublic liability incurance:			
Public liability insurance: Do you have public liability insurance.	ce?	Yes / No	
If yes, please provide details of the	policy		
Insurance company			
Policy number			
Period of cover			
Amount of agree (Cm)			
Amount of cover (£m)			
If you have answered no, please st	ate		
what steps you are taking to obtain			
insurance			

Disqualifications and convictions:

Has the applicant, or any person who will have control or management of the establishment, ever been disqualified from:

Keeping a pet shop?	Yes/No	
Keeping a dog?	Yes / No	
Keeping an animal boarding establishment?	Yes/No	
Keeping a riding establishment?	Yes/No	
Having custody of animals?	Yes/No	
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	
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	

Additional details:

Please check local guidance notes and conditions for any additional information which may be required

Additional information which is required or may be relevant to the application:

If yes to any of these questions, please provide details:

Declarations and signature:
All answers given on this form are true.
I authorise the Council to make enquiries of any person's etc. named on this form.
We must protect the public funds we handle and so we may use the information you have provided on this form to detect and prevent fraud. We may also share this information, for the same purposes, with other organisations which handle public funds.
Full name:
Capacity:
Signature:
Date:

Please enclose the following:

- 1. Plan of premises
- 2. Insurance policy
- 3. Operating procedures
- 4. Risk Assessment (including fire)
- 5. Infection control procedure
- 6. Qualifications
- 7. Training records

Failure to supply this information at the time of submitting this application may delay the inspection taken place.