

Re-rating Application Form

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

Please complete all the questions in the form.
If you have nothing to record, please state "Not applicable" or "None"

1) Applicant details						
Name						
Address						
Email						
Main telephone number						
Other telephone number						
Applying as a business or organisation,	Yes		No			
Applying as an sole trader or partnership	Yes		No			

2) Business Details						
Is your business a limited company registered with companies house	yes		No		If no go to 3	
If so, Company Name and Number						
Registered address						

Business Trading Address (if different to applicant address)	
Building name or number	
Street	
District	
City or Town	
County or administrative area	
Post Code	
Country	
Type of business/performance (please tick)	
TV/Film/Social Media	
Theatre	
Circus using domestic animals	
Exhibiting Animals	

3) Application Details				
Do you have a current licence before.	yes		No	
Further information about the applicant				
Stage name (if any)				
Nationality				
Date of birth				

I the "operator" certify all information in this form and submitted with this application to be true to the best of my knowledge.

Name.....

Signed.....

Dated:.....

State capacity, if applicant signing on behalf of a Company or Partnership:

.....

You may email this form to envhealth@southribble.gov.uk or post a hard copy to Environmental Health, Civic Centre, West Paddock, Leyland, PR25 1DH

N.B. Your application can not be processed until payment has cleared.

FOR OFFICIAL USE ONLY

Reference Number:

Date of inspection:

Recommendation:

Date reported the Council and Decision:

No. of Licence issued: