

Licence Application for keeping or training animals for exhibition

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	<input type="checkbox"/>	No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Applying as an sole trader or partnership	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2) Business Details						
Is your business a limited company registered with companies house	yes	<input type="checkbox"/>	No	<input type="checkbox"/>	If no go to 3	<input type="checkbox"/>
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	<input type="checkbox"/>					
Theatre	<input type="checkbox"/>					
Circus using domestic animals	<input type="checkbox"/>					

2) Business Details	
Exhibiting Animals	
Animal Encounters	
Birds of Prey shows/exhibits	
Other please state	

3) Application Details				
Have you been registered/licenced before	yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Local Authority where registered/licenced				
Give details of registration e.g. type and numbers of animals, type of performance or exhibition.				
Further information about the applicant				
Stage name (if any)				
Nationality				
Date of birth				

4) Kinds of animal to be trained and the number of each kind		
Kind of animal		
Number		
Kind of animal		
Number		
Kind of animal		
Number		
Kind of animal		
Number		
Kind of animal		
Number		

5) Proposed Exhibition	
Describe the nature of the performance (s) in which the animals will be exhibited or for which they are to be trained, mentioning any apparatus which is used for the purpose of the performance. The description must be sufficient to give a general idea of what is done by the animals taking part.in the performance.	

5) Proposed Exhibition	
Approximate duration of the performance (s)	
Number of times the performance will be given in one day.	
How will the animals be transported	
Where are the animals to be kept when not performing or being exhibited.	

6) Veterinary surgeon	
Name of usual veterinary surgeon	
Company name	
Address	
Telephone number	
Email address	

7) Emergency key holder		
Do you have an emergency key holder?	Yes / No	If no, go to 7
Name		
Position/job title		
Address		
Daytime telephone number		
Evening/other telephone number		
Email address		

8) 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

8) Disqualifications and convictions	
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
If yes to any of these questions, please provide details,	

9) 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	

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:

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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: