Application for a licence to operate an Animal Boarding Establishment

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

Licensing Team, Council Offices, 37 Pembroke Road, London W8 6PW Telephone: 020 7341 5152 email: licensing@rbkc.gov.uk



Please complete all the questions in the form.

Name of applicant (if more than one applicant state all the full names of all

Home address (if applying as a company please state the registered

Applicants details

applicants)

office)

1.1

1.2

If you have nothing to record, please state	e "Not applicable" or "None	"
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1.3	Telephone	
	Mobile number	
1.4	Email address	
1.5	If applying as a company state the registration number of the company	
1.6	If the company is registered outside the UK state the main business address in the UK	
1.7	If applying as one or more individuals state the date of birth of all applicants	
2	Premises to be licensed	
2.1	Name of Premises/Trading Name	
2.2	Address of Premises	
2.3	Telephone Number	
2.4	Email address	
	Does the premises have the required	

3	Type of application							
3.1	Type of Application	Com Boar	mercial ding	Hom	e Boarding		Day Care	
3.2	Type of Licence	New		Rene	ewal			
3.3	Existing licence number					•		
3a	Animals to be accommodate	d						
3.4	Cats		Yes/No		Maximum N	Numb	per	
3.5	Dogs		Yes/No		Maximum N	Numb	per	
4	Accommodation and Facilities	25						
4.1	Details of the quarters used to accommodate animals, includinumber, size and type of construction							
4.2	Exercise facilities and arrangements							
4.3	Heating arrangements:							
4.4	Method of ventilation of premis	ses						
4.5	Lighting arrangements (natura artificial)	I &						
4.6	Water supply							
4.7	Facilities for food storage & preparation							
4.8	Arrangements for disposal of excreta, bedding and other wa material	ste						
4.9	Isolation facilities for the contro infectious diseases	ol of						
4.10	Fire precautions/equipment an arrangements in the case of fire							
4.11	Do you keep and maintain a register of animals?		Yes/No					
4.12	How do you propose to minimi disturbance from noise?	se						

5.1	Name of usual veterinary surgeon			
F 2				
5.2	Company name			
5.3	Address			
5.4	Telephone number			
5.6	Email address			
6	Emergency key helder			
6.1	Do you have an emergency key holder?	Yes / No	If no, go to 7.1	
6.2	Name			
6.3	Position/job title			
6.4	Address			
6.5	Daytime telephone number			
6.6	Evening/other telephone number			
6.7	Email address			
6.8	Add another person?	Yes / No	If yes, repeat 6.2 to 6.8 on a separate page	
7	Public liability insurance			
7.1	Do you have public liability		Yes/No	
	insurance?		(If no go to question 7.6)	
	If yes, please provide details of the policy			
7.2	Insurance company			
7.3	Policy number			
7.4	Period covered			
7.5	Amount of cover (£m)			
7.6	Please state what steps you are taking to obtain such insurance			

8	Disqualifications and convictions	
	Has the applicant, or any person who will have cont	trol or management of the establishment, ever
8.1	been disqualified from:	Yes/No
0.1	Keeping a pet shop?	163/110
8.2	Keeping a dog?	Yes/No
8.3	Keeping an animal boarding establishment?	Yes/No
8.4	Keeping a riding establishment?	Yes/No
8.5	Having custody of animals?	Yes/No
8.6	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
8.7	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
8.8	If yes to any of these questions, please provide details, (continue on a separate sheet if necessary)	
9	Additional details	
10	Signature and Declaration	
	Signature of applicant, or applicant's solicitor, or oth behalf of the applicant, please state in what capacit I am aware of the provisions of Animal Welfare (Lic Regulations 2018 and the model conditions. The dedocumentation are correct to the best of my knowled Ticking this box indicates you have read and understant of the solicities.	ensing of Activities Involving Animals) (England) etails in the application form and any attached edge and belief.
	Signature Print	Name
	Capacity Date	
	For joint applications, signature of 2nd applic authorised agent	ant or 2nd applicant's solicitor or other
	Signature Print	Name
	Capacity Date	

Name and Address	to be used for correspondence	Э	
City/Town	Post Code		
Contact number			
Email address			

Date Protection:

Licence holder data is used in accordance with the General Data Protection Regulations. For further details please read the licensing team's Privacy Notice https://www.rbkc.gov.uk/privacy-notice-licensing. Licence holder data may also be included in data matches including the National Fraud Initiative to detect and prevent fraud.

The completed form should be returned to Royal Borough of Kensington and Chelsea, Licensing Team, Council Offices, 37 Pembroke Road, London, W8 6PW. Tel: 020 7341 5152