

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

**Application for a licence to keep or train animals for
exhibition**

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

1	Reference number	
1.1	Payment reference number	

2a	Agent					
2.1	Are you an agent acting on behalf of the applicant	Yes		No		If no, go to 3.1
2b	Further information about the Agent					
2.2	Name					
2.3	Address					
2.4	Email					
2.5	Main telephone number					
2.6	Other telephone number					

3	Applicant details					
3.1	Name					
3.2	Address					
3.3	Email					
3.4	Main telephone number					
3.5	Other telephone number					
3.6	Are you applying as a business or organisation, including a sole trader	Yes		No		If yes, go to 4.1
3.7	Are you applying as an individual	Yes		No		
3.8	Stage name (if any)					
3.9	Nationality					
3.10	Date of birth					Go to 5.1

4a	Applicant Business					
4.1	Is your company registered with companies house	Yes		No		If no, go to 4.3
4.2	Registration Number					
4.3	Is your business registered outside the UK					
4.4	VAT Number					

4a	Applicant Business	
4.5	Legal status of the business	
4.6	Your position in the business	
4.7	The country where your head office is located.	
4b	Business Address – This should be your official or registered address	
4.8	Building name or number	
4.9	Street	
4.10	District	
4.11	City or Town	
4.12	County or administrative area	
4.13	Post Code	
4.14	Country	

5	Type of business/performance (please tick)	
5.1	TV/Film/Social Media	
5.2	Theatre	
5.3	Circus using domestic animals	
5.4	Exhibiting Animals	
5.5	Animal Encounters	
5.6	Birds of Prey shows/exhibits	
5.7	Other please state	

6a	Application Details					
6.1	Have you been registered/licenced before	Yes		No		If no, go to 6.4
6.2	Local Authority where registered/licenced					
6.3	Give details of registration e.g type and numbers of animals, type of performance or exhibition.					

7	Premises to be licensed	
7.1	Name of premises/trading name	
7.2	Address of premises	
7.3	Telephone number of premises	
7.4	Email address	

8a	Kinds of animal to be trained and the number of each kind		
8.1	Kind of animal		
8.2	Number		
8.3	Add another kind of animal?	Yes/No	If no, go to 9.1
8b	Kinds of animal to be trained and the number of each kind 2		
8.4	Kind of animal		
8.5	Number		
8.6	Add another kind of animal?	Yes/No	If no, go to 9.1
8c	Kinds of animal to be trained and the number of each kind 3		
8.7	Kind of animal		

8a	Kinds of animal to be trained and the number of each kind		
8.8	Number		
8.9	If you intend to train further kinds of animals, please attach a separate list of these animals and the numbers of each.		

9a	Kinds of animal to be exhibited/encounter and the number of each kind		
9.1	Kind of animal		
9.2	Number		
9.3	Add another kind of animal?	Yes/No	If no, go to 10.1
9b	Kinds of animal to be exhibited/encounter and the number of each kind 2		
9.4	Kind of animal		
9.5.	Number		
9.6	Add another kind of Animal?	Yes/No	If no, go to 10.1
9c	Kinds of animal to be exhibited/encounter and the number of each kind 3		
9.7	Kind of animal		
9.8.	Number		
9.9	If you intend to exhibit further kinds of animals, please attach a separate list of these animals and the numbers of each.		

10	Proposed Performance or Encounter		
10.1	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. If it is an animal encounter please give details of what type of encounter and where these are to take place.		
10.2	Approximate duration of the performance (s)		
10.3	Number of times the performance will be given in one day.		
10.4	How will the animals be transported		
10.5	Where are the animals to be kept when not performing or being exhibited.		

11	Veterinary surgeon		
11.1	Name of usual veterinary surgeon		
11.2	Company name		
11.3	Address		
11.4	Telephone number		
11.5	Email address		

12a	Emergency key holder		
12.1	Do you have an emergency key holder?	Yes / No	If no, go to 13.1
12.2	Name		
12.3	Position/job title		
12.4	Address		

12.5	Daytime telephone number		
12.6	Evening/other telephone number		
12.7	Email address		
12.8	Add another person?	Yes / No	If no, go to 13.1
12b	Emergency key holder 2		
12.9	Name		
12.10	Position/job title		
12.11	Address		
12.12	Daytime telephone number		
12.13	Evening/other telephone number		
12.14	Email address		

13	Public liability insurance		
13.1	Do you have public liability insurance?	Yes / No	If no, go to 13.6
13.2	Insurance company		
13.3	Policy number		
13.4	Period of cover		
13.5	Amount of cover (£)		
13.6	Please state what steps you are taking to obtain such insurance		

14	Disqualifications and convictions		
	Has the applicant, or any person who will have control or management of the establishment, ever been disqualified from:		
14.1	Keeping a pet shop?	Yes/No	
14.2	Keeping a dog?	Yes/No	
14.3	Keeping an animal boarding establishment?	Yes/No	
14.4	Keeping a riding establishment?	Yes/No	
14.5	Having custody of animals?	Yes/No	
14.6	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	
14.7	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	
14.8	If yes to any of these questions, please provide details,		

15	Additional details		
15.1	Additional information which may be relevant to the application		

Declaration

16	Model Licence Conditions & Guidance	
	All applicants must tick to confirm that they have read the applicable model licence conditions & guidance	
16.1	Keeping or training animals for exhibition	

17	Additional Information	
	Please attach the following Information	
17.1	A plan of the premises	
17.2	Insurance policy	
17.3	Operating procedures	
17.4	Risk Assessments (including Fire)	
17.5	Infection control procedure	
17.6	Qualifications	
17.7	Training records	

18	Declaration	
18.1	This section must be completed by the applicant. If you are an agent please ensure this section is completed by the applicant.	
18.2	I am aware of the provisions of the relevant Regulations and model licence conditions. The details contained in the application form and any attached documentation are correct to the best of my knowledge and belief.	
18.3	Signing this box indicates you have read and understood the above declaration	
18.4	Full Name	
18.5	Capacity	
18.6	Date	