

Barking & Dagenham

Application Form for a Licence to Keep Primates

The Animal Welfare (Primates) Regulations 2024

Please complete all the questions in the form as your application will be returned if not fully completed.

| | | | |
|---|--------------------------|----------------------|--------------------------|
| Is this application a: | | | |
| New Application? | <input type="checkbox"/> | Renewal Application? | <input type="checkbox"/> |
| If this is a renewal application, please provide your current licence number here | | | |

| | | | |
|---|--|-------------|--|
| Main Applicant Details | | | |
| Title | <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Dr <input type="checkbox"/> Other (specify) | | |
| First Name | | | |
| Surname | | | |
| Date of Birth (DD/MM/YYYY) | | Nationality | |
| Convictions and Disqualifications | <p>Have you ever been convicted in relation to, or been disqualified in respect of:</p> <p><input type="checkbox"/> Selling animals</p> <p><input type="checkbox"/> Animal boarding/ walking/ sitting.</p> <p><input type="checkbox"/> Hiring out horses/ running a riding establishment</p> <p><input type="checkbox"/> Keeping animals for Exhibition</p> <p><input type="checkbox"/> Breeding Dogs</p> <p><input type="checkbox"/> Offences under the Animal Welfare Act 2006</p> <p style="padding-left: 20px;"><input type="checkbox"/> Section 4 Unnecessary Suffering</p> <p style="padding-left: 20px;"><input type="checkbox"/> Section 5 Mutilation</p> <p style="padding-left: 20px;"><input type="checkbox"/> Section 6 Docking of Dogs' Tails</p> <p style="padding-left: 20px;"><input type="checkbox"/> Section 7 Administration of Poisonous/ Injurious Substances</p> <p style="padding-left: 20px;"><input type="checkbox"/> Section 8 Fighting</p> <p style="padding-left: 20px;"><input type="checkbox"/> Section 9 Duty of Care</p> <p style="padding-left: 20px;"><input type="checkbox"/> Section 11 Sale of Animals/ Animals as Prizes to Under 16s</p> <p><input type="checkbox"/> Offences under the Animal Welfare (Licensing of Activities Involving Animals) (England) Regulations 2018</p> <p><input type="checkbox"/> Offences under the Dangerous Wild Animals Act 1976</p> <p><input type="checkbox"/> Offences under the Zoo Licensing Act 1981</p> <p><input type="checkbox"/> Other Conviction</p> | | |
| Have you ever had a licence refused or revoked? | <input type="checkbox"/> Yes- Provide details below <input type="checkbox"/> No | | |
| If you have ticked convictions, disqualifications, please provide details here. | | | |
| DBS Certificate Enclosed? | <input type="checkbox"/> Yes <input type="checkbox"/> No (your application cannot be processed without enclosing a basic DBS Certificate) | | |

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| Will you be named on the licence? Note: This makes you legally liable for compliance with the licence and the welfare of the animals. | <input type="checkbox"/> Yes <input type="checkbox"/> No |
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Correspondence Details- How we can contact you.

| | | |
|------------------|----------|--|
| Address | | |
| Telephone Number | Home | |
| | Mobile | |
| | Business | |
| Email Address | | |

Second Applicant Details (if applicable)

| | | | |
|----------------------------|---|----------------------------------|------------------------------------|
| Title | <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Dr <input type="checkbox"/> Other (specify) | | |
| First Name | | | |
| Surname | | | |
| Preferred Pronouns | <input type="checkbox"/> He/Him | <input type="checkbox"/> She/Her | <input type="checkbox"/> They/Them |
| Date of Birth (DD/MM/YYYY) | | Nationality | |

| | |
|-----------------------------------|--|
| Convictions and Disqualifications | Have you ever been convicted in relation to, or been disqualified in respect of: <ul style="list-style-type: none"> <input type="checkbox"/> Selling animals <input type="checkbox"/> Animal boarding/ walking/ sitting. <input type="checkbox"/> Hiring out horses/ running a riding establishment <input type="checkbox"/> Keeping animals for Exhibition <input type="checkbox"/> Breeding Dogs <input type="checkbox"/> Offences under the Animal Welfare Act 2006 <ul style="list-style-type: none"> <input type="checkbox"/> Section 4 Unnecessary Suffering <input type="checkbox"/> Section 5 Mutilation <input type="checkbox"/> Section 6 Docking of Dogs' Tails <input type="checkbox"/> Section 7 Administration of Poisonous/ Injurious Substances <input type="checkbox"/> Section 8 Fighting <input type="checkbox"/> Section 9 Duty of Care <input type="checkbox"/> Section 11 Sale of Animals/ Animals as Prizes to Under 16s <input type="checkbox"/> Offences under the Animal Welfare (Licensing of Activities Involving Animals) (England) Regulations 2018 <input type="checkbox"/> Offences under the Dangerous Wild Animals Act 1976 <input type="checkbox"/> Offences under the Zoo Licensing Act 1981 <input type="checkbox"/> Other Conviction |
|-----------------------------------|--|

| | |
|---|---|
| Have you ever had a licence refused or revoked? | <input type="checkbox"/> Yes- Provide details below <input type="checkbox"/> No |
|---|---|

| | |
|---|--|
| If you have ticked convictions, disqualifications, please provide details here. | |
|---|--|

| | |
|---------------------------|--|
| DBS Certificate Enclosed? | <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(your application cannot be processed without enclosing a basic DBS Certificate)</i> |
|---------------------------|--|

| | |
|--|--|
| Will you be named on the licence? Note: This makes you legally liable for compliance with the licence and the welfare of the animals. | <input type="checkbox"/> Yes <input type="checkbox"/> No |
|--|--|

| | |
|---|--|
| Second Applicant Correspondence Details- How we can contact you. (if applicable) | |
|---|--|

| | | |
|------------------|----------|--|
| Address | | |
| Telephone Number | Home | |
| | Mobile | |
| | Business | |
| Email Address | | |

| | |
|---|--|
| Have any applicants held an animal licence previously? | <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(if no, just answer N/A below)</i> |
|---|--|

| | |
|-----------------------------|--|
| Full name of licence holder | |
| Name of Licensing Authority | |
| Type of licence held | |
| Held for how long? | |

| | |
|---------------------------|--|
| About the Primates | |
|---------------------------|--|

| | |
|---|---|
| Do you own the primates you keep? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | If no, do you have contract or agreement with the owner of the primate? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| List of primates kept | Complete the enclosed form |
| Is the premises on which the primates will be kept the same as applicant 1 or 2? | <input type="checkbox"/> Yes, Same as Applicant 1 <input type="checkbox"/> Yes, Same as Applicant 2 <input type="checkbox"/> No, it is different (please specify) |
| From which date do you wish the licence to have effect? <i>Please allow a minimum of 10 weeks to process your application.</i> | |
| Details of the quarters used to accommodate primates, including number, size (dimensions) and type of construction. <i>You may attach a plan or drawing with dimensions with your application.</i> | |
| Are any of the primates you keep listed under the Schedule of the Dangerous Wild Animals Act 1976? | <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please be aware that a Dangerous Wild Animals (DWA) Licence is also required. You will be assessed against the licence conditions for both pieces of legislation. |
| How many species primates you keep are listed under the Schedule of the Dangerous Wild Animals Act 1976? | |

| Public Liability Insurance (minimum requirement is £5 million) | | | |
|---|--|----------------|--|
| Name of Insurance Company | | | |
| Policy Number | | | |
| Cover Start Date | | Cover End Date | |
| Amount of Cover (£m) | | | |
| Policy Holder Name | | | |

| Agent Details (if applicable) | |
|--------------------------------------|--|
| Agency | |
| Agent Name | |
| Telephone Number | |
| Email Address | |
| Agent Address | |

| Your Veterinary Practice Details | |
|--|--|
| Name of Veterinary Practice | |
| Vet name | |
| Telephone Number | |
| Email Address | |
| Address | |
| Out of Hours Vet Provider Name | |
| Out of Hours Vet Provider Telephone Number | |
| Out of Hours Vet Provider Email Address | |
| Out of Hours Vet Provider Postal Address | |

| Emergency Key Holder 1 (must live within 30 minutes travelling distance of animal residence) | |
|---|--|
| Full Name | |
| Telephone Number | |
| Email Address | |
| Address | |

| Emergency Key Holder 2 (must live within 30 minutes travelling distance of animal residence) | |
|---|--|
| Full Name | |
| Telephone Number | |
| Email Address | |
| Address | |

| Brief Overview of Animal Accommodation & Facilities | |
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| Heating Provision | <input type="checkbox"/> Thermostatically Controlled <input type="checkbox"/> Manually Controlled <input type="checkbox"/> Heat Lamp(s) <input type="checkbox"/> Central Heating System <input type="checkbox"/> Electric Panel Heaters <input type="checkbox"/> Other (Specify): |
| Waste disposal provision | <input type="checkbox"/> Waste collection contract in place Name of contractor: Frequency of collection: <input type="checkbox"/> Household Waste Bin <input type="checkbox"/> Other (Specify): |
| Is the accommodation | <input type="checkbox"/> Wholly indoors <input type="checkbox"/> Wholly Outdoors <input type="checkbox"/> Combination of inside and outside space |
| Water Provision | <input type="checkbox"/> Mains Fed drinkers <input type="checkbox"/> Manual Water Receptacles. |
| Veterinary Facilities/ Isolation | <input type="checkbox"/> Vet Room on Site for a Vet to Visit <input type="checkbox"/> Primates Transported Off-site to Vets |
| Lighting | <input type="checkbox"/> Artificial lighting (With UV) <input type="checkbox"/> Artificial Lighting (No UV) <input type="checkbox"/> Natural Lighting Only <input type="checkbox"/> Combination of Artificial (No UV) & Natural <input type="checkbox"/> Combination of Artificial (with UV) and Natural |
| Food Storage & Preparation Facilities | Separate animal kitchen? <input type="checkbox"/> Yes <input type="checkbox"/> No Details: |

| Supporting Document Checklist | |
|--|--|
| Standard Operating Procedures | Activity Specific Procedures |
| <input type="checkbox"/> Repair and maintenance procedure/ programme. | <input type="checkbox"/> Introduction of new primates to the collection and/or existing groups of primates procedure. |
| <input type="checkbox"/> Cleaning and Hygiene procedure | <input type="checkbox"/> The individual diet plans for each primate. This must be created based on guidance from a Vet or primate dietary expert. |
| <input type="checkbox"/> Immature Primates Opportunities procedure | <input type="checkbox"/> Breeding health and management plan provided by the veterinarian where breeding is planned. |
| <input type="checkbox"/> Separating/ grouping of primates policy | <input type="checkbox"/> Contraception plan for non-breeding primates. |
| <input type="checkbox"/> Written Emergency Plan covering fire (evacuation, firefighting equipment, how animals are evacuated and kept safe during the emergency, smoke & CO detector locations/ testing & fire drills), loss of utilities, extremes of weather/ temperature, breakdown of vehicle during animal transport, alternative accommodation provision in the event of premises becoming uninhabitable, an up-to-date list of emergency contact details that includes the fire service and police. | <input type="checkbox"/> Register of primates which includes: (i) its name; (ii) its sex; (iii) its microchip number; (iv) its date of birth or, if not known, its approximate date of birth; (v) its species; (vi) its colour and markings; (vii) the name and contact details of its previous keeper (where applicable); (viii) the date and cause of its death (where applicable); and (ix) where the primate is permanently transferred to other premises, the name and contact details of the new keeper (where applicable) and the address of the place to which it has been relocated; |
| <input type="checkbox"/> Disease control and prevention procedure including zoonoses. | <input type="checkbox"/> A written procedure for special circumstances, including contingencies in the event of: (a) the temporary isolation of any primate including arrangements for ensuring that the welfare needs of any primate that is being temporarily isolated are met during the period of its isolation. (b) the death or escape of a primate; and (c) the care of the primates following the revocation of the licence or the death of the licence holder |
| <input type="checkbox"/> Transportation Procedure | Also required where a Primate is a listed DWA |
| <input type="checkbox"/> Monitoring and Ensuring health and Welfare of Animals Procedure | <input type="checkbox"/> If in a premises of multiple occupancy, i.e., a HMO, block of flats or a row of terraced properties, you must have an emergency plan in the event of an escape to protect public safety. |
| <input type="checkbox"/> Isolation Procedure | <input type="checkbox"/> If in rented accommodation, evidence of permission from the landlord to keep a DWA must be supplied. |
| <input type="checkbox"/> Letter from vets confirming registration and services provided to operator. (Storage of cadavers, emergency vet treatment & isolation facilities) | <input type="checkbox"/> A risk assessment for keeping a dangerous wild animal. |
| <input type="checkbox"/> Preventative Healthcare Plan/ Biosecurity Risk Assessment (signed by your registered veterinarian) | |
| Other Documents | |
| <input type="checkbox"/> Site plan of premises where animals are kept | <input type="checkbox"/> Plan of animal accommodation for each enclosure with dimensions |
| <input type="checkbox"/> Public Liability Insurance Certificate for at least £5 million cover (not to be confused with employers' liability which is different) | <input type="checkbox"/> Basic level DBS Certificate |

| Declaration | | | | |
|--|--|--|--|--------------------------|
| I/ we have read and understood the conditions and guidance issued by the Department for Environment, Food & Rural Affairs (DEFRA) for keeping primates. | | | | <input type="checkbox"/> |
| I/ we understand that failing to comply with the licence conditions is a criminal offence and I may be liable to prosecution. | | | | <input type="checkbox"/> |
| The details provided in the application form and any attached documentation are correct to the best of my knowledge and belief. | | | | <input type="checkbox"/> |
| I/we confirm that we have enclosed the supporting documents to accompany the application and that failure to do so will cause the application to be rejected. | | | | <input type="checkbox"/> |
| I understand my responsibilities under the Animal Welfare Act 2006 to the animals in my care. | | | | <input type="checkbox"/> |
| I have paid the correct licence fee to accompany my application: (Please refer to the Councils Website for the full list of fees) For a primate application with no dangerous wild animal (3-year licence) <input type="checkbox"/> For a primate licence where the primate is listed under the schedule of the Dangerous Wild Animals Act 1976 (2-year licence) <input type="checkbox"/> | | Payment Method- Payment Reference- Date- | | |
| Signed (Applicant 1) | | Print Name | | Date |
| Signed (Applicant 2) | | Print Name | | Date |

Please send this application to:

Licensing Department
Barking Town Hall
Town Hall Square
Barking
IG11 7LU

Or

Licensing@lbbd.gov.uk