

Reference number

organisation, including a sole trader

Applying as an individual

3.8

1

1.1

### **Woking Borough Council**

Civic Offices, Gloucester Square, Woking, Surrey, GU21 6YL

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

#### **Breeding dogs**

## Standard applicant profile payment and declaration

1.1	System reference number						
1.2	Your reference						
	Please comple  If you have nothing to reco				' or "	None"	
2	Agent						
2.1	Are you an agent acting on behalf of the applicant?						
2b	Further information about the agen	t					
2.2	Name						
2.3	Address						
2.4	Email						
2.5	Main telephone number						
2.6	Other telephone number						
L	-						
3	Applicant details						
3.1	Name						
3.2	Address						
3.3	Date of birth						
3.4	Email						
3.5	Main telephone number						
3.6	Other telephone number						
3.7	Applying as a business or	Yes		No			

Yes

No

4.2	Registration number	
4.3	Is your business registered outside the UK?	
4.4	VAT number	
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	<b>Business address</b> (This should be you receive all communication.)	our official address. The address required of you by law to
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	Payment	
5.1	Payment must be made at the time of	
5.2		an officer will contact you in order to take payment of the
	application fee. Alternatively, you can All payments can be made via debit or	pay the application fee by calling the office on <b>01483 743 664</b> .
6	Model licence conditions and guida	nce
		ad the applicable model licence conditions & guidance
6.1	Pet vending	
6.2	Animal boarding	
6.3	Performing animals	

Yes

No

If no, go to 4.3

Applicant business
Is your company registered with companies house?

**4** 4.1

6.4

6.5

Riding establishments

The breeding and sale of dogs

Additional information			
To confirm that you have the following information available, to be checked at the time of inspection			
-			
A plan of the premises			
Insurance policy			
Operating procedures			
Risk assessments (including fire)			
Infection control procedure			
Qualifications / training policy			
Client booking / registration / consent forms			
	annicent if you are an arent places analyze this section is		
completed by the applicant.	***		
	evant Act and model licence conditions. The details contained ed documentation are correct to the best of my knowledge and		
Ticking this box indicates you have read and understood the above declaration			
Full name			
Capacity			
Date			
Standard declaration and signature	section		
Sign:	Date:		
	To confirm that you have the following or indicate you have attached.  A plan of the premises  Insurance policy  Operating procedures  Risk assessments (including fire)  Infection control procedure  Qualifications / training policy  Client booking / registration / consent forms  Declaration  This section must be completed by the completed by the applicant.  I am aware of the provisions of the relating the application form and any attached belief.  Ticking this box indicates you have read and understood the above declaration  Full name  Capacity  Date  Standard declaration and signature		



### **Woking Borough Council**

Civic Offices, Gloucester Square, Woking, Surrey, GU21 6YL

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

# Licence application for breeding dogs

1	Standard applicant profile section	
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Please complete all the questions in the form.

If you have nothing to record, please state "Not applicable" or "None"

2	Type of application								
2.1	Type of application		New		Renewal				
2.2	Existing licence number								
2a	Animals to be a	ccommo	dated	ı					
2.3	Wholly Indoors Wholly outdoor			rs	Combination of outdoors and indoors				
2.4	Breeds of dogs concerned								
2.5	Number of bitche	es kept							
2.6	Owned by the applicant		Co owned by t applicant	he	(	On breeding term	ıs		
2.7	Provide details of the ages of bitches kept.								
2.7.1	Maximum capacity of puppies to be kept at premises								
2.8	Number of studs kept								
2.9	Owned by the applicant		Co-owned by tapplicant	he	(	On breeding term	ns		

2	Type of application	
2 2.10	Provide details of the ages of the studs kept	
3	Premises to be licensed	
3.1	Name of premises / trading name	
3.2	Address of premises	
3.3	Telephone number of premises	
3.4	Email address	
3.5	Do you have planning permission for this business use?	Yes / No
4.1	Accommodation and facilities  Details of the quarters used to accommodate animals, including number, size and type of construction	
4.2.	Exercise facilities and arrangements	
4.3	Heating arrangements	
4.4	Method of ventilation of premises	

4	Accommodation and facilities		
4.5	Lighting arrangements (natural and artificial)		
4.6	Water supply		
4.7	Facilities for food storage and preparation		
4.8	Arrangements for disposal of excreta, bedding and other waste material		
4.9	Isolation facilities for the control of infectious diseases		
4.10	Fire precautions/equipment and 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 minimise disturbance from noise?		
5	Veterinary surgeon		
5.1	Name of usual veterinary surgeon		
5.2	Company name		
5.3	Address		
5.4	Telephone number		
5.5	Email address		

6	Emergency key holder details					
6.1	Name					
6.2	Position / job title					
6.3	Address					
6.4	Daytime telephone number					
6.5	Evening / other telephone number					
6.6	Email address					
6.7	Add another person?	Yes /	No	If yes, 6.1 to	6.7 will be repeated	
	,				•	
7	Public liability insurance					
7.1	Do you have public liability insurance?	١	Yes / No	If no, go to q	uestion 7.6	
	If yes, please provide details of the policy	•				
7.2	Insurance company					
7.3	Policy number					
7.4	Period of cover					
7.5	Amount of cover (£m)					
7.6	Please state what steps you are taking to obsuch insurance	tain				
8	Disqualifications and convictions		. ( ]		atal Palace at a section	
	Has the applicant, or any person who will h disqualified from:	ave cor	ntrol or manag	gement of the e	stablishment, ever been	
8.1	Keeping a pet shop?			Yes / No		
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 h	ave con	otrol or			
	management of the establishment, been co offences under the Animal Welfare Act 200	onvicted		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 pro	ovide de	etails,			

9.1	Additional information which is required or may be relevant to the application	
10	Standard declaration and signature section	
	Sign: D	ate:

Please check local guidance notes and conditions for any additional information which may be required

Additional details

Download this application form, complete and send it to: Environmental Health, Woking Borough Council, Civic Offices, Gloucester Square, Woking GU21 6YL.