

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

LICENCE APPLICATION FOR DAY CARE

| NEW LICENCE | | RENEWAL LICEN | ICE | | |
|--------------------------------------|-------------------------------------|---------------------------|-------|--|--|
| Applicant's Details (block capitals) | | | | | |
| Name of Applicant(s): | | | | | |
| Date of Birth: | National Insu | ırance No | | | |
| | | | | | |
| | per: | | | | |
| Email: | | | | | |
| Is any person named ab | ove disqualified from: | | | | |
| . • | | YES N YES N YES N | NO | | |
| If yes - please insert deta | ails | | | | |
| | | | | | |
| Premises Details (bloc | | | | | |
| Trading Name: | Current li | cence number (if applicat | ole): | | |
| Address of Premises for | which the licence is required if (d | ifferentfrom above): | | | |
| | | | | | |
| | | | | | |
| Post Code: | | | | | |
| Telephone Number: | | | | | |
| Website Address: | | | | | |
| | | | | | |

| Application Details (block capitals) | | | | |
|---|--|--|--|--|
| Number of dogs which are intended to be boarded at the premises: | | | | |
| • | | | | |
| Description of premises type and number of rooms in which animals are (will be) accommodated: | | | | |
| • | | | | |
| • | | | | |
| • | | | | |
| • | | | | |
| • | | | | |
| • | | | | |
| Arrangements for minimising the disturbance from noise: | | | | |
| • | | | | |
| Exercise Facilities provided: | | | | |
| • Height of fencing: | | | | |
| Description of isolation facilities available: | | | | |
| • | | | | |
| | | | | |
| Arrangements for disposal of excreta, bedding and other waste materials: | | | | |
| Application Details continued (block capitals) | | | | |
| Facilities for food storage and preparation: | | | | |
| • | | | | |
| Fire precautions and equipment: | | | | |
| • | | | | |
| | | | | |

| Method for keeping a register/record of animals: | | | | |
|---|-----|--|--|--|
| • | | | | |
| Additional information | | | | |
| Do you have an Emergency Key holder | YES | NO | | |
| | | | | |
| Name of key holder: | | | | |
| Home Address: | | | | |
| | | | | |
| Daytime telephone number: | | | | |
| Email: | | | | |
| Is any person named above disqualified from: | | | | |
| Keeping a dog? Having custody of animals? Keeping a Pet Shop? Keeping an Animal Boarding Establishment? Keeping a Breeding Establishment? | YES | NO ON O | | |
| Votorinoru Surgoon | | | | |
| Veterinary Surgeon | | | | |
| Are you registered with a Veterinary Surgeon | YES | NO L | | |
| Name of Veterinary surgeon: | | | | |
| Address: | | | | |
| | | | | |
| Contact number: | | | | |
| Payment Details and Declaration | | | | |
| Fee to be paid upon application. | | | | |
| £420.00 | | | | |
| Any administration/amendments made to a licence during the term will be charged at: | | | | |
| £32.00 | | | | |
| £32.00 | | | | |
| £32.00 | | | | |

The following documentation MUST be provided along with the completed application form

- Plan of Premises
- The following procedures: Feeding regimes (If applicable)

Cleaning regimes Transportation

Prevention of and control of the spread of disease

Monitoring and ensuring health and welfare of all animals

The death or escape of an animal

In case of Fire

- Certificates of Qualifications
- Training records

Before signing and submitting the application please consider the following:

- There must be a fit and proper person present to supervise the dogs at all times.
- The licence holder or designated manager must having training at a minimum OFQUAL regulated level 2 qualification in a relevant subject by 2026.

| I am aware of the provisions of the relevant Act 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. | | | | |
|---|-------------|--|--|--|
| Signed: | Print Name: | | | |
| Dated: | | | | |

NB: The information on this form will be treated as confidential.

The cost of any independent vet required to be used, by the City Council, as part of the application process will be charged to the applicant as an additional fee.

This application must be accompanied by the appropriate fee and returned to:

Dog Enforcement Team Whitley Depot 259 London Road Coventry CV3 4AR

Tel: 07976 736957

Email: animal.welfare@coventry.gov.uk