

The Animal Welfare (Licensing of Activities Involving Animals) (Scotland) Regulations 2021

APPLICATION FOR LICENCE TO KEEP A BREEDING ESTABLISHMENT



Section 1: Licence Details (To be completed by all applicants)

| | |
|--|---|
| Is this a new or renewal application? | <input type="checkbox"/> New <input type="checkbox"/> Renewal |
| Will the Licence be held by an Individual or a Company/ Partnership? | <input type="checkbox"/> Individual <input type="checkbox"/> Company/Partnership |
| Type of Breeding Establishment | <input type="checkbox"/> Dog <input type="checkbox"/> Cat <input type="checkbox"/> Rabbit |

Section 2: Your Details (To be completed by all applicants) – if there is more than one, please attach a separate sheet stating each Director/Partner's personal details

| | |
|--|--|
| First name(s): | Surname: |
| Any previous surname (<i>if applicable</i>) | Phone number: |
| Home address (<i>inc. postcode</i>): | Date of birth: |
| | Place of birth: |
| Email: | |
| What is your relationship to the business: | |
| Will you be responsible for the day to day management of the business? | <input type="checkbox"/> Yes <input type="checkbox"/> No (please also complete section 3) |
| Will you be at or within a reasonable distance of the premises at all times? | <input type="checkbox"/> Yes <input type="checkbox"/> No (please also complete section 4) |

Section 3: Person responsible for day to day management of the business (if different from section 2)

| | |
|--|----------------|
| First name(s): | Surname: |
| Any previous surname (<i>if applicable</i>): | Phone number: |
| Home address (<i>inc. postcode</i>): | Date of birth: |

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Section 3: Person responsible for day to day management of the business
 (if different from section 2)

| | |
|--------|-----------------|
| | Place of birth: |
| Email: | |

Section 4: Person who will be at or within a reasonable distance of the premises at all times
 (if different from section 2).

| | |
|--|-----------------|
| First name(s): | Surname: |
| Any previous surname (<i>if applicable</i>): | Phone number: |
| Home address (<i>inc. postcode</i>): | Date of birth: |
| | Place of birth: |
| Email: | |

Section 5: Premises details (To be completed by all applicants)

| | |
|--|---|
| Is the premises address, phone number and email address the same as section 2? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Premises Address (<i>inc. postcode</i>): | Premises phone number: |
| Premises email: | |
| Business website: | |

Section 6: Directors/Partners of the business
 (To be completed if a Company/Partnership is applying for the licence)

| |
|---|
| Name of the Company/Partnership: |
| Company Number: |
| How many Directors/Partners does the business have? |

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Section 6: Directors/Partners of the business
(To be completed if a Company/Partnership is applying for the licence)

Please provide details for first Director/Partner – if there is more than one, please attach a separate sheet stating each Director/Partner's personal details

| | |
|--|-----------------|
| First name(s): | Surname: |
| Any previous surname (<i>if applicable</i>): | Phone number: |
| Home address (<i>inc. postcode</i>): | Date of birth: |
| | Place of birth: |
| Email: | |

Section 7: Emergency contact - A second individual who can provide access to the premises
(To be completed by all applicants)

| | |
|--|----------|
| First Name(s): | Surname: |
| Home Address (<i>inc. postcode</i>): | |
| Phone number: | Email: |

Section 8: Breeding details (To be completed by all applicants)

****Note:** If you have more than one type of accommodation, provide information on each.
If required, attach a separate sheet of paper answering all the questions.

| | |
|--|---|
| Will the breeding activity be undertaken indoors or outdoors? (Indoor breeders maintain their stock wholly or partially within their own private dwelling house) | <input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor |
| What is the maximum number of Animals kept annually on the premises? | |

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Section 8: Breeding details (To be completed by all applicants)

****Note:** If you have more than one type of accommodation, provide information on each.
If required, attach a separate sheet of paper answering all the questions.

| | |
|--|--|
| How many litters are bred annually? | |
| State the type of accommodation and the number of each used for breeding animals | <i>E.g. kennels, units, rooms, hutches</i> |
| State the material each type of accommodation is made from? | |
| What are the dimensions of each accommodation? | Height: Depth: Width: |
| What bedding is supplied within the accommodation? | |
| Whelping / Queening / Kindling Accommodation | |
| State the type of accommodation and the number of each used for birthing | <i>E.g. whelping boxes, nesting box, rooms, etc.</i> |
| State the material each type of birthing accommodation is made from? | |
| What are the dimensions of each accommodation? | Height: Depth: Width: |
| What bedding is supplied within the accommodation | |

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Section 8: Breeding details (To be completed by all applicants)

****Note:** If you have more than one type of accommodation, provide information on each.
 If required, attach a separate sheet of paper answering all the questions.

Other animals retained on the premises

| | |
|--|--|
| How many other animals are kept on the premises? | |
| What is the purpose of these animals? | <i>E.g. stud, pets, etc.</i> |
| State the type of accommodation and the number of each used to house these animals | <i>E.g. kennels, units, hutch etc.</i> |
| State the material each type of accommodation is made from? | |
| What are the dimensions of each accommodation? | Height: Depth: Width: |
| What bedding is supplied within the accommodation | |

Section 9: Heating, lighting and ventilation (To be completed by all applicants)

****Note:** If you have more than one type of accommodation, provide information on each.
 If required, attach a separate sheet of paper answering all the questions.

| | Birthing Accommodation | Other Accommodation |
|--|-------------------------------|----------------------------|
| How is the accommodation heated? | | |
| What lighting is available within the accommodation? | | |
| How is the accommodation ventilated? | | |

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Section 10: Animal Wellbeing (To be completed by all applicants)

| | |
|--|---|
| What activities and toys are available for the social and mental wellbeing of the adult animals and their young? | |
| What are the facilities or arrangements for exercising the animal? | |
| How are the animals socialised? | |
| Are you transporting the animals over 65km? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

Section 11: Health and Safety (To be completed by all applicants)

| | |
|---|---|
| State which water source is used for the premises | <input type="checkbox"/> Mains supply <input type="checkbox"/> Private supply |
| How and where is animal feed stored? | |
| Describe the arrangements for the disposal of excreta? | |
| Describe the arrangements for the disposal of other waste material? | |
| Describe the process for the control of infectious diseases including the location the isolation facility/ies. | |
| Have you a written policy and procedure which details the protection of animals and persons in case of fire or other emergency (including emergency exits)? | <input type="checkbox"/> Yes – Copy provided <input type="checkbox"/> No – State by when this will be submitted. |

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Section 11: Health and Safety (To be completed by all applicants)

| | |
|--|--|
| Do you have your insurance documents? | <input type="checkbox"/> Yes – Copy to be provided with the application <input type="checkbox"/> No – A copy must be sent before your licence can be considered |
| Name and address (including postcode) of your vet: | Vet's phone number: |

Section 12: Experience and Qualifications (To be completed by all applicants)

| | |
|---|--|
| Detail any relevant qualifications and certificates held by anyone named in this application or employed by the business. | <i>Provide copies with the application</i> |
| Describe any relevant experience held by anyone named in this application or employed by the business. | |

Section 13: Disqualifications (To be completed by all applicants)

| | |
|--|--|
| Has anyone named in this application ever been disqualified under the Animal Health and Welfare (Scotland) Act 2006 from: <ul style="list-style-type: none"> owning or keeping animals (or both); dealing in animals; transporting animals; working with or using animals; providing any service relating to animals (including, in particular, for their care) which involves taking possession of animals; taking possession of animals for the purpose of an activity in respect of which a disqualification mentioned above is imposed; or taking charge of animals for any, or any other, purpose. | <input type="checkbox"/> No <input type="checkbox"/> Yes – Please provide details |
|--|--|

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| | |
|--|---|
| <p>Has anyone named in this application ever been disqualified under the Animal Welfare Act 2006 from:</p> <ul style="list-style-type: none"> • from owning animals; • from keeping animals; • from participating in the keeping of animals; • from being party to an arrangement under which he is entitled to control or influence the way in which animals are kept; • from dealing in animals; • from transporting animals; or • from arranging for the transport of animals. | <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes – Please provide details</p> |
| <p>Has anyone named in this application ever been disqualified under the Welfare of Animals Act (Northern Ireland) 2011 from:</p> <ul style="list-style-type: none"> • from owning animals; • from keeping animals; • from participating in the keeping of animals; • from being party to an arrangement under which that person is entitled to control or influence the way in which animals are kept; • from dealing in animals; • from transporting animals; or • from arranging for the transport of animals. | <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes – Please provide details</p> |

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Section 14: Declarations (To be completed by all applicants)

I/we declare that the particulars given on this form are correct to the best of my/our knowledge and belief.

I/we understand that the local authority may make reasonable enquiries into being fit and proper person(s) to hold a licence and permit the use of my/our personal data for this purpose.

I/we commit to reimburse the local authority for any veterinary or third-party inspection fees necessarily incurred in processing this application.

Applicant Signature(s):

Date:

To be enclosed with this application:

- Application fee
- Insurance documents
- Relevant qualifications
- Written policy and procedure which details the protection of animals and persons in case of fire or other emergency (including emergency exits)

The information you supply on this form will be used for the purpose for which you have provided it, and appropriate measures are in place to protect your personal data. A full privacy notice, which provides information about your rights under current data protection legislation and details about what will happen to your personal data can be found here: <https://www.argyll-bute.gov.uk/privacy/animal-health>

Return completed application forms to:

Environmental and Animal Health
Argyll and Bute Council
Kilmory
LOCHGILPHEAD
PA31 8RT

Email: envhealth@argyll-bute.gov.uk