

Section 1: Licence Details (To be completed by all applicants)			
Is this a new or renewal application?	□ New □ Renewal		
Will the Licence be held by an Individual, a Charity/SCIO, or a Company/Partnership?	☐ Individual ☐ Registered Charity/SCIO ☐ Company/Partnership		
Section 2: Your Details (To be completed by all apple necessary	licants) – continue on additional sheet if		
First name(s):	Surname:		
Any previous surname (if applicable)	Phone number:		
Home address (inc. postcode):	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?	☐ Yes ☐ No (please also complete section 3)		
Will you be at or within a reasonable distance of the premises at all times?	☐ Yes ☐ 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 (if applicable):	Phone number:		
Home address (inc. postcode):	Date of birth:		
	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 (if applicable):		Phone number:	
Home address (inc. postcode):		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 ☐ Yes address the same as section 2? ☐ No			
Premises Address (inc. postcode):		Premises phone number:	
Premises email:			
Business website:			
Section 6:	ection 6: Directors/Partners/Trustees of the business (To be completed if a Company/Partnership/Charity/SCIO is applying for the licence)		
Name of the Company/Partnership/Charity/SCIO:			
Company or Charity Number:			
How many Directors/Partners/Trustees does the business have?			
Please provide details for first Director/Partner/Trustee – if there are more than one, please attach a separate sheet stating each Director/Partner/Trustee's personal details			
First name(s): Surname:			



Section 6:		Partners/Trustees of the business pleted if a Company/Partnership/Charity/SCIO is applying for the licence)			
Any previous s	surname (<i>if app</i>	olicable):		Phone number:	
Home address	(inc. postcode	·):		Date of birth:	
				Place of birth:	
Email:					
Section 7:		contact - A second individed in the letted by all applicants)		who can provide access t	o the premises
First Name(s):		Surname:			
Home Address	s (inc. postcode	?):			
Phone number	r:		Emai	l:	
Section 8:	Pet rehomin	g details (To be compl	eted b	y all applicants)	
□ Dogs □ Cats □ Rabbits □ Guinea P		Animal Species (State	e exac	t species name)	Maximum number of animals intending to be kept
		□ Dogs			
		☐ Cats			
		☐ Rabbits			
		☐ Guinea Pigs			
		☐ Arachnids (e.g. sp.	iders, s	scorpions)	



Section 8:	Pet rehoming details (To be completed by all applicants)		
		☐ Fish (Specify whether tropical or cold water)	
		☐ Amphibians (e.g. frogs, toads etc.)	
		☐ Reptiles (e.g. snakes, lizards, tortoises etc.)	
		☐ Birds (e.g. finches, budgerigars etc.)	
		☐ Wildlife (e.g. hedgehogs, hares etc.)	
		☐ Any other species (Specify)	
Section 9: Animal accommodation (To be completed by all applicants) **Note: For each species of animal provide the type of accommodation. 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.			
What type of a different specie		n is used to house the	
State the mate from?	rial each type	of accommodation is made	



What are the dimensions of each accommodation?	Height: Depth: Width:
How will the accommodation be heated?	
How will the accommodation be ventilated?	
How will the humidity/temperature be monitored within the accommodation?	
What material is provided within the accommodation to represent a natural habitat?	
What process is in place to clean the accommodation?	
What lighting is available within the accommodation?	
State which water source is used for the premises	☐ Mains supply☐ Private supply
What arrangements are in place for the disposal of excreta?	
What arrangements are in place for the disposal of other waste material?	
Describe the process for the control of infectious diseases including the location of the isolation facility.	
Are you transporting any animal over 65km?	☐ Yes ☐ No



Section 10: Health and Safety (To be completed by all applicants)			
Have you provided a copy of your written policy and procedure which details the protection of animals and persons in case of fire or other emergency (including emergency exits)?	 ☐ Yes – Copy provided ☐ No – State by when this will be submitted. 		
Have you provided a copy of the information to be supplied to the purchaser on the appropriate care of the animals to be sold as pets?	 ☐ Yes – Copy provided ☐ No – State by when this will be submitted. 		
Do you have your insurance documents?	☐ Yes – Copy provided☐ No – State by when this will be submitted.		
Name and address (including vet:	postcode) of your Vet's phone number:		
Section 11: Experience a	and Qualifications (To be completed by all applicants)		

Section 11: Experience a	and Qualifications (To be completed by all applicants)
Detail any relevant qualifications and certificates held by any one named in this application or employed by the business.	Provide copies with the application
Describe any relevant experience held by anyone named in this application or employed by the business.	



Section 12: 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:	□ No□ Yes – Please provide details		
 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. 			
 Has anyone named in this application ever been disqualified under the Animal Welfare Act 2006 from: 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. 	□ No □ Yes – Please provide details		
Has anyone named in this application ever been disqualified under the Welfare of Animals Act (Northern Ireland) 2011 from: • from owning animals; • from keeping animals; • from participating in the keeping of animals;	☐ No☐ Yes — Please provide details		
 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. 			

APPLICATION FOR LICENCE TO ENGAGE IN ANIMAL REHOMING ACTIVITIES (OTHER THAN IN AN ANIMAL WELFARE ESTABLISHMENT)



Section 13:	Declarations (To be completed by all applicants)	
	at the particulars given on this form are correct to the knowledge and belief.	
enquiries into b	d that the local authority may make reasonable eing fit and proper person(s) to hold a licence and of my/our personal data for this purpose.	
	reimburse the local authority for any veterinary or ection fees necessarily incurred in processing this	
Applicant Signature(s):		Date:

To be enclosed with this application:

- Application fee
- Insurance documents
- Relevant qualifications
- Written information to be supplied to the purchaser on the appropriate care of the animals to be sold as pets.
- 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