

Wiltshire Council

Where everybody matters

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

APPLICATION FOR A LICENCE TO OPERATE A RIDING ESTABLISHMENT

APPLICANT DETAILS		
(Applicant must be the individual(s) who will carry on the licensable activity)		
To be completed in BLACK ink		* Please delete as appropriate –
Full Name of Applicant(s)	Please indicate title (i.e. Mr, Mrs, Miss, Ms etc.)	
Address of Applicant(s)	Postcode	
	We will use this address for correspondence unless you say otherwise	
Date of Birth for each Applicant		
Contact Numbers for Applicant(s)	Landline Mobile	
Email Address for Applicant(s)		
	YES	NO
Has the applicant(s), or any person who will have control or management of the establishment, ever been disqualified from keeping a pet shop?		
Has the applicant(s), or any person who will have control or management of the establishment, ever been disqualified from keeping a dog?		
Has the applicant(s), or any person who will have control or management of the establishment, ever been disqualified from keeping an animal boarding establishment?		
Has the applicant(s), or any person who will have control or management of the establishment, ever been disqualified from keeping a riding establishment?		

Has the applicant(s), or any person who will have control or management of the establishment, ever been disqualified from having custody of animals?		
Has the applicant(s), or any person who will have control or management of the establishment, been convicted of any offences under the Animal Welfare Act 2006?		
Has the applicant(s), or any person who will have control or management of the establishment, ever had a licence refused, revoked or cancelled?		
If Yes, to any of the above then please provide details:-		
	YES	NO
Do you have planning consent for business use? If no, please check with the planning department whether it is required.		
Is your business certified by a UKAS-accredited body with 3 or more years of compliance history?		
Do you have three or more years of compliance history with a Local Authority?		
Do you have public liability insurance?		
If NO please state what steps you are taking to obtain such insurance.		
If YES please provide the following details:- Policy Number:- Period of Cover:- Amount of Cover:-		
Does this policy:-	YES	NO
Insure against liability for any injury sustained by those who hire a horse from you for riding and those who use a horse in the course of receiving instruction in riding, provided by you in return for payment?		
Insure against liability arising out of such hire or use of a horse?		
Insure such hirers or users in respect of any liability which may be incurred by them in respect of injury to any person caused, by or arising from, such hire or use?		
Please give any dates over the next 10 weeks when the premises will not be available for inspection.		

PREMISES TO BE LICENSED	
Name of Business / Trading Name (if any)	
Address of Premises to be licensed (if different to applicant details)	Postcode
Premises Contact Numbers (if different to applicant details)	Landline Mobile
Premises / Business Email (if different to applicant details)	
Website Address for Premises / Business	
Will the premises be operative throughout the year?	Please provide details
What are the opening times of the premises?	
ACCOMMODATION AND FACILITIES	
How many horses are kept under the terms of the Act at the premises at the present time?	
How many horses is it intended to keep under the terms of the Act during the year time?	
Please describe the accommodation available for horses:-	
Stalls - please give the number	
Boxes - please give the number	
Covered yard – please give dimensions	
Open Yard - please give dimensions	

Please describe the land available for:-	
Grazing	
Instruction and demonstration	
Exercise	
Please describe the accommodation available for:-	
Forage and bedding	
Equipment and saddlery	
Please describe the arrangements in place for:-	
Water supply and watering horses	
Disposal of animal waste	
Protection of horses in event of a fire, and fire precautions	
MANAGEMENT OF THE PREMISES	
Please provide the name and address of the manager/person with direct control of the establishment	
Does the manager have any of the following certificates? Please tick all that apply:	
Assistant Instructor's Certificate of the British Horse Society	
Intermediate Instructor's Certificate of the British Horse Society	
Instructor's Certificate of the British Horse Society	
Fellowship of the British Horse Society	
Fellowship of the Institute of the Horse	
None of the above	
Please give details of the manager's experience in the management of horses	

What are the arrangements in the event of an emergency?		
	YES	NO
Does a responsible person live at the establishment?		
Will a person who is under 18 years of age be left in charge of the establishment or the licensable activities at any time?		
Will a responsible person (of 16 years or over) provide supervision at all times while horses from the establishment are used for riding instruction or are hired out for riding (except in the case of the hirer being competent to ride without supervisions)?		
EMERGENCY KEY HOLDER		
	YES	NO
Do you have an emergency key holder? If YES please provide details below.		
Name Position / Job Title: Address: Postcode: Daytime Telephone No: Evening / Other Telephone No: Email address:		
VETERINARY SURGEON		
Name of usual veterinary surgeon		
Company Name		
Full Address		
Telephone Number		
Email address		

GUIDANCE AND ADDITIONAL INFORMATION

It is recommended that you read the procedural guidance notes published by the Department for Environment, Food & Rural Affairs (DEFRA) for local authorities. DEFRA has also published guidance in relation to all licensable activities which includes the conditions of licence that will be imposed if a licence is issued.

The guidance documents can be found by accessing the link below if you have an electronic version of this form, alternatively type the address in the link below into your internet browser. The guidance documents will be useful to applicants and operators as they explain the licensing requirements, conditions of licence, inspection of premises together with information relating to how the star rating and length of licence to be issued will be determined by the Council.

http://www.cfsg.org.uk/_layouts/15/start.aspx#/SitePages/Legislation%20and%20Guidance.aspx

Please provide any additional information which is required or may be relevant to the application

Please read the information below and then proceed to the declaration section and provide any necessary documents.

PRIVACY NOTICE

Who will control my data? The Data Controller for all the information you provide on this form, together with any supporting information or documents requested as part of the application process, is Wiltshire Council, County Hall, Bythesea Road, Trowbridge, BA14 8JN.

If there is something you don't understand. Please contact the Licensing Team on 01249 706555 or by emailing publicprotectionnorth@wiltshire.gov.uk

Who else will we share your information with? We will only use this information in conjunction with your application and any licence issued. This may include checks with a Veterinary Surgeon / Practitioner, DEFRA, RSPCA, UKAS-accredited body, Planning Service, Trading Standards, Animal Welfare and Legal Team and referral to the Council's Licensing Committee.

How long will we keep this information for? Your information will be kept for 3 years from the date you last accessed the service or 3 years after any licence issued ceases to have effect.

What are my data rights? Your personal information belongs to you and you have the right to:

- be informed of how we will process it
- request a copy of what we hold about you and in commonly used electronic format if you wish (if you provided this to us electronically for automated processing, we will return it in the same way)
- have it amended if it's incorrect or incomplete
- have it deleted (where we do not have a legal requirement to retain it)

- withdraw your consent if you no longer wish us to process
- restrict how we process it
- object to us using it for marketing or research purposes
- object to us using it in relation to a legal task or in the exercise of an official authority
- request that a person reviews an automated decision where it has had an adverse effect on you

How do I exercise these rights?

If you would like to access any of the information we hold about you or have concerns regarding the way we have processed your information, please contact:-

Information Governance Team, Corporate Services & Digital, Wiltshire Council, County Hall, Trowbridge, Wiltshire, BA14 8JN

Tel: 01225 713646 Email: dataprotection@wiltshire.gov.uk

DETAILS OF HORSES

	Name	Description & Size	Sex	Age	Passport number	Tick if retired/ livery and not under licence
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						

DECLARATION

I agree to permit an officer and / or a veterinary surgeon or veterinary practitioner authorised by the Council to inspect the premises which are the subject of this application.

I declare that the details contained in the application form and the attached documentation is correct to the best of my knowledge.

I also confirm that I read and understand the privacy notice and that I am aware of the provisions of the relevant legislation and the model licence conditions which I will comply with at all times and that I have read and understand the privacy notice.

Date		Signature of Applicant	
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Please attach/provide the following information with your application:

- **Layout / outline plan of the premises (unless we have this already and the layout has not changed)**

The following may also need to be seen /inspected. It would be helpful to receive them with your application as it may save time later, particularly during the licence inspection:-

- **Insurance policy**
- **Operating procedures**
- **Risk assessments (including Fire)**
- **Infection control procedure**
- **Qualifications**
- **Training records**
- **Details /evidence of certification by a UKAS-accredited body with three or more years compliance history**

Please send your application and supporting information (together with the application fee) to the following address:

Public Protection - Licensing
Wiltshire Council
Monkton Park
Chippenham
SN15 1ER

Alternatively you can submit your application via email to publicprotectionnorth@wiltshire.gov.uk

Please read the information on fees carefully, especially if you are applying for more than one animal activity. Information on fees and charges can be found on the Wiltshire Council website. Any cheques must be made payable to "Wiltshire Council".

Alternatively do you want us to call you to take a telephone payment by Debit/Credit Card?
YES / NO Please circle /delete as appropriate.

Tel: 01249 706555