

DANGEROUS WILD ANIMALS ACT 1976

**APPLICATION FOR THE RENEWAL OF A LICENCE AUTHORISING THE
KEEPING OF DANGEROUS WILD ANIMALS**

APPLICANT DETAILS

Full Name:	
Current Residential Address: (full postal address)	
Telephone Number:	
Mobile Number (optional):	

DETAILS OF PREMISES WHERE ANIMALS ARE TO BE KEPT

Full Postal Address:	
----------------------	--

DETAILS OF ANIMALS TO BE KEPT

Scientific Name:		
Common Name:		
Number of Animals;	<u>Male</u>	<u>Female</u>
Scientific Name:		
Common Name:		
Number of Animals;	<u>Male</u>	<u>Female</u>
Scientific Name:		
Common Name:		
Number of Animals;	<u>Male</u>	<u>Female</u>

Do you own and possess all the animals listed above?	YES / NO
If NO please give details of ownership and possession:	

PLEASE GIVE INFORMATION REGARDING THE ACCOMMODATION WHERE THE ANIMALS ARE TO BE KEPT	
Construction:	
Size:	
Arrangements for: <ul style="list-style-type: none"> - Provision, storage and preparation of food - Ventilation - Temperature Control 	
Arrangements to be made: <ul style="list-style-type: none"> - For provision, storage and preparation of food - For ensuring adequate exercise - For ensuring veterinary care - In the event of fire or other emergencies 	

ARE YOU DISQUALIFIED FROM ANY OF THE FOLLOWING?	
Keeping any dangerous wild animals	YES / NO
Keeping a dog	YES / NO
Having custody of animals	YES / NO
Keeping a pet shop	YES / NO
Keeping an animal boarding establishment	YES / NO
Keeping a riding establishment	YES / NO
Keeping a dog breeding establishment	YES / NO

Are you the holder of a current Insurance Policy which insures you against liability for any damage which may be caused by the animal(s) listed in this application?	YES / NO
<p>If YES, please enclose evidence that you hold such insurance.</p> <p>If NO, please state what steps you are taking to obtain such insurance:</p>	

DECLARATIONS	<i>Please tick</i>
I agree to permit an Officer, Veterinary Surgeon or Veterinary Practitioner authorised by the Council to inspect the premises which are the subject of this application before any Licence is granted.	<input type="checkbox"/>
I agree that in addition to the licence fee I must pay any costs relating to veterinary inspections as part of the application process.	<input type="checkbox"/>
I certify that I am over 18 years of age.	<input type="checkbox"/>
<p>I apply for a Licence to keep the animal(s) which are the subject of this application from</p> <p>Day: Month: Year:</p>	
<p>I enclose herewith the sum of £140.00 being the amount of the fee payable on the Licence for which this application is made.</p>	
<p>Signed:</p> <p>Dated:</p>	

Please note that the Licence will only be issued following a Veterinary Officer's inspection.