

ANIMAL BOARDING ESTABLISHMENTS ACT 1963

APPLICATION FOR A LICENCE TO KEEP AN ANIMAL BOARDING ESTABLISHMENT



ASHFORD
BOROUGH COUNCIL

<p>1. Full Name of applicant(s)</p> <p>SEE NOTE 1</p>	
<p>2. Applicant(s) Address</p> <p>SEE NOTE 2</p>	
<p>3. Applicant(s) Telephone Number</p>	
<p>4. Full Name of Business</p>	
<p>5. Address of boarding establishment (if different from above)</p> <p>SEE NOTE 3</p>	
<p>6. Telephone Number of boarding establishment (if different from above)</p>	
<p>7. Are you disqualified from:</p> <p>a) Keeping a boarding establishment?</p> <p>b) Keeping a pet shop?</p> <p>c) Keeping a dog?</p> <p>d) Having the custody of animals?</p> <p>e) Keeping a dog breeding establishment?</p> <p>f) Keeping a riding establishment?</p>	<p>YES/NO</p> <p>YES/NO</p> <p>YES/NO</p> <p>YES/NO</p> <p>YES/NO</p> <p>YES/NO</p>
<p>8. Number, construction and size of quarters for accommodating animals</p> <p>(Continue on a separate sheet if necessary)</p>	
<p>9. Type and number of animals boarded</p>	
<p>10. Means of heating</p>	
<p>11. Means of ventilation</p>	
<p>12. Lighting: artificial/natural</p>	

13. Water supply	
14. Food storage arrangements	
15. Means of disposal of excreta	
16. Means of isolating animals for the control of infectious diseases	
17. Name, address and telephone number of veterinary surgeon	

I/WE confirm that the above details are correct to the best of **MY/OUR** knowledge.

I/WE permit a person authorised by the Council to inspect the premises before a licence is issued.

I/WE apply under the above legislation for a licence to keep an Animal Boarding Establishment at the above premises.

I/WE enclose the sum of £ _____, being the fee for this licence application.

I/WE accept that all veterinary fees incurred by the authority in respect to the licence application will be recoverable at cost.

I/WE accept that in the event of **MY/OUR** application being refused **I/WE** will not be refunded the application fee or any part thereof under any circumstances.

I/WE accept that should **I/WE** withdraw this application **I/WE** will not be refunded the application fee or any part thereof under any circumstances.

Signature: _____ Date: _____

Name(s) (in capitals) _____

If signing on behalf of a Body Corporate, state appointment held:

Notes

1. A corporate body (which includes a limited company, PLC) should enter the registered name of the company. An unincorporated body (for example, a partnership, a person trading as a sole trader etc) should enter the owner's name(s) and the trading name of the business. An individual should enter their name in full.
2. A corporate body should enter the registered office. An unincorporated body should enter the owner(s) home address(es). An individual should enter their home address.
3. Enter the address of the premise within the Borough of Ashford where the applicant desires to carry on their business. A separate application must be made if there is more than one premise.