

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



APPLICATION FOR LICENCE FOR ANIMAL WELFARE/ REHOMING ESTABLISHMENTS

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/Charity?	<input type="checkbox"/> Individual <input type="checkbox"/> Company/Partnership/Charity

Section 2: Your Details To be completed by all applicants

First name(s):	Surname:
Maiden name (if applicable):	Phone number:
Home address (inc. postcode):	Date of birth:
	Place of birth:
Email:	
What is your relationship to the business / charity:	
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 / charity (if different from section 2)

First name(s):	Surname:
Maiden name (if applicable):	Phone number:
Home address (inc. postcode):	Date of birth:
	Place of birth:
Email:	

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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:
Maiden name (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 address the same as section 2?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Premises Address (inc. postcode):	Premises phone number:
Premises email:	
Registered Charity Number:	

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

Name of the Company/Partnership:	
How many Directors/Partners does the business have?	
Please provide details for first Director/Partner – if there is more than one please attached a separate sheet giving each Director/Partner's personal details	
First name(s):	Surname:
Maiden name (if applicable):	Phone number:
Home address (inc. postcode):	Date of birth:
	Place of birth:
Email:	

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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: Pet rehoming details To be completed by all applicants

Which animals are you intending to keep?	Animal Species (State exact species)	Maximum number of animal intending to be kept
	<input type="checkbox"/> Dogs	
	<input type="checkbox"/> Cats	
	<input type="checkbox"/> Rabbits	
	<input type="checkbox"/> Guinea Pigs	
	<input type="checkbox"/> Equine E.g. Horses, Ponies, Donkeys	
	<input type="checkbox"/> Arachnids E.g. Tarantulas, etc.	
	<input type="checkbox"/> Fish E.g. Tropical or Cold Water	
	<input type="checkbox"/> Amphibians E.g. Toads, Frogs etc.	
	<input type="checkbox"/> Reptiles E.g. Snakes, Lizards, Tortoises, etc.	
	<input type="checkbox"/> Birds E.g. Parrots, Budgerigars, Finches etc.	
	<input type="checkbox"/> Wildlife E.g. Hedgehogs, hares	

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	<input type="checkbox"/> Any other Species <i>E.g. Please specify</i>	
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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 accommodation is used to house the different species of animal?	
State the material each type of accommodation is made from.	
What are the dimensions of the accommodation? <i>Kennels, cattery, hutch, tank, Stable etc</i>	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? <i>(Where required)</i>	
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	<i>E.g. mains supply, private supply etc.</i>
What arrangements are in place for the disposal of excreta?	
What arrangements are in place for the disposal of other waste material?	

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Describe the process for the control of infectious diseases including the location of the isolation facility.	
Are you transporting any animal over 65km?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you use foster homes to accommodate animals? <i>Please detail how many foster carers used</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No

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

Have you provided a copy of your written policy & 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 the reason a copy has not been provided
Have you provided a copy of the information to be supplied to the purchaser on the appropriate care of the animals to be rehomed as a pets?	<input type="checkbox"/> Yes – Copy provided <input type="checkbox"/> No – State the reason a copy has not been provided
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 within a week of approval of the application
Name and address of your Vet (inc. postcode):	Vet phone number:

Section 12: Experience 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.	<i>Provide copies with the application</i>
Describe any relevant experience held by anyone named in this application or employed by the business.	

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Section 13: Previous licence refusals and offences 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:

- 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
- taking charge of animals for any, or any other, purpose

- No
 Yes – Please provide details

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 knowledge and belief. It is a criminal offence for the purpose of obtaining or holding a licence—

- to make a statement required by or under the Regulations to a local authority (of someone acting on its behalf) which the person knows, or ought reasonably to have known, is to a material extent false or misleading, or
- recklessly to make a statement required by or under the Regulations to the local authority (or somebody acting on its behalf) which is to a material extent false or misleading.

I/We understand that the information supplied by me/us as detailed in this form may be stored on a computer system by this Authority for the purpose of Licencing and that information may be disclosed to the police and other relevant parties for vetting and background enquiries whilst processing this application.

For further information see: https://www.scotborders.gov.uk/downloads/file/7144/privacy_notice_-_animal_licenses

I/We understand that this authority is under a duty to protect the public funds it administers and to this end may use the information you have provided on this form for the prevention and detection of fraud. It may also share this information with other bodies responsible for auditing or administering public funds for these purposes.

For further information contact the Fraud Hotline on 01835 826825 or the Council Website <https://www.scotborders.gov.uk/nationalfraudinitiative>

Applicant Signature:

Date:

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Please return the completed application form to:

Trading Standards & Animal Health

Scottish Borders Council

Newtown St. Boswells

Melrose

TD6 0SA