

**APPLICATION FOR LICENCE FOR REHOMING OTHER THAN IN THE COURSE OF
OPERATING AN ANIMAL WELFARE ESTABLISHMENT**

CHECKLIST

	<u>CHECKLIST</u>	<u>APPLICANT'S CHECK</u>	<u>OFFICE CHECK</u>
1.	Have either questions 1 or 2 then 3 to 10 been completed?	Yes/No	Yes/No
2.	Is the contact details completed ie E-Mail Address and Telephone Number?	Yes/No	Yes/No
3.	Is the application form signed and dated?	Yes/No	Yes/No
4.	Is original correspondence from HMRC quoting the UTR attached? (See note 5).	Yes/No	Yes/No
5.	Plan showing inside of shop (see Note 9)	Yes/No	Yes/No
6.	Is the applicant a person from abroad? (NINO issued to PFA stars with an "S").	Yes/No N/A	Yes/No N/A
7.	Is a copy of the public liability insurance attached?	Yes/No	Yes/No
8.	Have you read the privacy notice?	Yes/No	Yes/No
9.	Fee of £90 received.	Yes/No	Yes/No
10.	Please note any vet's fees which occur will need to be paid before the licence is issued.	Yes/No	Yes/No

N.B EACH APPLICATION FEE ONLY INCLUDES 1 INSPECTION OF THE PREMISES IF OFFICERS NEED TO RE-INSPECT A FEE OF £50 WILL BE CHARGED FOR EACH ADDITIONAL VISIT.

COMMENTS

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

APPLICATION FOR LICENCE FOR REHOMING OTHER THAN IN THE COURSE OF OPERATING AN ANIMAL WELFARE ESTABLISHMENT



<i>For Official Use Only</i>	
Last Date for Consideration:	
Date Received:	
Receipt No.	
Date to Officers:	

COMPLETE QUESTION 1 OR 2 THEN QUESTIONS 3 TO 10 MUST BE ANSWERED

PARTICULAR ATTENTION SHOULD BE TAKEN WHEN DETAILING CONVICTIONS AND FIXED PENALTIES

1. TO BE COMPLETED IF INDIVIDUAL																						
(a) Full Name of Applicant (including middle names)	Surname	First Name(s)																				
(b) Address Details Current Address (including postcode)																						
Please enter the date you moved to your current address																						
If you have lived at this address for less than three years please state any other addresses you have resided at during this time and your period of residence at those addresses																						
(c) Date and Place of Birth																						
Sex - Please also state if you have changed your name	Male/Female																					
(d) National Insurance Number (see Note 6)	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																					
(e) Inland Revenue Unique Tax Reference Number (See Note 5) Commencement Date Is it Current?	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																					
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YES/NO																						
(f) Daytime Telephone Number																						
(g) E-Mail Address																						
(h) Name and Address of Next of Kin																						
(i) Driving Licence Number (See Note 7) (As per DVLA Licence) where applicable	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																					
(j) Passport Number/Visa Number																						
Country of Issue																						

2. TO BE COMPLETED IF COMPANY OR PARTNERSHIP																																									
(a) Full Name of Company or Partnership																																									
(b) Company Registration Number	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																																								
(c) Address of Principal Office (inc postcode)																																									
(d) Corporate Tax Reference Number OR Partnership Tax Reference Number THIS IS DIFFERENT TO YOUR INDIVIDUAL NUMBER. THIS IS UNIQUE TO THE COMPANY/PARTNERSHIP.	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																																								
(e) Daytime Telephone Number																																									
(f) Full names (including middle names), private addresses (including postcode) and dates of birth of directors, partners or other persons responsible for its management																																									
(g) Full name (including middle names), home address (including postcode and date of birth of employee to carry out day-to-day management of the business (including Business Hours Telephone Number and E-Mail Address).																																									
(h) Driving Licence Number (See Note 7) (As per DVLA Licence) where applicable	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																																								
(i) Person who will be at or within a reasonable distance to the premises at all time (if different from day to day manager) (including Business Hours Telephone Number and E-Mail Address).																																									
3. Is applicant to be self employed? If no, give name and address of employer (including Business Hours Telephone Number and E-Mail Address)	YES/NO (delete as appropriate)																																								
4. Name (if any) and Address of premises to be licensed																																									

5 PET REHOMING DETAILS – Which animals are you intending to keep?		
Animal Species (State exact species)	State Exact Species to be sold	Maximum number of species intending to be kept
(a) Dogs		
(b) Cats		
(c) Rabbits		
(d) Guinea Pigs		
(e) Arachnids <i>E.g. Tarantulas, etc.</i>		
(f) Fish <i>E.g. Tropical or Cold Water</i>		
(g) Amphibians <i>E.g. Toads, Frogs etc.</i>		
(h) Reptiles <i>E.g. Snakes, Lizards, Tortoises, etc.</i>		
(i) Birds <i>E.g. Parrots, Budgerigars, Finches etc.</i>		
(j) Wildlife <i>E.g. Hedgehogs, hares</i>		
(k) Any other Species <i>E.g. Please specify</i>		
6. ANIMAL ACCOMODATION		
(a) What type of accommodation is used to house the different species of animal?		
(b) State the material each type of accommodation is made from.		
(c) What are the dimensions of the accommodation?	Height: Depth: Width:	
(d) How will the accommodation be heated?		
(e) How will the accommodation be ventilated?		
(f) How will the humidity/temperature be monitored within the accommodation?		
(g) What material is provided within the accommodation to represent a natural habitat?		
(h) What process is in place to clean the accommodation?		

(i)	What lighting is available within the accommodation?	
(j)	State which water source is used for the premises	<i>E.g., mains supply, private supply etc.</i>
(k)	What arrangements are in place for the disposal of excreta?	
(l)	What arrangements are in place for the disposal of other waste material?	
(m)	Describe the process for the control of infectious diseases including the location of the isolation facility.	
(n)	Are you transporting any animal over 65km?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7. HEALTH AND SAFETY		
(a)	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
(b)	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 a pet?	<input type="checkbox"/> Yes – Copy provided <input type="checkbox"/> No – State the reason a copy has not been Provided
(c)	Do you have your insurance documents? If applicable.	<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
(d)	Name and address of your Vet (inc. postcode):	
8. EXPERIENCE AND QUALIFICATIONS		
(a)	Detail any relevant qualifications and certificates held by any one named in this application or employed by the business.	
(b)	Describe any relevant experience held by anyone named in this application or employed by the business.	
(c)	Do you use foster homes to provide accommodation whilst awaiting suitable homes? <i>Please indicate the number of foster homes</i>	

9. Details of Public Liability Insurance (including identity of provider, policy number and amount of cover – minimum £5m). A copy must also be provided.	
10. Have you been convicted of any offences or have you been issued with any Fixed Penalty Notices from the Police, Fiscal or the Council?	YES/NO If YES, give details below.

PLEASE NOTE IN THE CASE OF AN APPLICATION IN THE NAME OF A COMPANY OR PARTNERSHIP THE CONVICTIONS OF ALL DIRECTORS OR PARTNERS MUST BE DISCLOSED AND ALL DIRECTORS OR PARTNERS SHOULD SIGN THE FORM ON PAGE 6. IF THERE ARE MORE THAN TWO PARTNERS OR DIRECTORS PLEASE CONTINUE ON A SEPARATE SHEET

Details of Convictions and Fixed Penalty Notices

DETAILS OF ALL CONVICTIONS AND FIXED PENALTIES (CRIMINAL AND ROAD TRAFFIC) INCLUDING ANY SPENT CONVICTIONS MUST BE GIVEN.

<u>Date</u>	<u>Court</u>	<u>Crime/Offence</u>	<u>Penalty</u>

LICENSING OFFICE PRIVACY NOTE

The information you have provided on this application form, and from supporting documentary evidence – where applicable – will be used by Dundee City Council (the "data controller") for the purposes of the General Data Protection Regulation and the Data Protection Act 2018 in order to process your licensing application.

The Council may check information provided by you, or information about you provided by a third party such as NHS Tayside, Scottish Fire and Rescue Service, Scottish Ambulance Service and Police Scotland with other information held by us. We may also get information from those third parties or share your information with them in order to check its accuracy, prevent or detect crime, protect public funds or where required by law.

In order to process your application, we will share your information in accordance with the Civic Government (Scotland) Act 1982, other licensing legislation and with relevant internal services of Dundee City Council.

Please note that you should read this service specific Privacy Notice in conjunction with the Council's Full Privacy Statement which is accessible on the Council's website at: www.dundee.gov.uk/privacy

I declare that the particulars given by me on this form are correct to the best of my knowledge and belief. I authorise the use of all information which I have provided for the above purposes. I hereby make application to Dundee City Council for the grant or renewal of the licence applied for.

DATA PROTECTION ACT 1998 - YOUR PERSONAL DATA

Dundee City Council respects your personal information and undertakes to comply with the Data Protection Act 1998. The personal data you have provided will be used to process the application in terms of the Act stipulated on this form. Your data may be disclosed to Police Scotland and other Council departments involved in the processing of the application and elected members when considering the application. The data (with the exception of details of any convictions) will form a register which is open to public inspection. Dundee City Council is the registered Data controller. Any queries regarding the processing of your personal data by Dundee City Council should be directed to the Legal Manager on (01382) 434000. A copy of the Council's Data Protection Policy can be obtained by writing to the Legal Manager, Corporate Services, 21 City Square, Dundee DD1 3BY.

Signature: _____

Name (In block capitals): _____

Date: _____

Applicant/Agent/Director/Partner
(delete as appropriate): _____

Signature: _____

Name (In block capitals): _____

Date: _____

Applicant/Agent/Director/Partner
(delete as appropriate): _____

NOTES

APPLICANTS SHOULD READ THE UNDERNOTED CAREFULLY

1. **False Statements**

Any person who in or in connection with the making of this application makes any statement which he knows to be false or recklessly makes any statement which is false in a material particular shall be guilty of an offence and liable on summary conviction to a fine not exceeding £500.

2. **Change of Address**

It is a condition of licence that any person who is the holder of a licence shall notify the Licensing Authority **immediately** on changing address.

3. **Lodging of Application**

This application can be lodged at the Licensing Office, 20 City Square or Dundee House, 50 North Lindsay Street, Dundee.

The Licensing Office cannot accept cash payments. Card and Cheques payments are accepted. Anyone lodging a form here and wishing to pay by cash will be issued with an invoice which will have to be paid at Dundee House. Cheques can be made payable to Dundee City Council. All forms of payment can be accepted at Dundee House. The fee is £90 which is non-refundable.

The application will not be considered to be lodged until the form has been signed, the fee has been paid and either Question 1 or 2 and Question 3 – 8 have been fully completed. Applications which are incomplete will not be accepted.

4. **Renewal of Licence**

No notification will be given of the expiry of any licence granted, other than at the time of grant. It is the responsibility of the Licence Holder to ensure that any application for renewal of licence is submitted **prior to** the expiry of the existing licence.

5. **Unique Tax Reference Number**

Self employed persons must register as such with HMRC within three months of setting up this business or they may be subject to a fine. HMRC will issue a ten digit unique tax reference number that will remain with that person for life. You can register as self employed by telephoning 0300 200 3300 or by going online to www.gov.uk/log-in-file-self-assessment-tax-return.

Anyone who works for another individual or company and who are not self employed ie they receive a wage and are liable to pay tax through the PAYE system need to register with the Inland Revenue but will have to submit evidence to this effect ie a payslip or P60.

6. **National Insurance Number**

You can find this on payslips or letters from the Department for Works & Pensions or HM Revenue & Customs.

7. **Driving Licence Number**

DVLA Licence details are required by Police Scotland to complete background checks on the applicant.

8. The amount of Public Liability Insurance Cover must be a minimum of £5m.

9. A layout plan of the shop showing the fire exit and where the animals are situated.

10. Any fees incurred from the vet inspection will need to be paid before the licence is issued.

We may need to see proof of your identity and National Insurance Number.