

## BREEDING ESTABLISHMENT LICENCE APPLICATION

### CHECKLIST

	<u>CHECKLIST</u>	<u>APPLICANT'S CHECK</u>	<u>OFFICE CHECK</u>
1.	Have either questions 1 or 2 then 3 to 13 been completed.	Yes/No	Yes/No
2.	Is the contact details completed i.e. 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.	Is the applicant a person from abroad? (NINO issued to PFA's start with an "S")	Yes/No N/A	Yes/No N/A
6.	Is a copy of the public liability insurance attached?	Yes/No	Yes/No
7.	Have you read the privacy notice?	Yes/No	Yes/No
8.	Fee of £90 received.	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 TO KEEP A BREEDING ESTABLISHMENT**



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

**COMPLETE QUESTION 1 OR 2 THEN QUESTIONS 3 - 13 MUST BE ANSWERED (ALL IN BLOCK LETTERS).**

**PARTICULAR ATTENTION SHOULD BE TAKEN WHEN DETAILING CONVICTIONS AND FIXED PENALTIES.**

<b>1. TO BE COMPLETED IF INDIVIDUAL</b>																					
(a) Full Name of Applicant (including middle names)	Surname <span style="margin-left: 50px;">First Name(s)</span>																				
(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																					
(d) National Insurance Number (see Note 6)	<table border="1" style="width: 100%; text-align: center;"><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) Inland Revenue Unique Tax Reference Number (See Note 5)	<table border="1" style="width: 100%; text-align: center;"><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>																				
	Commencement Date <table border="1" style="width: 100%; text-align: center;"><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>																				
Is it Current? 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" style="width: 100%; text-align: center;"><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	
(c) Address of Principal Office (including postcode)	
(d) Corporation Tax Ref No.	
OR	
Partnership Tax Reference No	
<b>THIS IS DIFFERENT TO YOUR INDIVIDUAL NUMBER. THIS IS UNIQUE TO THE COMPANY/PARTNERSHIP.</b>	
(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 on day-to-day management of the business (including Business Hours Telephone Number and E-Mail Address)	
3. Name (if any) and Address of Premises to be Licensed:	
4. Type of Breeding Establishment	<input type="checkbox"/> Dog <input type="checkbox"/> Cat <input type="checkbox"/> Rabbit
5. <b>BREEDING DETAILS</b> : to be completed by all applicants <b>**Note:</b> 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.	
(a) Will the breeding activity be undertaken indoors or outdoors? (Indoor breeders maintain their stock wholly or partially within their own private dwelling house)	<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor
(b) What is the maximum number of Animals kept annually on the premises?	
(c) How many litters are bred annually?	
(d) State the type of accommodation and the number of each used for breeding animals	<i>E.g., kennels, units, rooms, hutches</i>



(e)	State the material each type of accommodation is made from?	
(f)	What are the dimensions of each accommodation?	Height: Depth: Width:
(g)	What bedding is supplied within the accommodation	
<b>6. Whelping / Queening / Kindling Accommodation</b>		
(a)	State the type of accommodation and the number of each used for birthing	<i>E.g., whelping boxes, nesting box, rooms, etc.</i>
(b)	State the material each type of birthing accommodation is made from?	
(c)	What are the dimensions of each accommodation?	Height: Depth: Width:
(d)	What bedding is supplied within the accommodation	
<b>7. Other animals retained on the premises</b>		
(a)	How many other animals are kept on the premises?	
(b)	What is the purpose of these animals?	<i>E.g., stud, pets, etc.</i>
(c)	State the type of accommodation and the number of each used to house these animals	<i>E.g., kennels, units, hutch etc.</i>
(d)	State the material each type of accommodation is made from?	
(e)	What are the dimensions of each accommodation?	Height: Depth: Width:
(f)	What bedding is supplied within the accommodation	



<b>8. Heating, lighting and ventilation</b> to be completed by all applicants **Note: 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.		
	<b>Birthing Accommodation</b>	<b>Other Accommodation</b>
(a)	How is the accommodation heated?	
(b)	What lighting is available within the accommodation?	
(c)	How is the accommodation ventilated?	
<b>9. Animal Wellbeing</b>		
(a)	What activities and toys are available for the social and mental wellbeing of the adult animals and their young?	
(b)	What are the facilities or arrangements for exercising the animal?	
(c)	How are the animals socialised?	
(d)	Are you transporting the animals over 65km?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>10. Health &amp; Safety</b>		
(a)	State which water source is used for the premises	<i>E.g., mains supply, private supply etc.</i>
(b)	How and where is animal feed stored?	
(c)	What arrangements are in place for the disposal of excreta?	
(d)	What arrangements are in place for the disposal of other waste material?	
(e)	Describe the process for the control of infectious diseases including the location the isolation facility is.	
(f)	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
(g)	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
(h)	Name and address of your vet	



<b>11. Experience and Qualifications</b>	
(a) Detail any relevant qualifications and certificates held by any person named in this application or employed by the business.	<i>Provide copies with the application</i>
(b) Describe any relevant experience held by anyone named in this application or employed by the business.	
12. Details of Public Liability Insurance (including identity of provider, policy number and amount of cover – minimum £5m). A copy must also be provided.	
13. 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 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](http://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. **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.

4. **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 – 14 have been **fully** completed. Applications which are incomplete will not be accepted.

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](http://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.

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