

**IMPORTANT INFORMATION BELOW
PLEASE READ CAREFULLY**

Data Protection Act 1998 – Fair Obtaining Notice

I understand that all information provided to Bolsover District Council and North East Derbyshire District Council will be held and treated in confidence in accordance with the Data Protection Act 1998. It will only be used for the purpose for which it is given and may be shared with other council departments or third party organisations. The information provided may be held electronically and/or in paper form and will be kept secure at all times.

The Council is required by legislation to keep public registers. This means that information provided will be made available to the public.

This authority is under a duty to protect the public funds it administers, and to this end may use 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 see <http://www.ne-derbyshire.gov.uk/nfi>

Equality Policy Statement

Bolsover District Council and North East Derbyshire District Council are committed to equalities as an employer and in all the services provided to all sections of the community. The Council believes that no person should be treated unfairly and is committed to eliminate all forms of discrimination in compliance with its Equality Policy. The Council also has due regard to eliminate racial discrimination and to proactively promote equality of opportunity and good relations between persons of different racial groups when performing its functions.

If you need help in understanding any of our documents or require a larger print, audio tape copy or translator to help you, we can arrange this for you. Please contact us on the telephone numbers at the bottom of this page.

For further information contact Sue Simmons on 01246 217873 or alternatively via e-mail at sue.simmons@ne-derbyshire.gov.uk

I hereby certify that I have read, understand, and agree to my information being used in accordance with the Fair Obtaining Notice and Equality Statement above.

Signature: _____ **Date:** _____

Print Name: _____

PET ANIMALS ACT 1951
APPLICATION FOR LICENCE TO KEEP A PET SHOP

Please complete all Sections 1 - 8 with as much information as possible. Any omissions or errors may delay the processing of your application.

NEW APPLICATION

RENEWAL

1. DETAILS OF APPLICANT

Status	[Sole Trader] <input type="checkbox"/> [Partnership] <input type="checkbox"/> [Limited Company] <input type="checkbox"/> [Other-state:] <input type="checkbox"/>
Name(s)/Company	
Address	
Telephone	
e-mail	

2. PET SHOP PREMISES

Trading Name	
Address	
Telephone	
e-mail	

3. MANAGEMENT ARRANGEMENTS

Name	
Address	
Telephone	
e-mail	

4. ACCOMMODATION AND FACILITIES

a.	Number and size of rooms at the premises	
b.	Heating arrangements	
c.	Method of ventilation	
d.	Lighting arrangement (both natural and artificial)	
e.	Water supply	
f.	Facilities for food storage and preparation	
g.	Arrangements for disposal of excreta, bedding and other waste material	
h.	Isolation facilities for the control of infectious diseases	
i.	Fire precautions/equipment and arrangements in the case of fire	
j.	Arrangements for keeping a register/record of animals	
k.	Normal times of attendance at the premises when they are closed to public	
l.	Details of training certificates or other qualification and experience in pet management	

5. SCHEDULE OF ANIMALS

Type of animals**	Genus and Species Names	Proposed numbers	Details of accommodation	Minimum age at which to be sold
Eg Rose Ring Parakeet	Psittacula Krameri	4	Cage – 0.675m ²	
Fish: Tropical fresh				
Tropical Marine				
Cold Water				

6. DISQUALIFICATIONS AND CONVICTIONS

Has the applicant or any person who will have control or management of the establishment ever been:-

- a) disqualified from keeping a pet shop, dog, animal boarding establishment, riding establishment or custody of any animal? YES / NO
- b) convicted of any offence(s) under Animal Welfare or Wildlife Legislation? YES / NO
- c) refused a licence or had one revoked or cancelled? YES / NO

If YES provide further details:

7. SUPPORTIVE INFORMATION

Please provide any additional supportive information you feel is relevant to your application:

8. DECLARATION

I/we certify that to the best of my/our knowledge and belief, the above particulars are true and apply for a licence to keep a pet shop under Section 1 of the Pet Animals Act 1951 at the premises specified.

I/we enclosed the sum of £..... being the amount of fee payable for the licence.

Signed

Date

Designation

This form should be completed and returned with the fee (cheques to be made payable to NEDDC) Joint Environmental Health Service, Bolsover District Council and North East Derbyshire District Council, District Council Offices, 2013 Mill Lane, Wingerworth, Chesterfield S42 6NG.

NB. The Council will wish to be satisfied that the requirements contained in the model licence conditions are being complied before the licence is issued.

SHOULD THE COUNCIL DEEM IT NECESSARY TO CONSULT A VETERINARY SURGEON THE CHARGES INCURRED WILL BE RECOVERED FRM THE APPLICANT IN ADDITION TO THE LICENCE FEE