DARLINGTON Borough Council

**Application for a licence to keep Dangerous Wild Animals**

**Dangerous Wild Animals Act 1976**

**Please complete this form in BLOCK CAPITALS in BLACK ink**

## Section 1 – Applicant Details

**Please confirm the nature of this application: New ☐ Renewal ☐**

**Name(s) of applicant(s)**

……

**Date of Birth:**

……

**Home address:**

……

**Postcode:**

……

**Email:**

……

**Telephone number:**

……

**Mobile:**

……

**Is any person named on this form disqualified from:**

**a) Keeping dangerous wild animals? Yes ☐ No ☐**

**b) Keeping a dog? Yes ☐ No ☐**

**c) Having custody of animals? Yes ☐ No ☐**

**d) Keeping a pet shop? Yes ☐ No ☐**

**e) Keeping an animal boarding establishment? Yes ☐ No ☐**

**f) Keeping a riding establishment? Yes ☐ No ☐**

**g) Keeping a dog breeding establishment? Yes ☐ No ☐**

**h) Have you ever been refused a dangerous wild animal licence in the UK? Yes ☐ No ☐**

**(If you answered Yes' to any of the questions above, please give details)**

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**.....**

## Section 2 – Premises Details (where animals will be kept)

**Name of premises:**

……

**Address:**

……

**Postcode:**

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**Email:**

……

**Telephone number:**

……

**Website:**

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## Section 3 – Facilities

| | |
|---|---|
| Heating arrangements: | Lighting arrangements:<br><br>Natural ☐ Artificial ☐ Both ☐ |
| Isolation facilities: | Fire safety equipment: |
| Emergency Evacuation procedure: | Water supply: |
| Waste disposal facilities (see note 2): | Drainage System: |
| Ventilation System: | Humidity Control Systems: |
| Type of food to be supplied including where you will obtain the food from: | Food storage and preparation arrangements: |
| Name, address, and telephone number of your veterinary surgeon (see note 3): | Exercise arrangements: |

Equipment to capture the animals including numbers and locations:

| Species of Animal (scientific name if possible) | Proposed Numbers | Details of Accommodation (construction, size) | Will you breed this species? |
|---|---|---|---|
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**Please provide details of your experience with regards to the animals listed above.**

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**Please provide reference details for people the Licensing Authority can contact in order to verify your experience.**

**Referee 1**
**Name**
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**Address**
.....

**Contact Telephone Number**

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**Email**
.....

**Relationship to you**

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**Referee 2**
**Name**

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**Address**

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**Contact Telephone Number**

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**Email**.
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**Relationship to you**

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**Please provide any further details you feel may support your application:**

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## Declaration

Before submitting this application form you must agree to meet the following requirements:

- The application form has been completed by you as the applicant(s) and not a third party;

- You will be available to attend, in person, any appointment and/or inspection, resulting from the submission of this application, and conducted by an officer of this authority, or our approved veterinary practitioner;

- You will make available any supporting documentation/information required as part of considering this application at the time of any appointment/inspection and provide copies of such documents if required.

- The details contained in the application form are correct to the best of your knowledge and belief;

- You will pay the legally required veterinary inspection fee and any additional fees that may be notified to you during the application process prior to the grant of any licence.

**Signed:…….**

**Capacity:……**

**Date:……**

**Signed:…….**

**Capacity:……..**

**Date:……..**

**Checklist:**

**1) Application form fully completed and signed** □

**2) Suitable plans are attached** □

**3) Relevant fee is enclosed – see fees and charges on our website for an up-to-date fee level** ☐

**4) Insurance certificate** □

**You may submit your signed application form and plans by email. Send your documentation as pdf files to licensing@darlington.gov.uk. Payment of your application fee may be made by contacting the Licensing Department on 01325 405 888. Alternatively, you can send your application to:**

**Licensing Department**
**Darlington Borough Council**
**Town Hall, Darlington, DL1 5QT**

**NOTES:**
1) Please provide plans (new applications and alterations to existing facilities only), and a brief description of the accommodation to include construction materials.
2) The Environmental Protection Act 1990 requires that waste produced by a business must be properly disposed of by a registered carrier. Please provide details of your waste carrier.
3) You must be registered with a veterinary surgeon at all times during the currency of any licence granted.

**Privacy Notice**

**How is your information used?**

We collect information to assess your suitability to be issued with a licence. We may also use your contact details in the event that we need to contact you in relation to your licence.

**Who has access to your information?**

Information is shared with other regulatory and enforcement authorities including, but not limited to, other Council services; Councillors; the Police; the Fire Authority; Trading Standards; HM Revenues and Custom; veterinary surgeons, and other local authorities when allowed to by law for the purposes of the administration and enforcement of authorisations, and for the purposes of the prevention and detection of crime, public safety, public health, protection of the environment and prevention of fraud.

Certain information about licences (including in particular your name and the address of any premises to which a licence applies) may be published on a public register on our website when we are required to by law. Licences that have to be determined by our Councillors will be published in minutes on our website.

For.further.information.about.how.your.personal.information.will.be.used?.please.visit.www¡south_derbys¡gov¡uk.where.you.can.see.a.full.copy.of.our.privacy.notice¡.Alternatively.you.can.request.a.hard.copy.from.licensing® darlington¡gov¡uk..