

ANIMAL WELFARE ACT 2006

THE ANIMAL WELFARE (BREEDING OF DOGS) (WALES) REGULATIONS 2014

APPLICATION FOR A LICENCE TO KEEP A BREEDING ESTABLISHMENT FOR DOGS

Applicant/s Full Name:		
If applicable trading as:		
(Please PRINT full name/s, as this will appear on your licence)		
Address:		
Telephone number: Mobile number: E-mail address:		
2. Have you ever been convicted or disqualified under any of the Acts listed be note that any declaration will be subject to the Rehabilitation of Offenders Acts		
(Tick, where applicable)	Yes	No
Animal Boarding Establishment Act, 1963		
Breeding of Dogs Act, 1973		
Dot Animal Act 1051		
Pet Animal Act, 1951		
The Dogs (Northern Ireland) Order 1983		
The Dogs (Northern Ireland) Order 1983 Riding Establishments Act, 1964		
The Dogs (Northern Ireland) Order 1983 Riding Establishments Act, 1964 Dangerous Wild Animals Act, 1976		
The Dogs (Northern Ireland) Order 1983 Riding Establishments Act, 1964 Dangerous Wild Animals Act, 1976 Animal Welfare Act, 2006		
The Dogs (Northern Ireland) Order 1983 Riding Establishments Act, 1964 Dangerous Wild Animals Act, 1976 Animal Welfare Act, 2006 Welfare of Animals Act (Northern Ireland) 2011		
The Dogs (Northern Ireland) Order 1983 Riding Establishments Act, 1964 Dangerous Wild Animals Act, 1976 Animal Welfare Act, 2006 Welfare of Animals Act (Northern Ireland) 2011 Animal Health & Welfare (Scotland) Act 2006		
The Dogs (Northern Ireland) Order 1983 Riding Establishments Act, 1964 Dangerous Wild Animals Act, 1976 Animal Welfare Act, 2006 Welfare of Animals Act (Northern Ireland) 2011		



Breed	Number of Bitches	Number of Stud Dogs	Retired/Pet Bitches	Retired/Pet Stud Dogs	Total
				_	

Please estimate the maximum number puppies that may be present at your premises at any one time.

Maximum number of puppies at any one time	
i maximum number of pupples at any one time	

4.	In order to determine your staff to dog ratio as required by the Regulations please indicate
	the total number of employees or people who help at your establishment (you should also
	include yourself in this calculation)

Total	number	of attend	dant work	ina at t	he nrem	ises	
TOtal	Hullibel	or alleri	uani work	illig at t	ne prem	15 6 5	

Please ensure that you complete the following table

Full name	Full/part time*

- 5. Where do you intend to exercise your dogs?

	(Tick, where applicable)
Exercise yard on premises	
Private Land	
Lead Walking	

3. Rhowch fanylion yr holl gŵn dros 6 mis oed fydd yn cael eu cadw yn y sefydliad bridio:



6	Additional information exercise information (number of times per day etc):
0.	
7.	Veterinary surgeon name and address
• • • • •	
8.	Declaration
	■ I am the occupier of the premises detailed above, and hereby make application in pursuance of the provisions of section 13 (1) of the Animal Welfare Act 2006, for a licence to keep a Breeding Establishment for Dogs at the premises of which particulars are given above.
	I do hereby certify that to the best of my knowledge and belief, the above particulars are true and that I am over 18 years of age:
	Payment can be made via our customer services on 01824 706000 use the Welsh or English line. Wait for customer service officer to answer. Or by cash at any one stop shop plus name and address. The sum of £250 being the amount of the fee payable on the Licence applied for. Using the 3472140088 code.
<u>Nc</u>	<u>ote</u>
Pr	ease ensure that you enclose a completed Enhancement and Enrichment ogramme and a Socialisation Programme with your application. The Regulations ate that your license will not be approved without satisfactory programmes.
Na	me:
Sig	gned:
Da	te:
Αp	pplication form to be returned to
De PC Ru De	nimal Health Department enbighshire County Council DBox 62 ethin enbighshire 15 9AZ