

ANIMAL BOARDING ESTABLISHMENT ACT 1963 LICENCE APPLICATION FOR ANIMAL BOARDING

I/We _____ (Name)

Of _____
_____ (Home Address)

Date of Birth _____

as (proposed) occupiers of the premises hereinafter mentioned, hereby make application in pursuance of the provisions of the Animal Boarding Act 1963, for a Licence for a dog boarding, particulars of which are given below.

| | |
|--|--|
| Trading Name and Postal Address of Premises | Phone No: _____ |
| Details of Responsible Person | <p>Is a person other than the applicant responsible for the day to day management of the premises? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If Yes, please give details of the responsible person</p> <p>Name _____</p> <p>Address _____</p> <p>_____ Phone No: _____</p> |
| Details of Qualifications | |
| Please tick the appropriate box(es) if you or the responsible person are disqualified from: | <p>Keeping a riding establishment <input type="checkbox"/></p> <p>Keeping a dog <input type="checkbox"/></p> <p>Keeping a pet shop <input type="checkbox"/></p> <p>Having the custody of animals <input type="checkbox"/></p> <p>Keeping a boarding establishment for animals <input type="checkbox"/></p> <p>Any offence under the Protection of Animals Scotland Act 1912 <input type="checkbox"/></p> |
| Description of premises | |
| Number of available kennels | |
| Maximum number of boarding spaces | |
| Types of boarding facilities (cat, dog, other) | |
| How many doubles** | |

*Certificate of inoculations should be retained while animal is on premises

**Owners of all animals doubled must sign permission

Please ensure you study the guidance notes supplied with this form as any inspection will require the conditions to be met. Also it is desirable that the applicant has knowledge of the legislation relevant to this application.

Any person who wilfully obstructs or delays any person in the exercise of his powers of entry or inspection will be guilty of an offence.

Any change of ownership must be reported to the local authority immediately. All licences issued are issued to the applicant and not the premises, therefore are not transferable.

INFORMATION TO APPLICANT

North Lanarkshire Council is registered under the Data Protection Act 2018 and at all times will comply with the terms of the Act when processing your personal data.

For further information on how we process your personal data please refer to North Lanarkshire Council website: <https://www.northlanarkshire.gov.uk/your-council/managing-information/data-protection>

Signed _____ **Date** _____

The completed form with fee should be returned to:

***Protective Services
Community Operations
Station House
950 Old Edinburgh Road
Bellshill
ML4 3FG***

| For official use only | |
|---|---------------------------------------|
| Passed to AHO on: _____ | Premises inspected on: _____ |
| Other agencies contacted: Police <input type="checkbox"/> Planning <input type="checkbox"/> Fire <input type="checkbox"/> | Application: <i>Approved/Rejected</i> |
| Passed for Committee submission on: _____ | Licence issued on: _____ |
| Comments | |