

## ANIMAL WELFARE ACT 2006

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

#### APPLICATION FOR A LICENCE TO KEEP A BREEDING ESTABLISHMENT FOR DOGS

**1. Applicant**

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 below? *(Please note that any declaration will be subject to the Rehabilitation of Offenders Act 1974).*

(Tick, where applicable)	Yes	No
Animal Boarding Establishment Act, 1963		
Breeding of Dogs Act, 1973		
Pet Animal Act, 1951		
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		
Protection of Animals (Amendment) Act, 1954		

If you answer **YES** to any of the above, please give further details:

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.....

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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	
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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 attendant working at the premises.....

Please ensure that you complete the following table

Full name	Full/part time*

N.B. Full time at least 37 hours per week    Part time between 18.5 and 37 hours per week

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):  
 .....  
 .....  
 .....

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 3472-00000-40088 code.*

**Note**

Please ensure that you enclose a completed Enhancement and Enrichment Programme and a Socialisation Programme with your application. The Regulations state that your license will not be approved without satisfactory programmes.

Name: .....

Signed: .....

Date: .....

**Application form to be returned to**

**Animal Health Department  
 Denbighshire County Council  
 POBox 62  
 Ruthin  
 Denbighshire  
 LL15 9AZ**