Application for a licence to hire out horsesThe Animal Welfare (Licensing of Activities Involving Animals) (England) Regulations 2018



Please complete all the questions in the form.

If you have nothing to record, please state 'Not applicable' or 'None'

1	Type of application					
1.1	Type of application	New	T	Renewal		If new, go to 1.3
1.2	,,	INCV		Renewai		11 Hew, go to 1.5
1.2	Existing licence number	!				
1.3	Further information about the Applicant's full name	e applicant				
1.4	Date of birth					
2	Establishment to be licensed					
2.1	Name of premises or trading					
2.1	name					
2.2	Address of premises					
2.3	Telephone number					
2.4	Email address					
2.5	Is the establishment open throughout the year?			Yes/N	lo	
2.6	When is it normally open?					
2.7	Do you have planning permission for this business use?			Yes/N	No	
3	Accommodation and facilities	5				
	Please describe the accommo	dation ava	ilabl	e for horses	:	
3.1	Stalls (please give the number)					
3.2	Boxes (please give the number)					
3.3	Covered yard (please give dimensions)					
3.4	Open yard (please give dimensions)					
	Please describe the land avai	lable for:				
3.5	Grazing					
3.6	Instructing or demonstrating					
3.7	Exercise					
	Please describe the accommo	dation ava	ilabl	e for:		
3.8	Forage and bedding					
3.9	Equipment and saddlery					
	Please describe the arrangen	nents in pla	ce f	or:		
3.10	Water supply and watering horses					
3.11	Disposal of animal waste					
3.12	Protection of horses in event of a fire, and fire precautions					

4a	Horses								
4.1	How many horses are kept under the terms of the Regulations at the present time?								
4.2	How many horses is it intended to keep under the terms of the Regulations during the year?								
4.3	Please pro	vide details	of all	the ho	he horses currently kept				
	Name of horse	Description including size	Sex	Age	Microchip Number	Passport Number (UELN)	Purpose for which horse is kept	Age range of people who ride this horse	
1.									
2.									
3.									
4.									
5.									
6.									
7.									
8.									
9.									
10.									
11.									
12.									

	Name of horse	Description including size	Sex	Age	Microchip Number	Passport Number (UELN)	Purpose for which horse is kept	Age range of people who ride this horse
13.								
14.								
15.								
16.								
17.								
18								
19.								
20.								
		d to hire out for				ch a separate	e list of these	with the
5	Management of the establishment							
5.1		address of the ol of the estab			person with			
5.2	Does the m	anager have a	ny of	the foll	owing certific	ates? (tick a	ll that apply)	
	Assistant In Horse Socie	structor's Cert	ificate	of the	British			
	Intermediat Horse Socie	te Instructor's	Certifi	cate of	the British			
		Certificate of	the Br	itish Ho	orse Society			
	Fellowship of	Fellowship of the British Horse Society						
	Fellowship of	of the Institute	of the	Horse	2			
	None of the	above						
5.3	Please give details of the manager's experience in the management of horses							
5.4	Does a responsible person live at the establishment?				Yes/No			

5.5	What are the arrangements in the event of an emergency?	
5.6	Will a person who is under 16 years of age be left in charge of the establishment at any time?	Yes/No
5.7	Will a responsible person (of 16 years or over) provide supervision at all times while horses from the establishment are used for riding instruction or are hired out for riding (except in the case of the hirer being competent to ride without supervision)?	Yes/No

6	Veterinary surgeon					
6.1	Name of usual veterinary surgeon					
6.2	Company name					
6.3	Address					
6.4	Telephone number					
6.5	Email address					
7	Public liability insurance					
7.1	Do you have public liability insurance?	Yes/No	If no, go	to 7.10		
7.2	Please provide details of the police	су				
7.3	Insurance company					
7.4	Policy number					
7.5	Period of cover					
7.6	Amount of cover (£)					
	Does this policy:					
7.7	Insure against liability for any inj those who hire a horse from you those who use a horse in the cou instruction in riding, provided by payment?	for riding and rse of receiving	yes/No			
7.8	Insure against liability arising out use of a horse?	of such hire or	Yes/No	If yes to all, go to 8.1		
7.9	Insure such hirers or users, in re liability which may be incurred by respect of injury to any person carising from, such hire or use?	them, in	Yes/No	J • • • • • • • • • • • • • • • • • • •		
7.10	Please state what steps you are taking to obtain such insurance					
8	Disqualifications and conviction					
	Has the applicant, or any person who will have control or management of the establishment, ever been disqualified from:					
8.1	Keeping a pet shop?			Yes/No		
8.2	Keeping a dog?		Yes/	No		

8.3	Keeping an animal boarding	establishment?	Yes/No
8.4	Keeping a riding establishm	ent?	Yes/No
8.5	Having custody of animals?		Yes/No
8.6	Has the applicant, or any person who will have control or management of the establishment, been convicted of any offences under the Animal Welfare Act 2006?		Yes/No
8.7	Has the applicant, or any person who will have control or management of the establishment, ever had a licence refused, revoked or cancelled?		Yes / No
8.8	If yes to any of these questions Please provide details,		

Before you check your application and sign the declaration, please tick that you:

Have read the model licence conditions and guidance for the hiring of horses
Have the following documents ready for the premises inspection which are required for the rating of the premises and the issue of the licence. You can attach these documents to speed up your application:

- A plan of the premises
- Insurance policy
- Operating proceduresRisk assessments (including fire)
- Infection and control procedure
- Qualifications
- Training records

9	Additional details	
	Please check local guidand may be required	ce notes and conditions for any additional information which
9.1	Additional information which is required or may be relevant to the application	

Privacy notice

West Suffolk Council is a Data Controller and can be contacted at: West Suffolk House, Western Way, Bury St Edmunds, Suffolk, IP33 3YU Tel: 01284 763233. The Data protection Officer can be contacted at the same address.

We are collecting your personal information in order to process your application under The Animal Welfare (Licensing of Activities Involving Animals) (England) Regulations 2018.

Your data will not be shared with third parties unless used for council purposes, in order to enquire and receive information relating to your licence, prevent or detect crime, to protect public funds or where we are required or permitted to share data under other legislation.

Your data will be kept for 7 years post licence expiry or surrender in line with our retention policy.

You have the right to access your data and to rectify mistakes, erase, restrict, object or move your data in certain circumstances. Automated decision making and processing is not used during this application. Please contact the Data Protection Officer for further information or go to our website where your rights are explained in more detail. If you would like to receive an explanation of your rights in paper format please contact the Data Protection Officer.

Any complaints regarding your data should be addresses to the Data Protection Officer in the first instance. If the matter is not resolved you can contact the Information Commissioner's Office at: Wycliff House, Water Lane, Wilmslow, Cheshire, SK9 5AF Tel: 0303 123 1113.

If you do not provide the information required on the application form then we will not be able to process application for a licence. Your data must be kept up to date in accordance with the conditions of your licence.

For further information on our Data protection Policies please go to our website: <u>How we use your information</u> or email: <u>data.protection@westsuffolk.gov.uk</u>

Declaration and signature

The information I have provided will be held by the council on computerised and manual files (data will be made available on a public register as required by relevant legislation).

This section must be completed by the applicant, if you are an agent please ensure this section is completed by the applicant.

I am aware of the provisions of the relevant Act and model licence conditions. The details contained in the application form and any attached documentation are correct to the best of my knowledge and belief.

I understand that it is an offence to make a false statement in this application or to omit relevant details.

Televanic actuals						
Signature: (applicant)		Date:				
Print name:						
Capacity:						

Your application and fee should now be submitted with all supporting documents to:

Commercial Environmental Health Team

West Suffolk Council

Western Way

Bury St Edmunds IP33 3YU

Phone: 01284 757400 Email: food&safety@westsuffolk.gov.uk

Cheques made payable to West Suffolk Council