

## Standard applicant profile section

This form must accompany your activity application

Please answer all questions or respond 'none' or 'not applicable'

1.	<b>Licence number (if known)</b>	AWL:			
<b>2a</b>	<b>Agent</b>				
2.1	Are you an agent acting on behalf of the applicant	Yes		No	<b>If no, go to 3.1</b>
<b>2b</b>	<b>Further information about the agent</b>				
2.2	Name				
2.3	Address				
2.4	Email				
2.5	Main telephone number				
2.6	Other telephone number				
<b>3</b>	<b>Applicant details</b>				
3.1	Name				
3.2	Address				
3.3	Email				
3.4	Main telephone number				
3.5	Other telephone number				
3.6	Are you applying as a business or organisation, including a sole trader?	Yes		No	
3.7	Business rate account number:				
3.8	Are you applying as an individual?	Yes		No	
<b>4a</b>	<b>Applicant business</b>				
4.1	Is your company registered with companies house	Yes		No	<b>If no, go to 4.3</b>
4.2	Registration number				
4.3	Is your business registered outside the UK				
4.4	VAT number				
4.5	Legal status of the business				
4.6	Your position in the business				
4.7	The country where your head office is located.				
<b>4b</b>	<b>Business address – this should be your official address (the address required of you by law to receive all communication)</b>				
4.8	Building name or number				
4.9	Street				
4.10	District				
4.11	City or town				
4.12	County or administrative area				
4.13	Postcode				
4.14	Country				

## 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 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: [How we use your information](#) or email: [data.protection@westsuffolk.gov.uk](mailto:data.protection@westsuffolk.gov.uk)

## 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.

**Signature:**  
**(applicant)**

**Date:**

**Print Name:**

**Capacity:**

Please complete this form and enclose with the correct activities' application form