

WEST WILTSHIRE DISTRICT COUNCIL

**APPLICATION FOR LICENCE TO KEEP A PET SHOP
PET ANIMALS ACT 1951**

Licence No:

PLEASE COMPLETE THE FOLLOWING IN BLOCK CAPITALS

1 Names of Owner _____

2 Name of Pet Shop _____

3 Address of Pet Shop _____

_____ Post Code _____

Telephone Number _____

4 Private Address of owner if different from above _____

_____ Post Code _____

Telephone Number _____

5 Number, construction and size of rooms in which business will be carried on
(use a separate sheet if necessary).

6 Heating arrangements _____

7 Method of ventilation of premises _____

8 Lighting arrangements - Natural/Artificial

9 Water supply _____

10 Arrangements for food storage _____

11 Arrangements for disposal of excreta _____

12 Are you disqualified for the time being from:

(a) keeping a dog? YES/NO

(b) keeping a pet shop? YES/NO

(c) having custody of any animals? YES/NO

(d) keeping a boarding establishment for animals? YES/NO

(e) keeping a riding establishment? YES/NO

13 Types of pets which are intended to be sold, and age at which they will be sold, proposed numbers and details of accommodation.

SCHEDULE

Type of Animals	Proposed Numbers	Details of Accommodation	Age at which proposed to be sold	Inspector's comments
Parrots				
Other Large Birds				
Budgerigars, Finches and other small birds				
Puppies				
Kittens				
Rabbits, cavies and hamsters				
Rats and mice				
Snakes and lizards				
Fish				
Any other species (specify)				

Normal times of attendance at the premises when premises are closed:-

I ENCLOSE HERewith the sum of _____ **POUNDS**, being the amount of the prescribed fee payable on the licence applied for.

DATED this _____ day of _____ 200_____

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(Capacity, if Applicant signs on behalf of a Company or Partnership)

I DO HEREBY CERTIFY that to the best of my knowledge and belief the particulars hereon are true.

West Wiltshire District Council
 Environmental Health Department
 Bradley Road
 TROWBRIDGE
 Wilts BA14 0RD
 Tel: 01225 776655

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