

Broxtowe Borough Council

The Animal Welfare (Primate Licences) (England) Regulations 20254

Application for a New/Renewal Licence for Primates

Please complete all the questions in the form.
If you have nothing to record, please state "Not applicable" or "None"

1.	Applicant details		
	Name		
	Address (including postcode)		
	Email		
	Main telephone number		
	Other telephone number		
	Date of birth		
	Are you applying as an individual	Yes / No	If yes, go to 3.
	Are you applying as a business or organisation, including a sole trader	Yes / No	

2.	Applicant Business		
	Company Name:		
	Is your company registered with companies house	Yes / No	
	Registration Number		
2.1.	Business Address – This should be your official address – The address required of you by law to receive all communication		
	Business Address		
3.	UKAS Accreditation		

	Are you a member of a UKAS accredited organisation	Yes / No Name of Organisation:
4.	Premises to be licensed	
	Name of premises/trading name	
	Address of premises including postcode	
	Telephone number of premises	
	Email address	
	Animal(s)	
	Please provide details of the species, number and gender of the animal(s) you intend to keep: Please complete Appendix A with the animal details	
	Will you be the Owner of the animal(s)	Yes / No
	Do you intend to breed or attempt to breed from these animals?	Yes / No
	Do you intend to move the animal(s) from the premises detailed in section 4? If yes, please provide details	Yes / No
5.	Accommodation and facilities (use additional pages if more space is needed)	
	Details of the quarters used to accommodate animals, including number, size and type of construction	
	I confirm that I have sought and received all the necessary permissions to keep the animal(s) listed in this application from any third party with interest in the property	Yes* / No / N/A *Please enclose evidence with your application

6.1	Please describe the escape proof accommodation in which the animals listed above will be held:	
	Construction	
	Size	
	Drainage	
	Ventilation	
	Temperature Control	
	Disposal of animal waste	
	Lighting	
6.2	Please describe the Husbandry Arrangements for the animals listed above:	
	Details of diet	
	Arrangements for the storage and preparation of food and drink	
	Arrangements for the provision of adequate exercise	
	For ensuring veterinary care, including preventative measures and to control the spread of disease	
	Isolation Facilities	
	Emergency evacuation procedures in the event of fire or other emergency	

7. Veterinary surgeon		
Name of usual veterinary surgeon		
Company name		
Address		
Telephone number		
Email address		
Do you consent for BBC and/or their authorised Inspectors to contact your veterinary practice?	Yes / No	
8. Emergency key holder(s)		
Do you have an emergency key holder?	Yes / No	
Name		
Position/job title		
Address		
Daytime telephone number		
Evening/other telephone number		
Email address		
Emergency key holder 2		
Name		
Position/job title		
Address		
Daytime telephone number		

	Evening/other telephone number	
	Email address	
9.	Public liability insurance	
	Do you have public liability insurance (PLI)? If yes, please attach a copy of the policy PLI will need to be in place before the licence can be granted	Yes / No
10.	Disqualifications and convictions	
	Has the applicant, or any person who will have control or management of the establishment, ever been disqualified from keeping any animal under (a)section 34(2) of the Animal Welfare Act 2006; (b)section 1 of the Protection of Animals (Amendment) Act 1954; (c)section 40(1) of the Animal Health and Welfare (Scotland) Act 2006; or (d)section 33(1) of the Welfare of Animals Act (Northern Ireland) 2011?	Yes / No
	Has the applicant, or any person who will have control or management of the establishment, been convicted of any offences involving animals?	Yes / No
	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
	If yes to any of these questions, please provide details	
11.	Start Date and Duration of Licence	
	Please state the proposed start date of the Licence	

	If you require a licence for less than three years, please specify the duration of the licence and reason/s why	
12.	Exhibiting the Animals	
	Will the Animals be Exhibited?	Yes / No
	If so, do you hold an Exhibition of Animals issued under the Animal Welfare (Licensing of Activities involving Animals) (England) Regulations 2018?	Yes / No
	If yes, please state the Licence Number and issuing Authority:	
13.	Additional Information	
	Please attach the following information:	
	A plan of the premises	
	Land Owner's Permission	
	Public Liability Insurance policy	
	Operating procedures Including daily monitoring, hygiene protocols, veterinary checks, transport procedures	
	Risk Assessments (including Fire)	
	Infection control procedure	
	Qualifications	
	Training records	
14.	Declaration	
	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, Regulations and Statutory Guidance.

I declare that the details contained in the application form and any attached documentation are correct to the best of my knowledge and belief.

I understand that a veterinarian or other suitably competent person authorised by the Council will inspect the premises to assess whether or not a licence can be granted.

I understand that if a licence is granted, a veterinarian or other suitably competent person authorised by the Council may inspect the premises either by appointment or unannounced at any reasonable time.

I understand that a veterinarian or other suitably competent person authorised by the Council may take photographs or video footage whilst carrying out inspections or visits to the premises.

I am aware a fee is payable for this application and this is not refundable should I withdraw the application or it is refused.

I understand that all veterinary fees incurred by the Council in respect of this application will be recoverable at cost and that failure to make payment in accordance with the invoice raised will lead to the revocation of any licence issued.

I confirm that I am aware of the provisions of the relevant legislation and the licence conditions, which I must comply with at all times.

I confirm that I am aware that I must notify the Council of any changes to
health@broxtowe.gov.uk

I agree by signing this application that I have read, agree to and understand this declaration and have read and understood the privacy notice.

Signing the box below indicates you have read and understood the above declaration

Signature

Full Name

Date

15. Public List of Animal Activity Licences

We publish a register of our animal licences on our website. This information includes the type of licence and the licenced address.

By signing this application form, you are agreeing for your details to be added.

Data Protection

Broxtowe Borough Council (BBC) will be Data Controller of the information you are providing. That means BBC will be responsible for looking after it as required by the Data Protection Act 2018. BBC will only use the information for the purpose explained on the form. As required by the Data Protection Act 2018 the information will be kept safe, secure, processed and only shared for those purposes or where it is allowed by law. In addition to the release of information under the Data Protection Act 2018, the Council is required to provide information on request to 3rd parties in accordance with the Freedom of Information Act 2000 and the Environmental Information Regulations 2004

For more information on how we do this and your rights in regards to your personal information and how to access it, visit our website page [Data Protection](#)

APPENDIX A Details of Primates