

Licensing Department  
Cardiff Council  
Room 206, City Hall  
Cathays Park  
Cardiff  
CF10 3ND

Tel: 029 2087 1651  
Email: [licensing@cardiff.gov.uk](mailto:licensing@cardiff.gov.uk)



## APPLICATION FOR A LICENCE TO KEEP A PET SHOP

Pet Animals Act 1951

**GRANT**  **RENEWAL**  (please tick as applicable)

### 1. APPLICANT

<b>Full Name of applicant:</b>	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other: .....
<b>Address:</b>	Postcode:
<b>Correspondence Address (if different to above):</b>	Postcode:
<b>Tel No:</b>	Home: Mobile:
<b>Email:</b>	

**2. PREMISES DETAILS**

Name:	
Address	
Town	
Postcode	
Telephone Number:	

**3. PLEASE GIVE INFORMATION OF ACCOMMODATION TO BE USED. Give details regarding the number and size of rooms to be used:**

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**4. What provisions have been made to maintain and keep a register of animals kept at the premises?**

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**5. What arrangements have been made to provide adequate lighting at the premises?**

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**6. What arrangements have been made to provide adequate heating at the premises?**

**7. What arrangements have been made to provide adequate ventilation at the premises?**

**7. What arrangements have been made to provide adequate water at the premises?**

**8. What arrangements have been made for the storage of food at the premises?**

**9. What arrangements have been made to provide adequate exercise arrangements at the premises?**

**10. What arrangements have been made to provide adequate bedding arrangements at the premises?**

**11. What arrangements have been made to provide adequate disposal of excreta and used bedding at the premises?**

**12. What arrangements have been made to provide adequate isolation facilities at the premises?**

**13. Have you or any person who will have control or management of the premises ever been disqualified from:**

Keeping a riding establishment	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Keeping a dog	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Keeping a pet shop	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Having custody of a dog	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Keeping a boarding establishment for dogs	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

If you have answered yes to any of the above, please provide further details:

**14. Have you or any person who will have control or management of the premises have any convictions under the Animal Welfare Act 2006:**

Yes  No

If you have answered yes, please provide further details:

**15. Do you or any person who will have control or management of the premises have any qualifications or suitable experience with the care and welfare of animals:**

Yes  No

If you have answered yes, please provide further details:

**16. Do you or any person who will work at the premises hold a City and Guilds Pet Management Certificate or some other appropriate qualification (this is a condition of licence):**

Yes  No

If you have answered **yes**, please provide further details:

If you have answered **no**, please confirm you or a member of staff is in the process of training and will obtain the qualification within two years of the licence being issued and provide details:

**17. What arrangements have been made in case of an emergency?**

**18. GIVE DETAILS OF THE VETERINARY PRACTICE YOU ARE REGISTERED WITH FOR THE PURPOSES OF HOME BOARDING**

Name of Practice	
Address of Practice	
Telephone Number:	



## 21. DECLARATION

### I hereby confirm that:

- I am over 18 years of age.
- A suitable qualification is held, or is in the process of being obtained (see question 16)
- I will comply with the requirements under:
  - The Pet Animals Act 1951
  - The Standard Licence conditions attached to a Pet Shop Licence
  - Any specific conditions the Licensing Authority deem appropriate to attach to my Pet Shop Licence

### I have enclosed:

- The fee of £372 in respect of this application.

Cheques made payable to '**Cardiff Council**' are accepted by post or at our offices at Cardiff Council, Licensing Section, City Hall, Cathays Park, Cardiff, CF10 3ND

Payments made by debit card are accepted by telephone Monday to Friday 10am until 3pm on **029 2087 1651**. **The application form must be submitted and received by us prior to making payment. If you would like us to contact you to take payment, please give the contact telephone number here \_\_\_\_\_**

\*\*\*Please note we are unable to accept credit cards\*\*\*

If you wish to make payment by BACS, please contact us for the relevant details

I hereby certify that to the best of my knowledge and belief the information I have provided on this application are true.

I understand that if I knowingly or recklessly make a false statement or omission I render myself liable to prosecution and my Licence may be suspended or revoked.

<b>Signed</b>	
<b>Print Name</b>	
<b>Date</b>	

Any data supplied by you on this form will be processed in accordance with Data Protection Act requirements and in supplying it you consent to the Council processing the data for the purpose for which it is supplied. All personal information provided will be treated in the strictest confidence and will only be used by the Council or disclosed to others for a purpose permitted by law