

Babergh District Council / Mid Suffolk District Council

Dangerous Wild Animals Act 1976

Application for the Grant of a Licence

| 1. | Name (in capitals) | | | |
|----|--|--|--|--|
| 2. | Address and contact telephone number of applicant | | | |
| | | | | |
| | | | | |
| 3. | Address of premises at which the animal(s) which is/are application will normally be kept | e the subject of this | | |
| | | | | |
| | | | | |
| 4. | Specify the species of animal and the number of animals of each species, proposed to be kept under the authority of the licence. | | | |
| | | | | |
| 5 | Do you, or will you both own and possess all the animal please give details of ownership and possession | - | | |
| | | | | |
| 6. | Are you disqualified from: (a) keeping any dangerous wild animals? (b) keeping a dog? (c) having the custody of animals? (d) keeping a pet shop? (e) keeping an animal boarding establishment? (f) keeping a riding establishment? | YES/NO YES/NO YES/NO YES/NO YES/NO YES/NO | | |

| | (g) | keeping a dog breeding establishment? | YES/NO | | |
|---------|---|---|---------------------------|--|--|
| 7. | | you the holder of a current insurance policy which insure damage that may be caused by the animals listed at 4 a | , , | | |
| | [If "YES", enclose with your application evidence that you hold such insurance, if "NO" state what steps you are taking to obtain such insurance] | | | | |
| 8. | | se give the following information about the accommodade in 4 above will be held: | tion in which the animals | | |
| | • | construction | | | |
| | • | size | | | |
| | • | drainage | | | |
| | • | ventilation | | | |
| | • | temperature control | | | |
| | Wha | at are the arrangements to be made: | | | |
| | • | for the provision, storage and preparation of food | | | |
| | • | for ensuring adequate exercise | | | |
| | • | for ensuring veterinary care, including preventative m | easures | | |
| | • | in the event of fire or other emergencies | | | |
| Cou | | permit an officer, veterinary surgeon or veterinary practition inspect the premises that are the subject of this applicate. | | | |
| I certi | fy tha | t I am not under the age of 18. | | | |
| I appl | y for a | a licence to keep the animal(s) which are the subject of i | my application. | | |
| The li | cence | e is valid for two years from the date of issue. | | | |
| | | | | | |
| Date. | | | | | |
| Signe | d | | | | |

Payment of Fee

You are able to pay the fee for this licence by cheque posted to our office or by credit/debit card over the phone.

If you wish to pay by cheque - for Babergh District Council residents please make your cheque payable to Babergh District Council or for Mid Suffolk District Council residents please make your cheque payable to Mid Suffolk District Council and send it with your completed form to:

Food and Safety Team,
Babergh and Mid Suffolk District Councils
Endeavour House
8 Russell Road
IPSWICH
IP1 2BX

If you prefer to pay by telephone:

- 1. Call 0300 1234000 and select option 7, please have your credit/debit card details ready.
- Please quote either of the following codes when requested: B4103/H9140 for premises within Babergh District OR M4103/H9140 for premises within Mid Suffolk District
- 3. You will be given a payment reference number.
- 4. You must write that number on this form in the space below.
- 5. Post the form to the address above.

| Please tick one of the boxes below to indicate how you have paid. | | | |
|---|--|--|--|
| | I have enclosed a cheque | | |
| | I have paid by telephone, the payment reference is | | |