

The Animal Welfare (Licensing of Activities Involving Animals) Regulations 2018

Animal Licensing Application
Section 1 – Applicant Details

1	Agent Details					
1.1	Are you an agent acting on behalf of the applicant	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	If no go to 1.3

1.2	Further Details about Agent					
Full name						
Address						
Phone numbers						
Email						

1.3	Applicant Details					
Full name						
Address						
Phone numbers						
Email						
Date of birth	/ /					

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

2	Further information about the applicant					
2.1	Have you been registered/licenced before	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	If no go to 3
2.2	Local Authority where registered/licenced					
2.3	Give details of registration e.g type of licence					

3	Further details about the applicant		
3.1	Do you have any training certificates or qualifications?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	If no, please contact the licensing team on 01702 318111.
3.2	Please provide details of training certificates and qualifications		
3.3	Please provide details of relevant experience		

4	Type of Application		
4.1	Type of Application	New <input type="checkbox"/>	Renewal <input type="checkbox"/>
4.2	Existing licence number		

5	Licensable Activities		
5.1	What licensable activities do you intend to carry on?		
5.2	Hiring Out Horses	Yes <input type="checkbox"/> / No <input type="checkbox"/> – if YES go to Section 2	
5.3	Selling Animal as Pets	Yes <input type="checkbox"/> / No <input type="checkbox"/> – if YES go to Section 3	
5.4	Keeping or Training Animals for Exhibition	Yes <input type="checkbox"/> / No <input type="checkbox"/> – if YES go to Section 4	
5.5	Providing or Arranging for the Provision of Boarding for Cats or Dogs	Yes <input type="checkbox"/> / No <input type="checkbox"/> – if YES go to Section 5	
5.6	Breeding Dogs	Yes <input type="checkbox"/> / No <input type="checkbox"/> – if YES go to Section 6	

Section 2 – Hiring Out Horses

The Animal Welfare (Licensing of Activities Involving Animals) Regulations 2018

1 Establishment to be licensed		
1.1	Name of premises/trading name	
1.2	Address of premises	
1.3	Telephone number	
1.4	Email address	
1.5	Is the establishment open throughout the year?	Yes <input type="checkbox"/> / No <input type="checkbox"/>
1.6	When is it normally open?	
1.7	Do you have planning permission for this business use.	Yes <input type="checkbox"/> / No <input type="checkbox"/>

2 Accommodation and facilities		
Please describe the accommodation available for horses:		
2.1	Stalls (please give the number)	
2.2	Boxes (please give the number)	
2.3	Covered yard (please give dimensions)	
2.4	Open yard (please give dimensions)	
Please describe the land available for:		
2.5	Grazing	
2.6	Instructing or demonstrating	
2.7	Exercise	
Please describe the accommodation available for:		
2.8	Forage and bedding	

2.9	Equipment and saddlery		
	Please describe the arrangements in place for:		
2.10	Water supply and watering horses		
2.11	Disposal of animal waste		
2.12	Protection of horses in event of a fire, and fire precautions		

3	Please provide details of all of the horses currently kept	
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Name of Horse	Description including height	Sex	Age	Passport number	Purpose for which the horse is kept	Age range of riders

4	Management of the establishment		
4.1	Name & Address of the manager/person with direct control of the establishment		
4.2	Does the manager have any of the following certificates? (tick all that apply)		
<input type="checkbox"/>	Assistant Instructor's Certificate of the British Horse Society		
<input type="checkbox"/>	Intermediate Instructor's Certificate of the British Horse Society		
<input type="checkbox"/>	Instructor's Certificate of the British Horse Society		
<input type="checkbox"/>	Fellowship of the British Horse Society		
<input type="checkbox"/>	Fellowship of the Institute of the Horse		
<input type="checkbox"/>	None of the above		
4.3	Please give details of the manager's experience in the management of horses		
4.4	Does a responsible person live at the establishment?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	
4.5	What are the arrangements in the event of an emergency?		
4.6	Will a person who is under 16 years of age be left in charge of the establishment at any time?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	

4.7	Will a responsible person (of 16 years or over) provide supervision at all times while horses from the establishment are used for riding instruction or are hired out for riding (except in the case of the hirer being competent to ride without supervision)?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	
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5	Veterinary surgeon		
5.1	Name of usual veterinary surgeon		
5.2	Company name		
5.3	Address		
5.4	Telephone number		
5.5	Email address		

6	Public liability insurance		
6.1	Insurance company		
6.2	Policy number		
6.3	Period of cover		
6.4	Amount of cover (£m)		
	Does this policy:		
6.5	Insure against liability for any injury sustained by those who hire a horse from you for riding and those who use a horse in the course of receiving instruction in riding, provided by you in return for payment?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	If yes to all, go to 7
6.6	Insure against liability arising out of such hire or use of a horse?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	
6.7	Insure such hirers or users in respect of any liability which may be incurred by them in respect of injury to any person caused by, or arising from, such hire or use?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	

7	Disqualifications and convictions		
	Has the applicant, or any person who will have control or management of the establishment, ever been disqualified from:		
7.1	Keeping a pet shop?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	
7.2	Keeping a dog?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	
7.3	Keeping an animal boarding establishment?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	
7.4	Keeping a riding establishment?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	
7.5	Having custody of animals?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	
7.6	Has the applicant, or any person who will have control or management of the establishment, been convicted of any offences under the Animal Welfare Act 2006?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	
7.7	Has the applicant, or any person who will have control or management of the establishment, ever had a licence refused, revoked or cancelled?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	
7.8	If yes to any of these questions Please provide details,		

8	Additional details		
	Please check local guidance notes and conditions for any additional information which may be required		
8.1	Additional information which is required or may be relevant to the application		

Section 3 – Selling Animals as Pets

The Animal Welfare (Licensing of Activities Involving Animals) Regulations 2018

1 Type of Business		
1.1	Pet Shop	Yes <input type="checkbox"/> / No <input type="checkbox"/>
1.2	Home Sales	Yes <input type="checkbox"/> / No <input type="checkbox"/>
1.3	Internet Sales	Yes <input type="checkbox"/> / No <input type="checkbox"/>
1.4	Wholesales	Yes <input type="checkbox"/> / No <input type="checkbox"/>
1.5	Third Party Sales	Yes <input type="checkbox"/> / No <input type="checkbox"/>
1.6	Hobby Sales (Pet Fairs)	Yes <input type="checkbox"/> / No <input type="checkbox"/>
1.7	Sale of animals to the public as pets by means of a fixed or minimum donation	Yes <input type="checkbox"/> / No <input type="checkbox"/>
1.8	Other please state	

2 Premises to be licensed		
2.1	Name of premises/trading name	
2.2	Address of premises	
2.3	Telephone number of premises	
2.4	Email address	
2.5	Do you have planning permission for this business use.	Yes <input type="checkbox"/> / No <input type="checkbox"/>

3 Accommodation and facilities		
3.1	Number and size of rooms to be used	
3.2	Heating arrangements	
3.3	Method of ventilation of premises	
3.4	Lighting arrangements (natural & artificial)	
3.5	Water supply	
3.6	Facilities for food storage & preparation	

3.7	Arrangements for disposal of excreta, bedding and other waste material		
3.8	Isolation facilities for the control of infectious diseases		
3.9	Fire precautions/equipment and arrangements in the case of fire		
3.10	Do you keep and maintain a register of animals?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	
3.11	When the premises is closed what arrangements are in place to ensure the welfare of animals.		

4 Animals to be sold					
Please provide details of the animals to be sold					
	Type		Maximum Number	Details of accommodation including size	Age at which to be sold
4.1	Dogs / puppies	Yes <input type="checkbox"/> / No <input type="checkbox"/>			
4.2	Cats /kittens	Yes <input type="checkbox"/> / No <input type="checkbox"/>			
4.3	Chipmunks	Yes <input type="checkbox"/> / No <input type="checkbox"/>			
4.4	Rabbits & cavies	Yes <input type="checkbox"/> / No <input type="checkbox"/>			
4.5	Hamsters	Yes <input type="checkbox"/> / No <input type="checkbox"/>			
4.6	Rats, mice & gerbils	Yes <input type="checkbox"/> / No <input type="checkbox"/>			
4.7	Larger domesticated mammals, e.g. goats, pot-bellied pigs	Yes <input type="checkbox"/> / No <input type="checkbox"/>			
4.8	Primates e.g. marmosets	Yes <input type="checkbox"/> / No <input type="checkbox"/>			
4.9	Parrots, parakeets and macaws	Yes <input type="checkbox"/> / No <input type="checkbox"/>			
4.10	Pigeons	Yes <input type="checkbox"/> / No <input type="checkbox"/>			
4.11	Other large birds (please specify)	Yes <input type="checkbox"/> / No <input type="checkbox"/>			
4.12	Budgerigars, finches and other small birds	Yes <input type="checkbox"/> / No <input type="checkbox"/>			

4	Animals to be sold				
	Please provide details of the animals to be sold				
4.13	Tortoises	Yes <input type="checkbox"/> / No <input type="checkbox"/>			
4.14	Snakes and lizards	Yes <input type="checkbox"/> / No <input type="checkbox"/>			
4.15	Tropical fish	Yes <input type="checkbox"/> / No <input type="checkbox"/>			
4.16	Marine fish	Yes <input type="checkbox"/> / No <input type="checkbox"/>			
4.17	Cold water fish	Yes <input type="checkbox"/> / No <input type="checkbox"/>			
4.18	Any other species (please specify)	Yes <input type="checkbox"/> / No <input type="checkbox"/>			

5	Veterinary surgeon				
5.1	Name of usual veterinary surgeon				
5.2	Company name				
5.3	Address				
5.4	Telephone number				
5.5	Email address				

6	Emergency key holder				
6.1	Do you have an emergency key holder?	Yes <input type="checkbox"/> / No <input type="checkbox"/>			
6.2	Name				
6.3	Position/job title				
6.4	Address				
6.5	Daytime telephone number				
6.6	Evening/other telephone number				
6.7	Email address				
6.8	Add another person?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	Please use separate sheet		

7	Disqualifications and convictions		
	Has the applicant, or any person who will have control or management of the establishment, ever been disqualified from:		
7.1	Keeping a pet shop?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	
7.2	Keeping a dog?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	
7.3	Keeping an animal boarding establishment?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	
7.4	Keeping a riding establishment?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	
7.5	Having custody of animals?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	
7.6	Has the applicant, or any person who will have control or management of the establishment, been convicted of any offences under the Animal Welfare Act 2006?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	
7.7	Has the applicant, or any person who will have control or management of the establishment, ever had a licence refused, revoked or cancelled?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	
7.8	If yes to any of these questions, please provide details,		

Section 4 – Keeping or Training Animals for Exhibition

The Animal Welfare (Licensing of Activities Involving Animals) Regulations 2018

1 Type of business/performance (please tick)	
1.1	TV/Film/Social Media Yes <input type="checkbox"/> / No <input type="checkbox"/>
1.2	Theatre Yes <input type="checkbox"/> / No <input type="checkbox"/>
1.3	Circus using domestic animals Yes <input type="checkbox"/> / No <input type="checkbox"/>
1.4	Exhibiting Animals Yes <input type="checkbox"/> / No <input type="checkbox"/>
1.5	Animal Encounters Yes <input type="checkbox"/> / No <input type="checkbox"/>
1.6	Birds of Prey shows/exhibits Yes <input type="checkbox"/> / No <input type="checkbox"/>
1.7	Other please state

2 Application Details	
2.1	Have you been registered/licenced before Yes <input type="checkbox"/> / No <input type="checkbox"/> If no go to 2b
2.2	Local Authority where registered/licenced
2.3	Give details of registration e.g type and numbers of animals, type of performance or exhibition.

2 Further information about the applicant	
2.4	Stage name (if any)
2.5	Nationality

3 Animals to be trained	
3.1	Name of premises/trading name
3.2	Address of premises
3.3	Telephone number of premises
3.4	Email address

4 Kinds of animal to be trained and the number of each kind	
4.1	Kind of animal
4.2	Number
4.3	Add another kind of Animal ? Yes <input type="checkbox"/> / No <input type="checkbox"/> If yes, repeat 4.1 to 4.2

5 Kinds of animal to be exhibited/Encounter and the number of each kind	
5.1	Kind of animal
5.2	Number
5.3	Add another kind of Animal ? Yes <input type="checkbox"/> / No <input type="checkbox"/> If yes, repeat 5.1 to 5.2

6 Proposed Performance or Encounter			
6.1	Describe the nature of the performance (s) in which the animals will be exhibited or for which they are to be trained, mentioning any apparatus which is used for the purpose of the performance. The description must be sufficient to give a general idea of what is done by the animals taking part in the performance. If it is an animal encounter please give details of what type of encounter and where these are to take place.		
6.2.	Approximate duration of the performance (s)		
6.3	Number of times the performance will be given in one day.		
6.4	How will the animals be transported		
6.5	Where are the animals to be kept when not performing or being exhibited.		

7 Veterinary surgeon			
7.1	Name of usual veterinary surgeon		
7.2	Company name		
7.3	Address		
7.4	Telephone number		
7.5	Email address		

8 Emergency key holder			
8.1	Do you have an emergency key holder?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	If no, go to 9.1
8.2	Name		
8.3	Position/job title		
8.4	Address		
8.5	Daytime telephone number		
8.6	Evening/other telephone number		
8.7	Email address		
8.8	Add another person?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	If yes, 8.2 to 8.8 will be repeated

9	Public liability insurance			
9.1	Do you have public liability insurance?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	If no, go to question 9.6	
	If yes, please provide details of the policy			
9.2	Insurance company			
9.3	Policy number			
9.4	Period of cover			
9.5	Amount of cover (£m)			
9.6	Please state what steps you are taking to obtain such insurance			

10	Disqualifications and convictions			
	Has the applicant, or any person who will have control or management of the establishment, ever been disqualified from:			
10.1	Keeping a pet shop?	Yes <input type="checkbox"/> / No <input type="checkbox"/>		
10.2	Keeping a dog?	Yes <input type="checkbox"/> / No <input type="checkbox"/>		
10.3	Keeping an animal boarding establishment?	Yes <input type="checkbox"/> / No <input type="checkbox"/>		
10.4	Keeping a riding establishment?	Yes <input type="checkbox"/> / No <input type="checkbox"/>		
10.5	Having custody of animals?	Yes <input type="checkbox"/> / No <input type="checkbox"/>		
10.6	Has the applicant, or any person who will have control or management of the establishment, been convicted of any offences under the Animal Welfare Act 2006?	Yes <input type="checkbox"/> / No <input type="checkbox"/>		
10.7	Has the applicant, or any person who will have control or management of the establishment, ever had a licence refused, revoked or cancelled?	Yes <input type="checkbox"/> / No <input type="checkbox"/>		
10.8	If yes to any of these questions, please provide details,			

Section 5 – Providing or Arranging for the Provision of Boarding for Cats or Dogs

The Animal Welfare (Licensing of Activities Involving Animals) Regulations 2018

1	Type of Application					
1.1	Commercial Boarding	<input type="checkbox"/>	Home Boarding	<input type="checkbox"/>	Day Care	<input type="checkbox"/>

2	Animals to be accommodated			
2.1	Cats	Yes <input type="checkbox"/> / No <input type="checkbox"/>	Maximum number	
2.2	Dogs Boarding	Yes <input type="checkbox"/> / No <input type="checkbox"/>	Maximum number	
2.3	Home Boarding	Yes <input type="checkbox"/> / No <input type="checkbox"/>	Number to be boarded Number resident dogs at premises	
2.4	Dog Day Care	Yes <input type="checkbox"/> / No <input type="checkbox"/>	Maximum number	

3	Premises to be licensed	
3.1	Name of premises/trading name	
3.2	Address of premises	
3.3	Telephone number of premises	
3.4	Email address	
3.5	Do you have planning permission for this business use.	Yes <input type="checkbox"/> / No <input type="checkbox"/>

4	Accommodation and facilities	
4.1	Details of the quarters used to accommodate animals, including number, size and type of construction	
4.2.	Exercise facilities and arrangements	
4.3	Heating arrangements:	

4	Accommodation and facilities		
4.4	Method of ventilation of premises		
4.5	Lighting arrangements (natural & artificial)		
4.6	Water supply		
4.7	Facilities for food storage & preparation		
4.8	Arrangements for disposal of excreta, bedding and other waste material		
4.9	Isolation facilities for the control of infectious diseases		
4.10	Fire precautions/equipment and arrangements in the case of fire		
4.11	Do you keep and maintain a register of animals?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	
4.12	How do you propose to minimise disturbance from noise?		

5	Veterinary surgeon		
5.1	Name of usual veterinary surgeon		
5.2	Company name		
5.3	Address		
5.4	Telephone number		
5.5	Email address		

6	Emergency key holder		
6.1	Do you have an emergency key holder?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	
6.2	Name		

6.3	Position/job title		
6.4	Address		
6.5	Daytime telephone number		
6.6	Evening/other telephone number		
6.7	Email address		
6.8	Add another person?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	

7	Public Liability insurance		
7.1	Insurance company		
7.2	Policy number		
7.3	Period of cover		
7.4	Amount of cover (£m)		

8	Disqualifications and convictions		
	Has the applicant, or any person who will have control or management of the establishment, ever been disqualified from:		
8.1	Keeping a pet shop?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	
8.2	Keeping a dog?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	
8.3	Keeping an animal boarding establishment?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	
8.4	Keeping a riding establishment?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	
8.5	Having custody of animals?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	
8.6	Has the applicant, or any person who will have control or management of the establishment, been convicted of any offences under the Animal Welfare Act 2006?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	
8.7	Has the applicant, or any person who will have control or management of the establishment, ever had a licence refused, revoked or cancelled?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	

8	Disqualifications and convictions	
8.8	If yes to any of these questions, please provide details,	

No home where there are children under 5 years of age will be licensed.

Section 6 – Breeding Dogs

The Animal Welfare (Licensing of Activities Involving Animals) Regulations 2018

1 Animals to be accommodated						
1.1	Wholly Indoors	<input type="checkbox"/>	Wholly outdoors	<input type="checkbox"/>	Combination of outdoors and indoors	<input type="checkbox"/>
1.2	Breeds of dogs concerned					
1.3	Number of bitches names and ages kept					
	Name				Age	
1.4	Owned by the applicant	<input type="checkbox"/>	Co owned by the applicant	<input type="checkbox"/>	On breeding terms	<input type="checkbox"/>
1.5	Number of studs kept					
1.6	Owned by the applicant	<input type="checkbox"/>	Co owned by the applicant	<input type="checkbox"/>	On breeding terms	<input type="checkbox"/>
1.7	Provide details of the ages of the studs kept					

2	Premises to be licensed		
2.1	Name of premises/trading name		
2.2	Address of premises		
2.3	Telephone number of premises		
2.4	Email address		
2.5	Do you have planning permission for this business use.	Yes <input type="checkbox"/> / No <input type="checkbox"/>	

3	Accommodation and facilities		
3.1	Details of the quarters used to accommodate animals, including number, size and type of construction		
3.2.	Exercise facilities and arrangements		
3.3	Heating arrangements:		
3.4	Method of ventilation of premises		
3.5	Lighting arrangements (natural & artificial)		
3.6	Water supply		
3.7	Facilities for food storage & preparation		
3.8	Arrangements for disposal of excreta, bedding and other waste material		
3.9	Isolation facilities for the control of infectious diseases		
3.10	Fire precautions/equipment and arrangements in the case of fire		

3	Accommodation and facilities			
3.11	Do you keep and maintain a register of animals?	Yes <input type="checkbox"/> / No <input type="checkbox"/>		
3.12	How do you propose to minimise disturbance from noise?			

4	Veterinary surgeon			
4.1	Name of usual veterinary surgeon			
4.2	Company name			
4.3	Address			
4.4	Telephone number			
4.5	Email address			

5	Emergency key holder			
5.1	Do you have an emergency key holder?	Yes <input type="checkbox"/> / No <input type="checkbox"/>		
5.2	Name			
5.3	Position/job title			
5.4	Address			
5.5	Daytime telephone number			
5.6	Evening/other telephone number			

5.7	Email address		
5.8	Add another person? Details	Yes <input type="checkbox"/> / No <input type="checkbox"/>	

6	Public liability insurance		
6.1	Insurance company		
6.2	Policy number		
6.3	Period of cover		
6.4	Amount of cover (£m)		

7	Disqualifications and convictions		
	Has the applicant, or any person who will have control or management of the establishment, ever been disqualified from:		
7.1	Keeping a pet shop?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	
7.2	Keeping a dog?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	
7.3	Keeping an animal boarding establishment?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	
7.4	Keeping a riding establishment?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	
7.5	Having custody of animals?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	
7.6	Has the applicant, or any person who will have control or management of the establishment, been convicted of any offences under the Animal Welfare Act 2006?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	
7.7	Has the applicant, or any person who will have control or management of the establishment, ever had a licence refused, revoked or cancelled?	Yes <input type="checkbox"/> / No <input type="checkbox"/>	
7.8	If yes to any of these questions, please provide details,		

8	Standard declaration and signature section	
	All applicants to tick that they have read the applicable model licence conditions & guidance	
	I/We undertake to pay any Veterinary expenses incurred during the application process which is additional to the initial application fee. This fee will be invoiced separately and the balance to be paid before a licence is issued	
	<p>I/We enclose the application fee of £</p> <p>Fees can be paid by card on www.rochford.gov.uk/payit or by phone on 01702 318111</p> <ul style="list-style-type: none"> • A copy of your Public Liability Insurance Certificate must be enclosed with this application • A plan of the premises must be enclosed with this application • Operating procedures • Risk Assessments (including Fire) • Infection Control procedures • Qualifications / Experience • Training Records 	
	This section must be completed by the applicant. If you are the agent please ensure the 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.	
<input type="checkbox"/>	Ticking this box indicates you have read and understood the above declaration	
	Applicant's Signature	
	Full name	
	Capacity	
	Date:	

Acceptance of an application or issue of a Licence under this Act does **not** imply approval under Town and Country Planning Laws.

This form may be returned to:
Licensing Department
Rochford District Council
South Street
Rochford
Essex SS4 1BW
licensing@rochford.gov.uk

The information supplied on this form will be held on a computer. Rochford District Council may use this information to check other information supplied by you to the Council. The Council may from time to time disclose some of this information to the general public and corporate bodies such as the Police, Inland Revenue, DSS, insurance companies, etc.