## **STANDARD APPLICANT PROFILE: SECTION 1**



1	Reference number	
1.1	System Reference Number (if known)	
1.2	Your Reference (if known)	

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

2a	Agent			
2.1	Are you an agent acting on behalf of the applicant	Yes	No	If no, go to 3.1
2b	Further information about the Agent			
2.2	Name			
2.3	Address			
2.4	Email			
2.5	Main telephone number			
2.6	Other telephone number			

3	Applicant details			
3.1	Name			
3.2	Address			
3.3	Email			
3.4	Main telephone number			
3.5	Other telephone number			
3.6	Are you applying as a business or organisation, including a sole trader	Yes	No	
3.7	Are you applying as an individual	Yes	No	

4a	Applicant Business					
4.1	Is your company registered with companies house	Yes		No		lf no, go to 4.3
4.2	Registration Number					
4.3	Is your business registered outside the UK					
4.4	VAT Number					
4.5	Legal status of the business					
4.6	Your position in the business					
4.7	The country where your head office is located.					
4b	Business Address – This should be you receive all communication	ur official address	s – Tł	ne address red	quire	d of you by law to
4.8	Building name or number					
4.9	Street					
4.10	District					
4.11	City or Town					
4.12	County or administrative area					
4.13	Post Code					
4.14	Country					

### **APPLICATION FOR A LICENCE TO HIRE OUT HORSES**

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

1	Type of Application			
1.1	Type of Application	New	Renewal	If new, go to 1.3
1.2	Existing licence number			
	Further information about the applicant			
1.3	Date of birth			

2	Establishment to be licensed	
2.1	Name of premises/trading name	
2.2	Address of premises	
2.3	Telephone number	
2.4	Email address	
2.5	Is the establishment open throughout the year?	Yes/No
2.6	When is it normally open?	
2.7	Do you have planning permission for this business use.	Yes/No

3	Accommodation and facilities	
	Please describe the accommodation ava	ilable for horses:
3.1	Stalls (please give the number)	
3.2	Boxes (please give the number)	
3.3	Covered yard (please give dimensions)	
3.4	Open yard (please give dimensions)	
	Please describe the land available for:	
3.5	Grazing	
3.6	Instructing or demonstrating	
3.7	Exercise	
	Please describe the accommodation ava	ilable for:
3.8	Forage and bedding	
3.9	Equipment and saddlery	
	Please describe the arrangements in pla	ce for:
3.10	Water supply and watering horses	
3.11	Disposal of animal waste	
3.12	Protection of horses in event of a fire, and fire precautions	

4a	Horses	
4.1	How many horses are kept under the terms of the Act at the present time?	
4.2	How many horses is it intended to keep under the terms of the Act during the year?	
	Please provide details of all the horses cu	urrently kept
4.3	Name of horse	

4.4	Description including size		
4.5	Sex		
4.6	Age		
4.7	Horse passport number		
4.8	Purpose for which horse is kept		
4.9	Age range of people who ride this horse		
4.10	Add another horse?	Yes/No	If no, go to 5.1
4b	Horses 2	1	
4.11	Name of horse		
4.12	Description including size		
4.13	Sex		
4.14	Age		
4.15	Horse passport number		
4.16	Purpose for which horse is kept		
4.17	Age range of people who ride this horse		
4.18	Add another horse?	Yes/No	If no, go to 5.1
4c	Horses 3		
4.19	Name of horse		
4.20	Description including size		
4.21	Sex		
4.22	Age		
4.23	Horse passport number		
4.24	Purpose for which horse is kept		
4.25	Age range of people who ride this horse		
4.26	If you intend to hire out further horses pleas questions 4.3 to 4.10 for each.	se attach a separate l	ist of these with the information requested in

5	Management of the establishment	
5.1	Name & Address of the manager/person with direct control of the establishment	
5.2	Does the manager have any of the following certificates? (tick all that	at apply)
	Assistant Instructor's Certificate of the British Horse Society	
	Intermediate Instructor's Certificate of the British Horse Society	
	Instructor's Certificate of the British Horse Society	
	Fellowship of the British Horse Society	
	Fellowship of the Institute of the Horse	
	None of the above	
5.3	Please give details of the manager's experience in the management of horses	
5.4	Does a responsible person live at the establishment?	Yes/No
5.5	What are the arrangements in the event of an emergency?	
5.6	Will a person who is under 16 years of age be left in charge of the establishment at any time?	Yes/No

5.7	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/No
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6	Veterinary surgeon
6.1	Name of usual veterinary surgeon
6.2	Company name
6.3	Address
6.4	Telephone number
6.5	Email address

7	Public liability insurance				
7.1	Do you have public liability insurance?	Yes/No	lf	no, go to 7	.10
7.2	Please provide details of the policy				
7.3	Insurance company				
7.4	Policy number				
7.5	Period of cover				
7.6	Amount of cover (£)				
	Does this policy:				
7.7	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?				
7.8	Insure against liability arising out of such hire or use of a horse?			Yes/No	If yes to all, go
7.9	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/No	to 8.1	
7.10	Please state what steps you are taking to obtain such insurance				

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/No	
8.2	Keeping a dog?	Yes/No	
8.3	Keeping an animal boarding establishment?	Yes/No	
8.4	Keeping a riding establishment?	Yes/No	
8.5	Having custody of animals?	Yes/No	
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/No	
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 / No	
8.8	If yes to any of these questions Please provide details,		

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



#### ANIMAL WELFARE (LICENSING OF ACTIVITIES INVOLVING ANIMALS) (ENGLAND) REGULATIONS 2018

#### ANIMAL ACTIVITY LICENCE APPLICATION FORM

#### STANDARD DECLARATION SECTION

1	Model Licence Conditions & Guidance		
	All applicants to tick that they have read the applicable model licence conditions & guidance		
1.1	Pet Vending		
1.2	Animal Boarding		
1.3	Performing Animals		
1.4	Riding Establishments		
1.5	The Breeding and Sale of Dogs		

2	Additional Information	
	Please attach the following Information	
2.1	A plan of the premises	
2.2	Insurance policy	
2.3	Operating procedures	
2.4	Risk Assessments (including Fire)	
2.5	Infection control procedure	
2.6	Qualifications	
2.7	Training records	

3	Declaration		
3.1	This section must be completed by the applicant. If you are an agent please ensure this section is completed by the applicant.		
3.2	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.		
3.3	Signing this box indicates you have read and understood the above declaration		
3.4	Full Name		
3.5	Capacity		
3.6	Date		

Please turn over and complete the Ashfield District Council "declaration" form.

# General Data Protection Regulation 2016 (GDPR) / Data Protection Act 2018 (DPA) - Privacy Notice.

Under the GDPR and DPA, Ashfield District Council, Urban Road, Kirkby in Ashfield, Nottingham. NG17 8DA is a Data Controller for the information it holds about you. The Council will hold the information above provided by you for assessing your application. The lawful basis under which the Council uses personal data for this purpose is Public Task.

The information provided by you includes the following special categories of personal data:

- Physical or Mental Health
- Genetic / Biometric data
- Criminal History (including motoring offences)

Information in these categories is used by the Council on the basis that such use is necessary for reasons of substantial public interest, and in accordance with the provisions of the Data Protection Act 2018.

Your data will be held for a period of 6 years. Subject to some legal exceptions, you have the right to request a copy of the personal information the Council holds about you; to have any inaccuracies corrected; to have your personal data erased; to place a restriction on our processing of your data; to object to processing; and to request your data to be ported (data portability). The information provided by you may also be used for other functions carried out by the Council in accordance with GDPR and DPA. For more information about how the Council may use your data and to learn more about your rights please see the Council's Privacy Statement: <u>www.ashfield.gov.uk/privacy</u>

If you have any concerns or questions about how your personal data is processed, please contact the Council's Data Protection Officer at the address at the bottom of this form or by email to **dpo@ashfield.gov.uk**. If you are dissatisfied with the Council's response you can complain to the Information Commissioner's Office in writing to: Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire SK9 5AF or by telephone 0303 123 1113 (local rate) or 01625 545 745.

#### **Declaration**

I, the undersigned, hereby declare that the information contained in this application is true and accurate to the best of my knowledge.

I understand that if I knowingly or recklessly make a false statement or omit any material particularly in giving information as part of this application I shall be committing an offence and will be liable for prosecution.

I confirm I have read the General Data Protection Regulation 2016 (GDPR) / Data Protection Act 2018 (DPA) - Privacy Notice above.

Signature of Applicant:\_\_\_\_\_

\_\_ Date:\_

Please return your completed application form, and accompanying documents to:

Licensing Team, Ashfield District Council, Urban Road, Kirkby in Ashfield, Nottinghamshire, NG17 8DA.

A member of the Licensing Team will contact you for your payment of the application fee by debit / credit card.