

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

Application for a licence to carry out the activity of hiring out horses

Standard applicant profile section 1

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| 1 | Reference number | |
| 1.1 | System reference Number | |
| 1.2 | Your reference | |

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

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| 2 | Agent | | | | | |
| 2.1 | Are you an agent acting on behalf of the applicant | Yes | | No | | If no, go to question 3 |
| 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 | | | | | |

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

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| 4 | Applicant Business | | | | | |
| 4.1 | Is your company registered with companies house | Yes | | No | | If no, go to question 4.3 |
| 4.2 | Registration Number | | | | | |

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| 4 | Applicant Business | | |
| 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 your official address – The address required of you by law to receive all communication | | |
| 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 | | |

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

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| 5 | Type of Application | | | | |
| 5.1 | Type of Application | New | | Renewal | If new, go to question 5b |
| 5.2 | Existing licence number | | | | |
| 5b | Further information about the applicant | | | | |
| 5.3 | Date of birth | | | | |

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| 6 | Establishment to be licensed | | |
| 6.1 | Name of premises/trading name | | |
| 6.2 | Address of premises | | |
| 6.3 | Telephone number | | |
| 6.4 | Email address | | |
| 6.5 | Is the establishment open throughout the year? | Yes | No |
| 6.6 | When is it normally open? | | |
| 6.7 | Do you have planning permission for this business use. | Yes | No |

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| 7 | Accommodation and facilities | |
| | Please describe the accommodation available for horses: | |
| 7.1 | Stalls (please give the number) | |
| 7.2 | Boxes (please give the number) | |
| 7.3 | Covered yard (please give dimensions) | |
| 7.4 | Open yard (please give dimensions) | |
| | Please describe the land available for: | |

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| 7.5 | Grazing | |
| 7.6 | Instructing or demonstrating | |
| 7.7 | Exercise | |
| Please describe the accommodation available for: | | |
| 7.8 | Forage and bedding | |
| 7.9 | Equipment and saddlery | |
| Please describe the arrangements in place for: | | |
| 7.10 | Water supply and watering horses | |
| 7.11 | Disposal of animal waste | |
| 7.12 | Protection of horses in event of a fire, and fire precautions | |

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| 8 | Horses | |
| 8.1 | How many horses are kept under the terms of the Act at the present time? | |
| 8.2 | How many horses is it intended to keep under the terms of the Act during the year? | |
| Please provide details of all the horses currently kept | | |
| 8.3 | Name of horse | |
| 8.4 | Description including size | |
| 8.5 | Sex | |
| 8.6 | Age | |
| 8.7 | Horse passport number | |
| 8.8 | Horse microchip number | |
| 8.9 | Purpose for which horse is kept | |
| 8.10 | Age range of people who ride this horse | |
| 8.11 | Are there other horses, donkeys, etc If yes, provide the information required in 8.3 to 8.10 for all other horses on an additional sheet/spreadsheet | Yes No |

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| 9 | Management of the establishment | |
| 9.1 | Name & Address of the manager/person with direct control of the establishment | |
| 9.2 | Does the manager have any of the following certificates? (tick all that 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 | |

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| | None of the above | | |
| 9.3 | Please give details of the manager's experience in the management of horses | | |
| 9.4 | Does a responsible person live at the establishment? | Yes | No |
| 9.5 | What are the arrangements in the event of an emergency? | | |
| 9.6 | Will a person who is under 16 years of age be left in charge of the establishment at any time? | Yes | No |
| 9.7 | 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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| 10 | Veterinary surgeon | | |
| 10.1 | Name of usual veterinary surgeon | | |
| 10.2 | Company name | | |
| 10.3 | Address | | |
| 10.4 | Telephone number | | |
| 10.5 | Email address | | |

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| 11 | Public liability insurance | | |
| 11.1 | Do you have public liability insurance? | Yes | No |
| | If no, go to question 11.9 | | |
| | If yes, please provide details of the policy | | |
| 11.2 | Insurance company | | |
| 11.3 | Policy number | | |
| 11.4 | Period of cover | | |
| 11.5 | Amount of cover (£5million minimum required) | | |
| | Does this policy: | | |
| 11.6 | 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 | No |
| 11.7 | Insure against liability arising out of such hire or use of a horse? | Yes | No |
| 11.8 | 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 |
| 11.9 | Please state what steps you are taking to obtain such insurance | | |

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| 12 | Disqualifications and convictions | | |
| | Has the applicant, or any person who will have control or management of the establishment, ever been disqualified from: | | |
| 12.1 | Keeping a pet shop? | Yes | No |
| 12.2 | Keeping a dog? | Yes | No |
| 12.3 | Keeping an animal boarding establishment? | Yes | No |

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| 12 | Disqualifications and convictions | | |
| 12.4 | Keeping a riding establishment? | Yes | No |
| 12.5 | Having custody of animals? | Yes | No |
| 12.6 | Has the applicant, or any person who will have control or management of the establishment, been disqualified or convicted of any offences under the: Animal Welfare Act 2006 Animal Welfare (Scotland) Act 2006 Dangerous Dogs Act 1991 Any other legislation listed in Schedule 8 of the LAIA Regulations 2018 | Yes | No |
| 12.7 | 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 |
| 12.8 | If yes to any of these questions please provide details | | |

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| 13 | Additional details | |
| | Please check local guidance notes and conditions for any additional information which may be required | |
| 13.1 | Additional information which is required or may be relevant to the application | |

Standard payment and declaration section

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| 14 | Payment | |
| 14.1 | Payment must be made in full at the time of making the application | |
| 14.2 | Confirmation of when and how payment made, including payment reference number, if applicable | |

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| 15 | Statutory Guidance | |
| | All applicants to tick that they have read the applicable statutory guidance and conditions | |
| 15.1 | Hiring Out Horses | |

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| 16 | Standard Operating Procedures (SOP) | |
| | See guidance attached from the City of London referenced by the number in the second column. | |
| | Please attach the following documents with your application | |
| 16.1 | 4.3 Staff Training Policy | |
| 16.2 | 5.5 Cleaning & Hygiene SOP | |
| 16.3 | 6.1 Feeding & Diet SOP | |
| 16.4 | 7.5 Immature Animal Opportunities SOP | |
| 16.5 | 8.2 Separation/Grouping of horses Policy | |
| 16.6 | 9.1 i) feeding regimes | |
| | 9.1 ii) cleaning regimes | |
| | 9.1 iii) transportation | |

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| 16 | Standard Operating Procedures (SOP) See guidance attached from the City of London referenced by the number in the second column. | |
| | Please attach the following documents with your application | |
| | 9.1 iv) prevention of & control of spread of disease | |
| | 9.1 v) monitoring and ensuring health and welfare of animals | |
| | 9.1 vi) death of escape of animal | |
| 16.7 | 9.3 Biosecurity Plan & Isolation Plan | |
| 16.8 | 9.4 Procedures & Preventive Plan for infectious diseases, pathogens & parasites | |
| 16.9 | 9.7 Preventive Treatment/Vaccination Plan | |
| 16.10 | 10.1 & 10.2 Written Emergency Plan – see attached guidance | |
| 16.11 | 6.1 Management & Care programme | |
| 16.12 | 6.2 Preventive Healthcare Plan | |
| N.B. Records that will be examined by the Inspecting Officer are also outlined in the attached guidance. | | |

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| 17 | Additional Information | |
| | Please attach the following Information | |
| 17.1 | A plan of the premises | |
| 17.2 | Insurance policy (minimum £5million) | |
| 17.3 | Other Qualifications not listed above | |
| 17.4 | Training records | |

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| 18 | Declaration | |
| 18.1 | This section must be completed by the applicant. If you are an agent, please ensure this section is completed by the applicant. | |
| 18.2 | <p>I am aware of the provisions of the relevant Act, Regulations and Statutory Guidance. The details contained in the application form and any attached documentation are correct to the best of my knowledge and belief.</p> <p>I understand that a person authorised by the Council will inspect the premises before a licence is issued. I understand that a person authorised by the council may inspect the premises either by appointment or unannounced at any reasonable time.</p> <p>I understand that a person authorised by the council may take photographs or video footage whilst carrying out inspections or visits to the premises.</p> <p>I am aware that a fee is payable for this licence application.</p> <p>I accept that all veterinary fees incurred by the authority in respect to the licence application will be recoverable at cost.</p> <p>I accept that in the event of my application being refused I withdrawn it, I will not be refunded the application fee or any part thereof under any circumstances.</p> <p>I apply under the above legislation for a licence to carry on the activity of Hiring Out Horses at the above premises.</p> <p>I accept that on occasion the council has to provide information to third parties in response to requests made under the Environmental Information Regulations 2004, Data Protection Act 1998 and Freedom of Information Acts.</p> | |
| 18.3 | Ticking this box indicates you have read and understood the above declaration | |

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| 18.4 | Signature | |
| 18.5 | Full Name | |
| 18.6 | Capacity/Position of Signatory | |
| 18.7 | Date | |