



Woking Borough Council
Civic Offices, Gloucester Square, Woking, Surrey, GU21 6YL

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

Hiring out horses

Standard applicant profile payment and declaration

| | | |
|----------|-------------------------|--|
| 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"

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

| | | | | | |
|----------|---|-----|--|----|--|
| 3 | Applicant details | | | | |
| 3.1 | Name | | | | |
| 3.2 | Address | | | | |
| 3.3 | Date of birth | | | | |
| 3.4 | Email | | | | |
| 3.5 | Main telephone number | | | | |
| 3.6 | Other telephone number | | | | |
| 3.7 | Applying as a business or organisation, including a sole trader | Yes | | No | |
| 3.8 | 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 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 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 | | | | |

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| 5 | Payment |
| 5.1 | Payment must be made at the time of making the application |
| 5.2 | Upon receipt of your application form, an officer will contact you in order to take payment of the application fee. Alternatively, you can pay the application fee by calling the office on 01483 743 664 . All payments can be made via debit or credit card. |

| | | |
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| 6 | Model licence conditions and guidance | |
| | All applicants to tick that they have read the applicable model licence conditions and guidance | |
| 6.1 | Pet vending | |
| 6.2 | Animal boarding | |
| 6.3 | Performing animals | |
| 6.4 | Riding establishments | |
| 6.5 | The breeding and sale of dogs | |

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| 7 | Additional Information | |
| | To confirm that you have the following information available, to be checked at the time of inspection or indicate you have attached. | |
| 7.1 | A plan of the premises | |
| 7.2 | Insurance policy | |
| 7.3 | Operating procedures | |
| 7.4 | Risk assessments (including fire) | |
| 7.5 | Infection control procedure | |
| 7.6 | Qualifications / training policy | |
| 7.7 | Client booking / registration / consent forms | |

| | | |
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| 8 | Declaration | |
| 8.1 | This section must be completed by the applicant. If you are an agent please ensure this section is completed by the applicant. | |
| 8.2 | 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. | |
| 8.3 | Ticking this box indicates you have read and understood the above declaration | |
| 8.4 | Full name | |
| 8.5 | Capacity | |
| 8.6 | Date | |

| | | |
|----------|---|--|
| 9 | Standard declaration and signature section | |
| | Sign:----- Date: ----- | |



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

Licence application for hiring out horses

| | |
|----------|---|
| 1 | Standard applicant profile section |
|----------|---|

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

| | | | | | | |
|----------|----------------------------|-----|--|---------|--|-------------------|
| 2 | Type of application | | | | | |
| 2.1 | Type of application | New | | Renewal | | If new, go to 2.3 |
| 2.2 | Existing licence number | | | | | |

| | | | | | | |
|----------|--|--------|----------|--|--|--|
| 3 | Establishment to be licensed | | | | | |
| 3.1 | Name of premises / trading name | | | | | |
| 3.2 | Address of premises | | | | | |
| 3.3 | Telephone number | | | | | |
| 3.4 | Email address | | | | | |
| 3.5 | Is the establishment open throughout the year? | | Yes / No | | | |
| 3.6 | When is it normally open? | | | | | |
| 3.7 | Do you have planning permission for this business use? | Yes/No | | | | |

| | | | | | | |
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| 4 | Accommodation and facilities | | | | | |
| Please describe the accommodation/facilities available for horses: | | | | | | |
| 4.1 | Stalls / stables, please give the number | | | | | |
| 4.2 | Covered yard, please give dimensions | | | | | |

| | | |
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| 4.3 | Open yard, please give dimensions | |
| Please describe the land available for: | | |
| 4.4 | Grazing | |
| 4.5 | Instructing or demonstrating | |
| 4.6 | Exercise | |
| Please describe the storage facilities available for: | | |
| 4.7 | Forage and bedding | |
| 4.8 | Equipment and saddlery | |
| Please describe the arrangements in place for: | | |
| 4.9 | Water supply and watering horses | |
| 4.10 | Disposal of animal waste | |
| 4.11 | Protection of horses in event of a fire, and fire precautions | |

| 5 Management of the establishment | |
|--|--|
| 5.1 | Name and 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 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? (Attach plan if necessary) |
| 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 |

| 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 | If no, go to question 7.9 |
| | If yes, please provide details of the policy | | |
| 7.2 | Insurance company | | |
| 7.3 | Policy number | | |
| 7.4 | Period of cover | | |
| 7.5 | Amount of cover (£m) | | |
| | Does this policy: | | |
| 7.6 | 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 | If yes to all, go to 8.1 |
| 7.7 | Insure against liability arising out of such hire or use of a horse? | Yes / No | |
| 7.8 | 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 | |
| 7.9 | 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 | |

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|-----------|---|
| 10 | Standard declaration and signature section Sign:----- Date: ----- |
|-----------|---|

Please continue to section 11

| | |
|-----------|---------------|
| 11 | Horses |
|-----------|---------------|

| | | |
|-------|--|--|
| 11.1 | How many horses are kept under the terms of the Act at the present time? | |
| 11.2 | How many horses is it intended to keep under the terms of the Act during the year? | |
| 11.3 | Name of horse | |
| 11.4 | Description including size | |
| 11.5 | Sex | |
| 11.6 | Age | |
| 11.7 | Horse passport number | |
| 11.8 | Purpose for which horse is kept | |
| 11.9 | Schedule of use (Hours per day / week and rest days) | |
| 11.10 | Shoe O / F / R / All round | |
| 11.11 | Microchip number | |

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Please print or copy this section if you have additional horses.

Download this application form, complete and send it to: Environmental Health, Woking Borough Council, Civic Offices, Gloucester Square, Woking GU21 6YL.