

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

**Application for a licence to operate a riding establishment**

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| **1** | **To Eastleigh Borough Council****I/We.......................................................................................................................................****Of..........................................................................................................................................****hereby apply for a Licence to operate a Riding Establishment at the following premises: .............................................................................................................................** |  |
| Surname (BLOCK CAPITALS) First Name (BLOCK CAPITALS)----------------------------------------- --------------------------------------------Surname (BLOCK CAPITALS) First Name (BLOCK CAPITALS)----------------------------------------- --------------------------------------------State whether Mr, Mrs or Miss Age if under 18 |
| Private address (or, if a Company/Partnership, name of body and address of RegisteredOffice)………………………………………………………………………………………………………………….Telephone Number…………………………………………………………………………………….…….Email address………………………………………………………………………………………………… |

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 |  |  |
|  | **Further information about the applicant** |  |
| 2.3 | Date of birth |  |  |

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| **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 available for horses:** |  |
| 4.1 | Stalls (please give the number) |  |  |
| 4.2 | Boxes (please give the number) |  |  |
| 4.3 | Covered yard (please give dimensions) |  |  |
| 4.4 | Open yard (please give dimensions) |  |  |
|  | **Please describe the land available for:** |  |
| 4.5 | Grazing |  |  |
| 4.6 | Instructing or demonstrating |  |  |
| 4.7 | Exercise |  |  |
|  | **Please describe the accommodation available for:** |  |
| 4.8 | Forage and bedding |  |  |
| 4.9 | Equipment and saddlery |  |  |
|  | **Please describe the arrangements in place for:** |  |
| 4.10 | Water supply and watering horses |  |  |
| 4.11 | Disposal of animal waste |  |  |
| 4.12 | Protection of horses in event of a fire, and fire precautions |  |  |

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| **5** | **Horses** |  |
| 5.1 | How many horses are kept under the terms of the Act at the present time? |  |  |
| 5.2 | 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** |  |
| 5.3 | Name of horse |  |  |
| 5.4 | Description including size |  |  |
| 5.5 | Sex |  |  |
| 5.6 | Age |  |  |
| 5.7 | Horse passport number |  |  |
| 5.8 | Purpose for which horse is kept |  |  |
| 5.9 | Age range of people who ride this horse |  |  |
| 5.10 | Add another horse? | Yes/No | If yes, continue on a separate sheet |  |

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| **6** | **Management of the establishment** |  |
| 6.1 | Name & Address of the manager/person with direct control of the establishment |  |  |
| 6.2 | 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 |  |  |
| 6.3 | Please give details of the manager’s experience in the management of horses |  |  |
| 6.4 | Does a responsible person live at the establishment?  | Yes / No |  |  |
| 6.5 | What are the arrangements in the event of an emergency? |  |  |
| 6.6 | Will a person who is under 16 years of age be left in charge of the establishment at any time? | Yes / No |  |
| 6.7 | 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 |  |

| **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 |  |  |

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| **8** | **Public liability insurance** |  |
| 8.1 | Do you have public liability insurance? | Yes / No | If no, go to question 8.9 |  |
|  | If yes, please provide details of the policy |  |
| 8.2 | Insurance company |  |  |
| 8.3 | Policy number |  |  |
| 8.4 | Period of cover |  |  |
| 8.5 | Amount of cover (£m) |  |  |
|  | **Does this policy:** |  |
| 8.6 | 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 9.1 |  |
| 8.7 | Insure against liability arising out of such hire or use of a horse? | Yes / No |  |
| 8.8 | 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 |  |
| 8.9 | Please state what steps you are taking to obtain such insurance |  |  |

| **9** | **Disqualifications and convictions** |  |
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|  | Has the applicant, or any person who will have control or management of the establishment, ever been disqualified from: |  |
| 9.1 | Keeping a pet shop?  | Yes / No |  |  |
| 9.2 | Keeping a dog?  | Yes / No |  |
| 9.3 | Keeping an animal boarding establishment? | Yes / No |  |
| 9.4 | Keeping a riding establishment?  | Yes/No |  |
| 9.5 | Having custody of animals?  | Yes/No |  |
| 9.6 | 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 |  |  |
| 9.7 | 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 |  |  |
| 9.8 | If yes to any of these questions Please provide details,  |  |  |

| **10** | **Additional details** |  |
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|  | Please check local guidance notes and conditions for any additional information which may be required |  |
| 10.1 | Additional information which is required or may be relevant to the application |  |  |

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| **11** | Normal times of attendance at the premises when premises are closed: ………………………………………………………………………………………………………………….**(Read the following statement carefully before signing it. A false statement may render you liable to prosecution.)**I/WE DO HEREBY CERTIFY that to the best of my/our knowledge and belief, the above particulars are true.\*Signature…………………………………………………………………………Date…………………….Signature………………………………………………………………………….Date…………………….. \*If the applicant signs on behalf of a Company or Partnership, state appointment held …………………………………………………………………………………………………………………. NOTE: In addition to the application and licence fee a charge will be made to cover the cost of veterinary inspection.Eastleigh Borough Council is committed to your privacy. We will use the information on this form for the purposes of processing, assessing and awarding your licence. Please refer to our full Privacy Notice at [www.eastleigh.gov.uk/privacy](http://www.eastleigh.gov.uk/privacy) |  |