



DANGEROUS WILD ANIMAL PROCEDURE NOTES

- Fill the application form in and send to your nearest Licensing Department (office addresses detailed below).
- Enclose fee of £120 (this does not include the veterinary surgeon's fee for the required inspection).
- An acknowledgement letter and receipt of payment will then be issued.
- You will then be contacted by a Veterinary Surgeon to arrange the necessary inspection.
- Once the Council have received the report and invoice from the Veterinary Surgeon you will then be sent a letter requesting the outstanding vets fee.
- On receipt of this fee and providing everything is satisfactory the licence will then be issued.

Licensing Office Addresses				
Central Licensing Shirehall Abbey Foregate Shrewsbury SY2 6ND	North Licensing Edinburgh House New Street Wem SY4 5DB	North Licensing Castle View Oswestry SY11 1JR	South Licensing Westgate Bridgnorth WV16 5AA	South Licensing Stone House Corve Street Ludlow SY8 1DG

APPLICATION FOR A DANGEROUS WILD ANIMALS LICENCE

Dangerous Wild Animals Act 1976

Name:	
Address:	Postcode:
Telephone No:	
Address of premises at which the animal(s) will normally be held (if not as detailed above):	Postcode:
Specify species and number of each animal kept or proposed to be kept on the premises:	
Do you own and possess the animal(s) detailed above?	Yes <input type="checkbox"/> No <input type="checkbox"/> If no, please give further details:
Are you disqualified from keeping: <ol style="list-style-type: none"> 1. Any dangerous wild animal 2. A dog 3. A pet shop 4. Any animal boarding establishment 5. A riding establishment 6. A dog breeding establishment 	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you disqualified from having custody of animals?	Yes <input type="checkbox"/> No <input type="checkbox"/>

<p>Do you have a current Insurance Policy that insures you against liability for any damage caused by the animal(s) detailed above?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If Yes, please include a copy of your insurance certificate with this application. <input type="checkbox"/></p> <p>If No, please give details on what steps you are taking to obtain such insurance:</p>
<p>Description and dimensions of accommodation to be used:</p>	
<p>Arrangements for drainage:</p>	
<p>Arrangements for ventilation:</p>	
<p>Arrangements for heating:</p>	
<p>Arrangements to be made for the provision, storage and preparation of food</p>	
<p>Please explain what facilities are available for the exercising of the animal(s)</p>	
<p>Please show what arrangements you have made for the veterinary care of the animals and include preventative measures against accident and injury</p>	
<p>What measures have you taken, or will you be taking, to ensure the safety of the animal(s) in the event of fire or other type of emergency?</p>	
<ul style="list-style-type: none"> I agree to allow an Officer, Veterinary Surgeon or Veterinary Practitioner authorised by the Council to inspect the premises which are the subject of this application before any licence is granted. 	

- I certify that I am over the age of 18 years.
- I enclose the required fee as detailed below.
- I apply for this licence to take effect from the date of issue/1st January (delete as appropriate).
(Licences run from the date of issue to 31st December or 1st January to 31st December each year).

SIGNATURE

DATE

The current fee is £120 plus Veterinary Surgeons fee (Cheques made payable to Shropshire Council)

This Authority is under a duty to protect the public funds it administers and to this end may use the information you have provided on this form within this Authority for the prevention and detection of fraud. The Authority may also share this information with other bodies administering public funds for these purposes.

Please return the completed form to the address below:

**Licensing Department
Shropshire Council
Shirehall
Abbey Foregate
Shrewsbury
SY2 6ND**

FOR OFFICIAL USE ONLY

ORDER NO:

Date of Inspection

Recommendation

.....

Date reported to Council, and Decision.....

No. of Licence issued

Entered in Register:

Date:

Ref: