|  |
| --- |
| **Official Use Only** |
| Fee |  |
| On-Line Receipt No. |  |
| C&D Receipt No. |  |
| Licence No. |  |

**Customer Use**

On-line Receipt No.

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

# Application for a licence to hire out horses

This form should be completed and forwarded to London Borough of Tower Hamlets Environmental Health Department, with a cheque or postal order for the fee due made payable to the London Borough of Tower Hamlets and crossed.

Please complete all the questions in the form.

If you have nothing to record, please state "Not applicable" or "None"

## Reference number

|  |  |  |
| --- | --- | --- |
| 1.1 | System reference Number (if known) |  |
| 1.2 | Your reference (if known) |  |

## Agent

|  |  |  |  |
| --- | --- | --- | --- |
| 2.1 | Are you an agent acting on behalf of the applicant | Yes/ No (**If no, go to 4.1)** |  |

## Further information about the Agent

|  |  |  |
| --- | --- | --- |
| 3.1 |  | Name |
| 3.2 |  | Address  |
| 3.3 |  | Email |
| 3.4 |  | Main telephone number  |
| 3.5 |  | Other telephone number |

## Applicant details

|  |  |  |
| --- | --- | --- |
| 4.1 | Name |  |
| 4.2 | Date of birth |  |
| 4.3 | Address  |  |
| 4.4 | Email |  |
| 4.5 | Main telephone number  |  |
| 4.6 | Other telephone number |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 4.7 | Are you applying as a business or organisation, including a sole trader | Yes/No |  |
| 4.8 | Are you applying as an individual  | Yes/No |  |

## Applicant Business

|  |  |  |  |
| --- | --- | --- | --- |
| 5.1 | Is your company registered with companies house | Yes/ No (**If no, go to 5.3)** |  |

|  |  |  |
| --- | --- | --- |
| 5.2 | Registration Number |  |
| 5.3 | Is your business registered outside the UK  |  |
| 5.4 | VAT Number  |  |
| 5.5 | Legal status of the business |  |
| 5.6 | Your position in the business |  |
| 5.7 | The country where your head office is located.  |  |

## Business Address – This should be your official address – The address required of you by law to receive all communication

|  |  |  |
| --- | --- | --- |
| 5.8 | Building name or number |  |
| 5.9 | Street |  |
| 5.10 | District |  |
| 5.11 | City or Town |  |
| 5.12 | County or administrative area |  |
| 5.13 | Post Code |  |
| 5.14 | Country |  |

## Type of Application

|  |  |  |  |
| --- | --- | --- | --- |
| 6.1 | Type of Application | New/ Renewal |  |

|  |  |  |
| --- | --- | --- |
| 6.2 | Existing licence number |  |

## Premises to be licensed

|  |  |  |
| --- | --- | --- |
| 7.1 | Name of premises/trading name |  |
| 7.2 | Address of premises |  |
| 7.3 | Telephone number of premises |  |
| 7.4 | Email address |  |
| 7.5 | When is it normally open? |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 7.6 | Do you have planning permission for this business use. | Yes/No |  |
| 7.7 | Is the establishment open throughout the year? | Yes/No |  |

## Accommodation and facilities

Please describe the accommodation available for horses:

|  |  |  |
| --- | --- | --- |
| 8.1 | Stalls (please give the number) |  |
| 8.2 | Boxes (please give the number) |  |
| 8.3 | Covered yard (please give dimensions) |  |
| 8.4 | Open yard (please give dimensions) |  |

Please describe the land available for:

|  |  |  |
| --- | --- | --- |
| 9.1 | Grazing |  |
| 9.2 | Instructing or demonstrating |  |
| 9.3 | Exercise |  |

Please describe the accommodation available for:

|  |  |  |
| --- | --- | --- |
| 9.4 | Forage and bedding |  |
| 9.5 | Equipment and saddlery |  |

Please describe the arrangements in place for:

|  |  |  |
| --- | --- | --- |
| 9.6 | Water supply and watering horses |  |
| 9.7 | Disposal of animal waste |  |
| 9.8 | Protection of horses in event of a fire, and fire precautions |  |

## Horses

|  |  |  |
| --- | --- | --- |
| 10.1 | How many horses are kept under the terms of the Act at the present time? |  |
| 10.2 | 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**

**Horse 1:**

|  |  |  |
| --- | --- | --- |
| 11.1 | Name of horse |  |
| 11.2 | Description including size |  |
| 11.3 | Sex |  |
| 11.4 | Age |  |
| 11.5 | Horse passport number |  |
| 11.6 | Purpose for which horse is kept |  |
| 11.7 | Age range of people who ride this horse |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 11.8 | Add another horse? (If no, go to 12.1) | Yes/No |  |

**Horse 2:**

|  |  |  |
| --- | --- | --- |
| 11.9 | Name of horse |  |
| 11.10 | Description including size |  |
| 11.11 | Sex |  |
| 11.12 | Age |  |
| 11.13 | Horse passport number |  |
| 11.14 | Purpose for which horse is kept |  |
| 11.15 | Age range of people who ride this horse |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 11.16 | Add another horse? (If no, go to 12.1) | Yes/No |  |

**Horse 3:**

|  |  |  |
| --- | --- | --- |
| 11.17 | Name of horse |  |
| 11.18 | Description including size |  |
| 11.19 | Sex |  |
| 11.20 | Age |  |
| 11.21 | Horse passport number |  |
| 11.22 | Purpose for which horse is kept |  |
| 11.23 | Age range of people who ride this horse |  |

|  |  |
| --- | --- |
| 11.24 | If you intend to hire out further horses please attach a separate list of these with the information requested in questions 11.1 to 11.7 for each. |

## Management of the establishment

|  |  |  |
| --- | --- | --- |
| 12.1 | Name & Address of the manager/person with direct control of the establishment  |  |

Does the manager have any of the following certificates? (tick all that apply)

|  |  |  |
| --- | --- | --- |
| 12.2 | Assistant Instructor’s Certificate of the British Horse Society |  |
| 12.3 | Intermediate Instructor’s Certificate of the British Horse Society |  |
| 12.4 | Instructor’s Certificate of the British Horse Society |  |
| 12.5 | Fellowship of the British Horse Society |  |
| 12.6 | Fellowship of the Institute of the Horse |  |
| 12.7 | None of the above |  |

|  |  |  |
| --- | --- | --- |
| 12.8 | Please give details of the manager’s experience in the management of horses |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 12.9 | Does a responsible person live at the establishment? | Yes/No |  |
| 12.10 | What are the arrangements in the event of an emergency? | Yes/No |  |
| 12.11 | Will a person who is under 16 years of age be left in charge of the establishment at any time? | Yes/No |  |
| 12.12 | 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 |  |

## Veterinary surgeon

|  |  |  |
| --- | --- | --- |
| 13.1 | Name of usual veterinary surgeon  |  |
| 13.2 | Company name |  |
| 13.3 | Address |  |
| 13.4 | Telephone number |  |
| 13.5 | Email address |  |

## Public liability insurance

|  |  |  |  |
| --- | --- | --- | --- |
| 14.1 | Do you have public liability insurance? | Yes/No (If no, go to 14.10) |  |

|  |  |  |
| --- | --- | --- |
| 14.2 | Please provide details of the policy |  |
| 14.3 | Insurance company |  |
| 14.4 | Policy number |  |
| 14.5 | Period of cover |  |
| 14.6 | Amount of cover (£) |  |

Does this policy:

|  |  |  |  |
| --- | --- | --- | --- |
| 14.7 | 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? | Yes/No |  |
| 14.8 | Insure against liability arising out of such hire or use of a horse? | Yes/No |  |
| 14.9 | 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 |  |
|  | If yes to all, go to 15.1 |  |  |

|  |  |  |
| --- | --- | --- |
| 14.10 | Please state what steps you are taking to obtain such insurance |  |

**Disqualifications and convictions:**

Has the applicant, or any person who will have control or management of the establishment, ever been disqualified from:

|  |  |  |  |
| --- | --- | --- | --- |
| 15.1 | Keeping a pet shop?  | Yes/No |  |
| 15.2 | Keeping a dog?  | Yes/No |  |
| 15.3 | Keeping an animal boarding establishment? | Yes/No |  |
| 15.4 | Keeping a riding establishment?  | Yes/No |  |
| 15.5 | Having custody of animals?  | Yes/No |  |
| 15.6 | 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 |  |
| 15.7 | 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 |  |

|  |  |  |
| --- | --- | --- |
| 15.8 | If yes to any of these questions, please provide details, |  |

**Additional details**

Please check local guidance notes and conditions for any additional information which may be required

|  |  |  |
| --- | --- | --- |
| 16.1 | Additional information which is required or may be relevant to the application |  |

# Standard declaration section

## Model Licence Conditions & Guidance

All applicants to tick that they have read the applicable model licence conditions & guidance

|  |  |  |
| --- | --- | --- |
| 17.1 | Pet Vending |  |
| 17.2 | Animal Boarding |  |
| 17.3 | Performing Animals |  |
| 17.4 | Riding Establishments |  |
| 17.5 | The Breeding and Sale of Dogs |  |

## Additional Information

Please attach the following Information

|  |  |  |
| --- | --- | --- |
| 18.1 | A plan of the premises |  |
| 18.2 | Insurance policy |  |
| 18.3 | Operating procedures |  |
| 18.4 | Risk Assessments (including Fire) |  |
| 18.5 | Infection control procedure  |  |
| 18.6 | Qualifications  |  |
| 18.7 | Training records |  |

## Declaration

This section must be completed by the applicant. If you are an agent please ensure this section is completed by the applicant.

|  |  |  |
| --- | --- | --- |
| 19.1 | 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.  |  |
| 19.2 | Signing this box indicates you have read and understood the above declaration |  |
| 19.3 | Full Name |  |
| 19.4 | Capacity  |  |
| 19.5 | Date |  |

Address to which licence application or correspondence should be sent:

**Mr T Lewis**

**Environmental Health and Trading Standards**

**4th Floor Tower Hamlets Town Hall**

**160 Whitechapel Road**

**London E1 1BJ**

**Environmental Health and Trading Standards Privacy Notice**

## Data Controller and Purpose

The information you provide will be used by the London Borough of Tower Hamlets’ Environmental Health and Trading Standards Service, to process your complaint/objection/application.

Tower Hamlets Council is the Data Controller.

We process your data in accordance with the General Data Protection Regulation (GDPR) and if you have any concerns the Council’s Data Protection Officer can be contacted on DPO@towerhamlets.gov.uk

## Condition for Processing Personal Data

It is necessary for us to process your personal data (name, address, contact details), as a task carried out in the public interest, and more personal data such as health, personal and household circumstances as necessary for substantial public interest reasons, to assess and prioritise in compliance with a legal obligation or social protection law,

A delay in you providing the information requested may result in a delay in providing appropriate services.

## How long do we keep your information?

We will only hold your information for as long as is required by law and to provide you with the necessary services. This is likely to be for six years after the case is closed. For further details, you can view our retention schedule.

We may also anonymise some personal data you provide to us to ensure that you cannot be identified and use this for statistical analysis of data to allow the council to effectively target and plan the provision of services.

## Information sharing

Your personal information may be shared with internal departments or with external partners and agencies involved in delivering services on our behalf.

The Council has a duty to protect public funds and may use personal information and data-matching techniques to detect and prevent fraud, and ensure public money is targeted and spent in the most appropriate and cost-effective way. Information may be shared with internal services and external bodies like the Audit Commission, Department for Work and Pensions, other local authorities, HM Revenue and Customs, and the Police. This activity is carried out under Article 9(2)(b) of the GDPR, under social protection law.

We have a duty to improve the health of the population we serve. To help with this, we use data and information from a range of sources including hospitals to understand more about the nature and causes of disease and ill-health in the area. This data would normally be anonymised and never used to make decisions on a specific individual or family.

**We will not transfer your data to non EEA territory and there are no automated decisions made with your data.**

## Your Rights

You can find out more about your rights on our Data Protection Page and how to complain to the Information Commissioner.