

# SHETLAND ISLANDS COUNCIL

## THE PET AMINALS ACT 1951

### APPLICATION FOR THE GRANT/RENEWAL OF A PET SHOP LICENCE

The form should be completed using BLOCK CAPITAL LETTERS. Should you need assistance in completing it, please contact the Environmental Health Department, Old Anderson High School, Lovers Loan, Lerwick, Shetland, ZE1 0BA. Telephone: Lerwick 745250. Fax: Lerwick 744802.

When you have completed the form please send it to Environmental Health at the address given above, along with the **application fee of £167.33** (The fee referred to is correct at 1 April 2019, and may be subject to subsequent change).

### Answer Question 1 OR 2 and ALL other questions

<b>1 To be completed if applicant is an individual (do not complete section 2 if you fill in this section)</b>			
	Title	Surname	First Name(s)
(a) Full Name			
(b) Home Address Business Address			
(c) Telephone Number Day: Evening: Mobile:			
(d) Email Address			
(e) Age, Date and Place of Birth	Age	Date of Birth	Place of Birth
(f) Are you as the applicant going to carry out the day-to-day management of the business?  If no, give full name, address and date of birth of any employee or agent so engaged	YES/NO*		



<p><b>4</b> Keyholders' names and contact telephone numbers.</p>																	
<p><b>5</b> Description of premises</p> <p>(a) Number and size of rooms in which animals will be accommodated</p> <p>(b) Heating arrangements</p> <p>(c) Lighting arrangements</p> <p>(d) Method of ventilation</p> <p>(e) Water supply</p> <p>(f) Animal feed storage facilities</p> <p>(g) Waste disposal arrangements</p> <p>(h) Fire fighting arrangements</p> <p>(i) Emergency arrangements</p> <p>(Please supply supporting documentation where available or continue on additional sheet)</p>																	
<p><b>6</b> Days of the week and the hours during each day when it is proposed the premises will be open.</p>	<table border="0"> <thead> <tr> <th style="text-align: left;">Days of Week</th> <th style="text-align: left;">Hours</th> </tr> </thead> <tbody> <tr> <td>Monday</td> <td>Between ..... &amp; .....</td> </tr> <tr> <td>Tuesday</td> <td>Between ..... &amp; .....</td> </tr> <tr> <td>Wednesday</td> <td>Between ..... &amp; .....</td> </tr> <tr> <td>Thursday</td> <td>Between ..... &amp; .....</td> </tr> <tr> <td>Friday</td> <td>Between ..... &amp; .....</td> </tr> <tr> <td>Saturday</td> <td>Between ..... &amp; .....</td> </tr> <tr> <td>Sunday</td> <td>Between ..... &amp; .....</td> </tr> </tbody> </table>	Days of Week	Hours	Monday	Between ..... & .....	Tuesday	Between ..... & .....	Wednesday	Between ..... & .....	Thursday	Between ..... & .....	Friday	Between ..... & .....	Saturday	Between ..... & .....	Sunday	Between ..... & .....
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<p><b>7</b> Nature and number of pets in which it is proposed to trade.</p> <p>(Please remember that if your application is granted you must also comply with The Dangerous Wild Animals Act 1976 and The Endangered Species (Import and Export) Act 1976 if you intend to keep or sell any of the animals covered by these acts.)</p> <p>(Continue on additional sheet if necessary)</p>	
<p><b>8</b> Length and nature of experience in pet animal trade of the:</p> <p>(a) Applicant</p> <p>(b) Directors, partners or other persons responsible for the day-to-day management of the business</p> <p>(c) Employee or agent employed to carry out the day-to-day management of the business.</p>	
<p><b>9</b> Number of staff employed.</p>	
<p><b>10</b> Training arrangements and/or qualifications of staff members in relation to the care and welfare of animals.</p> <p>Where any exotic species is stocked please detail the specific training received.</p>	

<p><b>11</b> Has any party named in 1 or 2 above ever been convicted for an offence under the Protection of Animals Act 1911, the Protection of Animals (Scotland) Act 1912, or the Pet Animals Act 1951? If yes, subject to the provisions of the Rehabilitation of Offenders Act 1974, give particulars below. <b>If no, please write none below.</b></p>			
Date	Court	Offence	Sentence

<p><b>12 (a)</b> Has any party named in 1 or 2 above previously held or currently hold a pet shop licence</p> <p>If yes, please give details when the licence was granted, when it did/does expire, which Authority granted it, and what the Licence Number is/was?</p>	<p>YES/NO</p>
<p><b>(b)</b> Has any party named in 1 or 2 above ever been refused a pet shop licence or had their licence suspended or revoked?</p> <p>If yes, when and which Authority refused, suspended or revoked the Licence and what was the Licence Number?</p>	<p>YES/NO</p>
<p><b>(c)</b> Is any party named in 1 or 2 above disqualified or ever been disqualified from keeping or having the custody of animals.</p> <p>If yes please give details of the circumstances.</p>	<p>YES/NO</p>

I declare that the particulars given by me on this form are correct to the best of my knowledge and belief. I hereby make application to the Council for the granting/renewal\* of a Pet Shop licence. I have received and read the general conditions relating to the licensing of Pet Shops. I enclose the appropriate application fee.

Signature ..... Date .....  
 (Signature of Applicant or Agent)

Print Name .....

On behalf of .....  
 (Complete where you are applying on behalf of a Company or Partnership)

Position .....  
 (Position of applicant in Company or Partnership if not otherwise stated)

**Data Protection:**

The information you have provided will be used by Shetland Islands Council to process your application and to maintain a register. The Council may share your information with third parties in order to check its accuracy, prevent and detect fraud or protect public funds. We may also share the information provided and other relevant information we hold about you between Council departments and others where this is necessary or expedient for the

purposes of the Act or as otherwise required by law. You can request access to any personal information held about you by the Council by writing to the Head of Governance and Law, Legal Department, 8 North Ness Business Park, Lerwick, Shetland.

This form is to be lodged with Environmental Health, Old Anderson High School, Lovers Loan, Lerwick, Shetland, ZE1 0BA, together with the appropriate application fee. Please note the fee is an application fee; it will not be refunded in the event of the licence application being either withdrawn or refused.

\* Delete as appropriate