Malvern Hills District Council

APPLICATION FOR LICENCE TO KEEP DANGEROUS WILD ANIMAL(S)

DANGEROUS WILD ANIMALS ACT 1916/MODIFICATION ORDER 1981 & 1984

Applicant's Name: _____

Address: _____

_____ Postcode: _____ Telephone No: _____

Address of Premises where animal(s) is/are to be kept: _____

_____ Postcode: _____

Species of Animal(s) to be kept [1]: _____

_____

Numbers to be kept: Male: _____ Female: _____ Total: _____

1. Is it intended to breed or attempt to breed from these animals? Yes ☐ No ☐ *(please tick)*
2. Description and dimensions of accommodation to be used: _____

_____

_____

3. Description of type of food to be supplied and source: _____

_____

_____

4. Details of Insurance Policy held to cover liability for damage caused by the animal(s) [2]:

   Company: _____

   Policy No: _____ Expiry Date: _____ Amount: _____

I HEREBY DECLARE that I am over 18 years of age and not disqualified by being convicted of any offence at any time under the Protection of Animals Act 1911 to 1964, the Protection of Animals (Scotland) Act 1912, the Pet Animals Act 1951, the Animal Boarding Establishment Act 1963, the Riding Establishments Act 1964 and 1970 or the Breeding of Dogs Act 1973.

I APPLY for a Licence under the Dangerous Wild Animals Act 1976 in respect of which I enclose the fee of [3]:£ _____

Dated: _____ Signed [4] _____ _____

Please return the completed form to:
Environmental Services, Malvern Hills District Council, Council House, Avenue Road, Malvern WR14 2AZ

Tel: 01684 862151 / Fax: 01684 574906 / Minicom: 01684 862186

[1] Give scientific name if possible

[2] This Policy must be produced to an inspecting officer's if required

[3] The fee is such as, in the authority's opinion, is sufficient to meet the direct & indirect costs which they may incur as a result of this application.

[4] Indicate capacity if signing on behalf of a company or partnership

FOR OFFICE USE ONLY Date of Inspection: _____

Recommendation: _____

Date reported to Committee/Council and decision: _____

No. of Licence issued: _____ Entered in Register: Date _____ Fo _____