

**Falkirk Council** For help contact

**Animal Boarding Establishments Act 1963**  [envhealth@falkirk.gov.uk](mailto:envhealth@falkirk.gov.uk)

**Application to renew the licence** Telephone: 01324 504982

**Home Boarders**

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| **Licence Holders Details** |
| **Name**  First Name    Family Name  **Contact Details**  Address  Address  Address  Post Code  E-Mail  Telephone Number |

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| **Premises where Animals will be Kept** |
| Name of premises/trading name  Address  Address  Address  Post Code  E-Mail  Telephone Number  **Contact Details of Person Responsible for Managing the Premises**  Name  E-Mail Address  Telephone Number |
| **Accommodation and Facilities** |
| If there has been any alterations made to the premises or changes in the facilities provided, please enter the details in the box below. |
| **Veterinary Surgeon** |
| **Usual veterinary Practice**  Name  Address  Address  Address  Post Code  **Contact Details**  Name  E-Mail Address  Telephone Number |
| **Emergency Key Holder** |
| Name  Address  Address  Address  Post Code  E-Mail  Telephone Number |
| **Disqualifications and Convictions** |
| Has the person who will manage the establishment ever been disqualified from?  (a) Keeping a Riding Establishment? Yes/No  (b) Keeping a Dog? Yes/No  (c) Keeping a Pet Shop? Yes/No  (d) Having the Custody of Animals? Yes/No  (e) Keeping a Boarding Establishment for Animals? Yes/No  (f) Keeping a Breeding Establishment? Yes/No    Has the person who will manage the establishment been convicted of any offences under Animal Welfare of Wildlife Legislation? Yes/No  Has the person who will manage the establishment ever had a licence refused, revoked or cancelled? Yes/No |
| **Authority Postal Address and E-Mail Address** |
| Falkirk Council  Place Services  Suite 1B, Falkirk Stadium  4 Stadium Way  FK2 9EE  [envhealth@falkirk.gov.uk](mailto:envhealth@falkirk.gov.uk) |

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| **Declaration** |
| I am aware of the provisions of the Animal Boarding Establishment Act 1963. The details contained in this form are correct to the best of my knowledge and belief.  Signed  Print Name  Date |