

**Licence to keep a  
Pet Shop**

**Please complete all sections using capital letters**

Full names of each applicant	Mr/Mrs/Miss/Other	
Correspondence address		
	Postcode:	Telephone:
Trading Name		
Address to be licensed		
	Postcode:	Telephone:
Finally, are you or have you ever been disqualified from:		
a) Keeping any dangerous wild animals?	YES/NO	
b) Keeping a dog?	YES/NO	
c) Having the custody of animals?	YES/NO	
d) Keeping a pet shop?	YES/NO	
e) Keeping an animal boarding establishment?	YES/NO	
f) Keeping a riding establishment?	YES/NO	
g) Keeping a dog-breeding establishment?	YES/NO	
Now complete the schedule overleaf with details of the types and numbers of pets which you want to be allowed to sell.		

**[I/ WE] CERTIFY that to the best of [my/our] knowledge and belief, the above particulars are true.**

**SIGNED:** .....

**Dated:** .....

**Please return with correct payment to:**

Licensing Unit, Commercial Team  
Environmental Services Department  
Wychavon District Council  
Civic Centre, Queen Elizabeth Drive  
Persnore, Worcestershire WR10 1PT

A licence granted under this legislation neither confers nor implies consent under Town and Country Planning legislation. Please contact our development control team for more information.

Note: We are under a duty to protect the public funds we administer and to this end may use the information you have provided on this form within this Council for the prevention and detection of fraud. It may also share this information with other bodies administering public funds solely for these purposes.

**Please turn the page:**

## SCHEDULE

TYPE OF ANIMALS	PROPOSED NUMBERS	DETAILS OF ACCOMMODATION	PROPOSED AGE AT TIME OF SALE
Dogs/Puppies			
Cats/Kittens			
Smaller Domesticated Mammals <i>e.g. rabbits, cavies, gerbils, hamsters &amp; rats</i>			
Primates <i>e.g. Marmosets</i>			
Other Mammals			
Parrots, Parakeets & Macaws			
Other Birds			
Reptiles			
Amphibians			
Fish			
Any Other Species <i>Please specify</i>			