



**ANIMAL BOARDING ESTABLISHMENTS ACT 1963**

**APPLICATION FORM TO OPERATE A CAT AND/OR DOG BOARDING FACILITY**

<b>1. DETAILS OF ESTABLISHMENT (ie the boarding premises)</b>	
<b>Name of premises</b>	
<b>Address</b>	
<b>Postcode</b>	
<b>Telephone Number</b>	

**2. Is the business a limited company? YES/NO**

If "Yes" complete part 3, if "No" go to part 4.

<b>3. DETAILS OF COMPANY</b>	
<b>Company Name</b>	
<b>Address of Registered Office</b>	
<b>Postcode</b>	
<b>Telephone Number</b>	

<b>4. PERSONAL DETAILS</b> (Do not complete if you have filled in section 3)	
<b>Your Name</b>	
<b>Your Address</b>	
<b>Postcode</b>	
<b>Telephone Number</b>	

<b>5. PERSONAL DETAILS OF MANAGER</b> (if one is employed)	
<b>Name</b>	
<b>Address</b>	
<b>Postcode</b>	
<b>Telephone Number</b>	

<b>6. KEYHOLDER DETAILS</b> (Please give details of any other person with a key to the premises who may be contacted in an emergency).	
<b>Name</b>	
<b>Address</b>	
<b>Postcode</b>	
<b>Telephone Number</b>	

**7. VETERINARY SURGEON** (Please give details of the vet used by the establishment to be licensed).

<b>Name</b>	
<b>Address</b>	
<b>Postcode</b>	
<b>Telephone Number</b>	

**8. QUALIFICATIONS** (Please give details of all relevant qualifications or business experience in respect of the applicant and manager).

<b>i. Applicant</b>	
<b>ii. Manager</b>	

**9. MEMBERSHIPS** (Please give details of all relevant associations/institutes of which the applicant or manager are a member)

<b>i. Applicant</b>	
<b>ii. Manager</b>	

**10. Are either the applicant or the manager disqualified from:**

- |   |               |
|---|---------------|
| <b>i. Keeping a Riding Establishment</b>            | <b>Yes/No</b> |
| <b>ii. Keeping a dog or any other animal</b>        | <b>Yes/No</b> |
| <b>iii. Keeping a Pet Shop</b>                      | <b>Yes/No</b> |
| <b>iv. Keeping an Animal Boarding Establishment</b> | <b>Yes/No</b> |

**If the answer to any question 10 i-iv is Yes then please give details below:**


**11. Premises Opening Hours:**

**12. Other times when the premises are closed but normally attended:**

**13. Please state the maximum number of animals to boarded at any one time:**

**Dogs.....**

**Cats.....**

**14. Declaration of applicant:**

I declare that the details provided in this form are correct to the best of my knowledge. I also declare that I am aware of the provisions of the Animal Boarding Establishment Act 1963 and the conditions attached to animal boarding licences issued by the London Borough of Hounslow. I hereby apply for a licence to board animals at the premises identified above.

Signature of Applicant:..... Date:.....

Name (Capitals) .....

Position in Company (If applicable).....

Please return your completed application form, and the licence application fee to:

The Principal Animal Control Officer  
Street Management & Public Protection Department  
Bridge Road Depot  
Pears Road  
Hounslow  
Middx.  
TW3 1SQ

Enquiries:  
Tel: 020 8583 5082  
Fax: 020 8583 5088  
e-mail: [animalwarden@hounslow.gov.uk](mailto:animalwarden@hounslow.gov.uk)