

Pembrokeshire County Council
DANGEROUS WILD ANIMALS ACT 1976



APPLICATION FOR A LICENCE TO KEEP DANGEROUS WILD ANIMALS

1. Applicant

(Please PRINT full name, as this will appear on your licence)

Applicant Full Name:

Applicant Home Address:

Telephone Number:

Mobile Number:

E-mail Address:

Have you ever been convicted or disqualified under any of the Acts listed below? *(Please note that any declaration will be subject to the Rehabilitation of Offenders Act 1974).*

(Tick, where applicable)	Yes	No
Animal Boarding Establishment Act, 1963		
Breeding of Dogs Act, 1973		
Pet Animal Act, 1951		
Riding Establishments Act, 1964		
Dangerous Wild Animals Act, 1976		
Animal Welfare Act, 2006		
Protection of Animals Act, 1911		
Protection of Animals (Scotland) Act, 1912		
Protection of Animals (Amendment) Act, 1954		

If Yes, please give details:

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2. Premises (where the animals will normally be held):

Premises Name:

Address:

Telephone Number:

Premises Mobile & Fax Number:

The act requires that an applicant be a “suitable person to hold a licence”. The following information will help us decide your suitability:-

Please detail maximum number and type of animal(s) to be kept:

Scientific name of animal	Sex	Total

Why do you want to keep these dangerous wild animals?

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How do you propose to keep the animal(s)?

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Please detail any qualifications or expertise you may have in keeping these animals:

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**Do you both own and possess, or propose to own and possess the animal(s) above?
(This is a legal requirement of the applicant and must be answered).**

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Additional information:

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3. Other Particulars

Veterinary Practitioner Name:

Business Address:

Telephone Number:

Declaration:

- *I am the occupier of the premises detailed above, and hereby make application in pursuance of the provisions of the Dangerous Wild Animals Act 1976, for a licence to keep a Dangerous Wild Animal as listed in the schedule of the Act at the premises of which particulars are given above.*
- *I do hereby certify that to the best of my knowledge and belief, the above particulars are true and that I am over 18 years of age:*
- *I am aware that as well as paying the licensing fee, a Veterinary licensing fee is also payable which will be invoiced on completion of the inspection.*

Name:

Signed:

Date:

Return application form to:

**Animal Health & Welfare
Pembrokeshire County Council
County Hall
Haverfordwest
Pembrokeshire
SA61 1TP**

Payment options on reverse:

Licence Payment options: Cash, Cheque, Debit/Credit card, or via BACS payment

Licence fee payable:	DWA £565.00
Payment Reference:	GP08AL69444GENERAL
(Trading Name) Narrative:	
Date PAID:	
Authorisation / Audit code:	

- Cash payments will only be accepted via the Cashiers Desk located in County Hall, Haverfordwest, SA61 1TP. Please do not send cash in the post!
- Cheques should be made payable to “Pembrokeshire County Council” and returned with this application form.
- Debit / Credit card – Please telephone **01437 776602** to make payment.

• **BACS (Internet Banking) –**

Name of Bank:	Barclays
Address of Bank:	32 High Street, Haverfordwest, SA61 2DA
Name of Bank Account:	Pembrokeshire County Council
Account No:	53671917
Sort Code:	20-37-82

***Please ensure to include the Payment Reference and Narrative as given above.**

Please indicate below the date and method of payment chosen. No inspections can be undertaken until payment has been confirmed and a complete application received.

Payment Method	Date Payment Made	Reference
Cash		
Cheque		
BACS		
Direct Debit	Form to be sent with Application	

All information that we hold concerning you as an individual will be retained and processed by the Animal Health & Welfare Team strictly in accordance with the provisions of the General Data Protection Regulations 2016, as set out in our Fair Processing Notice. A full version of this notice can be viewed at <https://www.pembrokeshire.gov.uk/privacy-promise/departmental-privacy-notices> alternatively a paper copy can be provided on request.