

**The Animal Welfare (Licensing of Activities Involving Animals) (England)  
Regulations 2018**

**Application for a licence to hire out horses**

Please complete all the questions in the form.  
If you have nothing to record, please put "n/a" or "none"

**Applicant Profile Section**

<b>1</b>	<b>Reference number</b>	
1.1	System reference number	
1.2	Your reference	

<b>1.2a</b>	<b>Agent</b>				
1.2.1	Are you an agent acting on behalf of the applicant?	Yes		No	If no go to 1.3
<b>1.2b</b>	<b>Further information about the agent</b>				
1.2.2	Name				
1.2.3	Address				
1.2.4	Email				
1.2.5	Main telephone number				
1.2.6	Other telephone number				

<b>1.3</b>	<b>Applicant details</b>				
1.3.1	Name				
1.3.2	Address				
1.3.3	Email				
1.3.4	Main telephone number				
1.3.5	Other telephone number				
1.3.6	Applying as a business or organisation, including a sole trader	Yes		No	
1.3.7	Applying as an individual	Yes		No	

<b>1.4a</b>	<b>Applicant business</b>				
1.4.1	Is your company registered with companies house?	Yes		No	If no go to 1.4.3
1.4.2	Registration number				
1.4.3	Is your business registered outside the UK?				
1.4.4	VAT number				
1.4.5	Legal status of the business				

<b>1.4a</b>	<b>Applicant business</b>	
1.4.6	Your position in the business	
1.4.7	The country where your head office is located	
<b>1.4.7b</b>	<b>Business address – this should be your official address – the address required of you by law to receive all communication</b>	
1.4.8	Building name or number	
1.4.9	Street	
1.4.10	District	
1.4.11	City or town	
1.4.12	County or administrative area	
1.4.13	Post code	
1.4.14	Country	

### Type of Business Section

<b>2a</b>	<b>Type of application</b>				
2.1	Type of application	New		Renewal	If new, go to 2.3
2.2	Existing licence number				
<b>2b</b>	<b>Further information about the applicant</b>				
2.3	Date of birth				

<b>3</b>	<b>Establishment to be licensed</b>				
3.1	Name of premises/trading name				
3.2	Address of premises				
3.3	Telephone number				
3.4	Email address				
3.5	Is the establishment open throughout the year?	Yes		No	
3.6	When is it normally open?				
3.7	Do you have planning permission for this business use?	Yes		No	

<b>4</b>	<b>Accommodation and facilities</b>	
	<b>Please describe the accommodation available for horses:</b>	
4.1	Stalls (please give the number)	
4.2	Boxes (please give the number)	
4.3	Covered yard (please give dimensions)	
4.4	Open yard (please give dimensions)	
	<b>Please describe the land available for:</b>	
4.5	Grazing	
4.6	Instructing or demonstrating	
4.7	Exercise	
	<b>Please describe the accommodation available for:</b>	
4.8	Forage and bedding	
4.9	Equipment and saddlery	
	<b>Please describe the arrangements in place for:</b>	
4.10	Water supply and watering horses	
4.11	Disposal of animal waste	

<b>4</b>	<b>Accommodation and facilities</b>	
4.12	Protection of horses in event of a fire, and fire precautions	

<b>5a</b>	<b>Horses</b>				
5.1	How many horses are kept under the terms of the Act at the present time?				
5.2	How many horses do you intend to keep under the terms of the Act during the year?				
<b>Please provide details of all the horses currently kept</b>					
5.3	Name of horse				
5.4	Description including size				
5.5	Sex				
5.6	Age				
5.7	Horse passport number				
5.8	Purpose for which horse is kept				
5.9	Age range of people who ride this horse				
5.10	Add another horse?	Yes		No	
<b>5b</b>	<b>Horse 2</b>				
5.11	Name of horse				
5.12	Description including size				
5.13	Sex				
5.14	Age				
5.15	Horse passport number				
5.16	Purpose for which horse is kept				
5.17	Age range of people who ride this horse				
5.18	Add another horse?	Yes		No	
<b>5c</b>	<b>Horse 3</b>				
5.19	Name of horse				
5.20	Description including size				
5.21	Sex				
5.22	Age				
5.23	Horse passport number				
5.24	Purpose for which horse is kept				
5.25	Age range of people who ride this horse				
5.26	If you intend to hire out further horses please attach a separate list of these with the information requested in questions 5.3 to 5.10 for each.				

<b>6</b>	<b>Management of the establishment</b>	
6.1	Name and address of the manager/person with direct control of the establishment	
6.2	Does the manager have any of the following certificates? (tick all that apply)	
	Assistant Instructor's Certificate of the British Horse Society	
	Intermediate Instructor's Certificate of the British Horse Society	
	Instructor's Certificate of the British Horse Society	
	Fellowship of the British Horse Society	

<b>6</b>	<b>Management of the establishment</b>			
	Fellowship of the Institute of the Horse			
	None of the above			
6.3	Please give details of the manager's experience in the management of horses			
6.4	Does a responsible person live at the establishment?	Yes		No
6.5	What are the arrangements in the event of an emergency?			
6.6	Will a person who is under 16 years of age be left in charge of the establishment at any time?	Yes		No
6.7	Will a responsible person (of 16 years or over) provide supervision at all times while horses from the establishment are used for riding instruction or are hired out for riding (except in the case of the hirer being competent to ride without supervision)?	Yes		No

<b>7</b>	<b>Veterinary surgeon</b>	
7.1	Name of usual veterinary surgeon	
7.2	Company name	
7.3	Address	
7.4	Telephone number	
7.5	Email address	

<b>8</b>	<b>Public liability insurance</b>					
8.1	Do you have public liability insurance?	Yes		No		If no, go to question 8.9
	If yes, please provide details of the policy					
8.2	Insurance company					
8.3	Policy number					
8.4	Period of cover					
8.5	Amount of cover (£m)					
	<b>Does this policy:</b>					
8.6	Insure against liability for any injury sustained by those who hire a horse from you for riding and those who use a horse in the course of receiving instruction in riding, provided by you in return for payment?	Yes		No		If yes to all, go to 9.1
8.7	Insure against liability arising out of such hire or use of a horse?	Yes		No		
8.8	Insure such hirers or users in respect of any liability which may be incurred by them in respect of injury to any person caused by, or arising from, such hire or use?	Yes		No		
8.9	Please state what steps you are taking to obtain such insurance					

<b>9</b>	<b>Disqualifications and convictions</b>					
	Has the applicant, or any person who will have control or management of the establishment, ever been disqualified from:					
9.1	Keeping a pet shop?	Yes		No		
9.2	Keeping a dog?	Yes		No		
9.3	Keeping an animal boarding establishment?	Yes		No		
9.4	Keeping a riding establishment?	Yes		No		
9.5	Having custody of animals?	Yes		No		
9.6	Has the applicant, or any person who will have control or management of the establishment, been convicted of any offences under the Animal Welfare Act 2006?	Yes		No		
9.7	Has the applicant, or any person who will have control or management of the establishment, ever had a licence refused, revoked or cancelled?	Yes		No		
9.8	If yes to any of these questions please provide details					

<b>10</b>	<b>Additional details</b>	
	Please check local guidance notes and conditions for any additional information which may be required	
10.1	Additional information which is required or may be relevant to the application	

### Payment and Declaration Section

<b>11</b>	<b>Payment</b>
11.1	Payment must be made at the time of making the application
11.2	<b>Please see website page for the relevant fees</b>

<b>12</b>	<b>Model licence conditions and guidance</b>	
	All applicants to tick that they have read the applicable model licence conditions and guidance	
12.1	Selling pets	
12.2	Animal boarding	
12.3	Performing animals	
12.4	Riding establishments	
12.5	Dog breeding	

<b>13</b>	<b>Additional information</b>	
	Please attach the following information	
13.1	A plan of the premises	
13.2	Insurance policy	
13.3	Operating procedures	
13.4	Risk assessments (including fire)	
13.5	Infection control procedure	
13.6	Qualifications	
13.7	Training records	

<b>14</b>	<b>Declaration</b>	
14.1	This section must be completed by the applicant. If you are an agent please ensure this section is completed by the applicant.	
14.2	I am aware of the provisions of the relevant Act and model licence conditions. The details contained in the application form and any attached documentation are correct to the best of my knowledge and belief.	
14.3	Ticking this box indicates you have read and understood the above declaration	
14.4	Full name	
14.5	Capacity	
14.6	Date	

Please return this application form to:

Environmental Health Services  
Harlow Council  
Civic Centre  
The Water Gardens  
Harlow  
Essex CM20 1WG