



9. Do you breed dogs as a business? YES  NO

10. Type of accommodation to be used:  
wholly outdoors  wholly indoors  combination of both

11. Size of kennels/quarters available for dogs  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

12. Full details of exercising facilities  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

13. Heating arrangements for kennels/quarters  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

14. Method of ventilation for kennels/quarters  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

15. Lighting arrangements for kennels/quarters – both natural and artificial  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

16. Arrangements for food storage  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

17. How often are kennels/quarters cleaned?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

18. Arrangements for disposal of excreta  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

19. Full name and address of your usual veterinary surgeon/practitioner  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Postcode \_\_\_\_\_ Telephone \_\_\_\_\_

20. Are you, or anyone involved in the establishment, disqualified from:
- |  |                              |                             |
|--|------------------------------|-----------------------------|
| having the custody of animals            | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| keeping a pet shop                       | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| keeping an animal boarding establishment | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| keeping a riding establishment           | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| keeping a dog breeding establishment     | YES <input type="checkbox"/> | NO <input type="checkbox"/> |

21. If you have answered YES to any part of question 20 above, provide FULL details

---



---



---



---



---



---

**DECLARATION**

**I, AS OCCUPIER OF THE ABOVE PREMISES HEREBY MAKE APPLICATION IN PURSUANCE OF THE PROVISIONS OF THE BREEDING OF DOGS ACTS 1991 AND THE BREEDING AND SALE OF DOGS (WELFARE) ACT 1999 & The Animal Welfare (Breeding of Dogs)(Wales) Regulations 2014 FOR A LICENCE TO KEEP A DOG BREEDING ESTABLISHMENT AT THE PREMISES OF WHICH THE PARTICULARS ARE GIVEN ABOVE.**

**I AGREE TO PERMIT AN OFFICER, VETERINARY SURGEON AND/OR VETERINARY PRACTITIONER AUTHORISED BY THE COUNCIL TO INSPECT THE PREMISES BEFORE ANY LICENCE IS GRANTED – THE COST OF THIS INSPECTION TO BE RE-CHARGED TO THE APPLICANT.**

I ENCLOSE HEREWITH THE LICENCE FEE £120.00. (PLEASE NOTE A VET FEE MAY BE IN ADDITION TO THIS SUM).

I DO HEREBY CERTIFY THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE ABOVE PARTICULARS ARE TRUE.

---

SIGNED \_\_\_\_\_ DATE \_\_\_\_\_

---

NAME IN BLOCK CAPITALS \_\_\_\_\_

(Information provided by you will be held and automatically processed on a computer system in line with Data Protection Legislation.)

This form should be completed *in FULL* and returned together with the required fee.

**LICENSING**  
**Rhondda Cynon Tâf County Borough Council,**  
**Ty Elai, Dinas Isaf East,**  
**Williamstown, Tonypany CF40 1NY**  
**Tel 01443 570033**  
**licensing.section@rctcbc.gov.uk**