



# Application for a Licence to Keep Dangerous Wilde Animal(s)

**Dangerous Wild Animals act 1976**

(\*Please delete as appropriate)

Public Protection Partnership  
Environmental Health & Licensing  
Wokingham Borough Council  
Shute End, Wokingham  
Berkshire, RG40 1WW  
Tel: 0118 974 6000  
Fax: 0118 900 7479

## SECTION A – Particulars of Applicant

<b>1.</b>	Surname (IN BLOCK CAPITALS) ..... Other Names ..... Home Address: ..... ..... Postcode ..... Date of Birth ..... Home Telephone Number ..... Mobile Telephone Number ..... Work Telephone Number ..... Fax Number ..... E-mail address .....
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## SECTION B – Site Details

<b>1.</b>	Please state details of the premises on which you wish to keep animals which are on the schedule of the Dangerous Wild Animals Act 176: Address: ..... ..... Postcode .....
<b>2.</b>	Please give details of the species of animals to be kept (give scientific name(s) if possible): ..... ..... ..... Numbers to be kept:      MALE..... FEMALE: ..... TOTAL: .....
<b>3.</b>	Is it intended to breed from these animals:      * YES / NO
<b>4.</b>	Description and dimensions of accommodation to be used ..... .....
<b>5.</b>	Description of food to be supplied and source: ..... .....

<b>6.</b>	<p>Details of insurance policy held to cover liability for damage caused by animals(s) (The policy must be produced to an inspecting officer if required):</p> <p>Company: .....</p> <p>Policy No.: ..... Expiry Date: ..... Amount of cover .....</p>
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**SECTION C – Declaration**

<b>1.</b>	<p>I confirm that the information I have given is correct to the best of my knowledge and belief. I understand that I shall be liable to prosecution if I have knowingly or recklessly made a false statement or omitted any relevant information</p> <p>Signed..... Date .....</p> <p>.....</p> <p>(indicate capacity if signing on behalf of a company or partnership)</p>
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**Vets fees will be added where appropriate.**

This Form should be returned to the Senior Licensing Officer, Property and Public Protection, Environmental Health & Licensing, West Berkshire District Council, Market Street, Newbury RG14 5LD together with the appropriate fee.

**PLEASE NOTE WITHOUT ANY OF THE ABOVE ITEMS THE APPLICATION CANNOT BE ACCEPTED**

*This authority is under a duty to protect the public funds it administers, and to this end may use the information you provide on these forms for the prevention and detection of fraud. It may also share this information with other bodies responsible for auditing or administering public funds for these purposes.*