## APPLICATION FOR ANIMAL ACTIVITY LICENCE

supervision)?

## Application form part 2c: Hiring of horses

Business Trading Name						
Section A. Details of establishment						
Usual opening hours of the establish hours:	hment and details of any seasonal variations to c	ppening				
Section B. Management						
Name and address of the manager/person with direct control of the establishment						
Does the manager have any of the f	following certificates?					
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						
Fellowship of the Institute of the Horse						
Please provide details of the manag any other relevant qualifications held	Jer's experience in the management of horses ar d not mentioned above.	nd details of				
Does a responsible person live at the establishment?						
What are the arrangements in the e	vent of an emergency?					
Will a person under 16 years of age be left in charge of the establishment at any time?						
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						

Section C. Accommodation and facilities (please continue onto an extra sheet if required)				
Number and details of stalls				
Number and details of boxes				
Details of any covered yard, including dimensions				
Details of any covered yard, including dimensions				
Description of land available for grazing				
Description of land available for instructing or demonstrating				
Description of land available for exercise				
Description of facilities for forage and bedding				
Description of facilities for equipment and saddlery				
Fire precautions/equipment				
Water supply				
Disposal of animal waste				
How do you propose to minimise disturbance from noise?				

## Section D. Veterinary surgeon

Please give details (including name, address and contact details) of usual veterinary surgeon:

## Section E. Additional information (please continue onto an extra sheet if needed)

Please provide any additional pertinent information not previously provided:

Section F. Horses							
How many I the present	norses are kept ( time?	under the	terms of	the Act at			
How many I terms of the	norses are intended at a set of the set of t	ded to be /ear?	kept und	er the			
Details for a	all horses current	tly kept: (p	lease continu	e onto an extra sheet if ne	eded)		
Name	Description	Sex	Age	Passport number	Purpose kept	Age range of riders	
-							

Section G. Public liability insurance						
Do you have public liability insurance? (if no go to next section)						
Insurance com	pany					
Policy number						
Period of cove	r	Start date:	End date:			
Amount of cove	er					
Does this polic	y:					
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?						
Insure against liability arising out of such hire or use of a horse?				yes/no		
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?						
Section H. Declaration (please read and tick to confirm)						
I hereby certify that all statements in this application are correct and true to the best of my knowledge.						
Signed						
Print name						
Date signed						