

**DANGEROUS WILD ANIMALS ACT 1976**

**APPLICATION FOR LICENCE TO KEEP DANGEROUS WILD ANIMALS**

To: Trafford Council

I, ..... of .....

.....

telephone number: .....

hereby apply under the provisions of the Dangerous Wild Animals Act 1976 for a licence to keep prescribed animals.

I enclose the sum of £ (see current fees and charges on website) being the fee payable on this application.

Particulars:

1. Postal Address of premises to be licensed:	
2. Species of animal to be kept (scientific name if possible):	
3. Number to be kept:	Male:                      Female:
4. Is it intended to breed from these animals:	YES / NO
5. Details of insurance policy held to cover animal liability:	
Company:	
Policy No:	Expiry Date:
Total Cover: £	
6. Has any person involved in ownership or care of the animals ever been refused a licence or convicted of an offence under this Act or any other animal welfare act.	
7. Name and Address of usual	

veterinary surgeon:	
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I certify that to the best of my knowledge and belief the above particulars are true.

Dated: ..... Signed: .....

Note:

Following receipt of an application for a licence, Trafford arranges for a Veterinary surgeon to inspect your premises.

The authorised Veterinary Surgeons are:

Clarendon Veterinary Group  
Clarendon Avenue  
Altrincham  
WA15 8HD

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**FOR OFFICIAL USE**

Inspected by: .....

Date of Inspection: .....

Recommendation: .....

No. of Licence issued: .....

**Please return completed forms to Public Protection Service, Trafford Council, Trafford Town Hall, Talbot Road, Stretford, Manchester M32 0YJ.**