



CITY OF
Lincoln
COUNCIL

ANIMAL BOARDING ESTABLISHMENTS ACT 1963, S.1

APPLICATION FOR LICENCE TO KEEP AN ANIMAL BOARDING ESTABLISHMENT

TO: CITY OF LINCOLN COUNCIL

NAME: MRS Lynn Leary

ADDRESS: 58 WOLSEY WAY, LINCOLN LN2 4ST

As [proposed] occupier(s) of the premises as mentioned below HEREBY APPLY under SECTION 1 of the ANIMAL BOARDING ESTABLISHMENTS ACT 1963, for a LICENCE to KEEP AN ANIMAL BOARDING ESTABLISHMENT at the premises. The sum of £ 68.00 is enclosed, being the fee payable on this application. *(Please call for payment by card)*

1	Postal address of premises <u>58 WOLSEY WAY</u> <u>LINCOLN</u> <u>LN2 4ST</u>	<div>RECEIVED CITY OF 26 JAN 2013 BY POST LINCOLN COUNCIL</div>
2	Are you disqualified from: a) Keeping a boarding establishment b) Keeping a pet shop c) Keeping a dog d) Having the custody of animals	YES/NO YES/NO YES/NO YES/NO
3	Number, construction and size of quarters in which animals [are] [will be] accommodated.	<u>IN MY HOME AT</u> <u>ABOVE ADDRESS</u>
4	Number of each type of animal which are [intended to be] accommodated on the premises	<u>4 Dogs from</u> <u>Different Homes</u>
5	Type of heating provided	<u>Central Heating</u>
6	Method by which premises are ventilated	<u>WINDOWS</u>
7	Lighting provided: Natural Artificial	<u>Electric</u>

8	Water supply MAINS	
9	Food storage arrangements INDIVIDUAL BOXES	
10	Arrangements for disposal of excreta Black Bins OR on WALKS - DOG BINS	
11	Details of isolation facilities provided for control of infectious diseases SEPARATE ROOM & VET'S AS BACK UP	
12	Name and address of usual veterinary surgeon WHITEGATES WASHINGTON BOROUGH	

I agree to permit a person authorised by the council to inspect the premises before any licence is granted.

I apply for a licence to keep an animal boarding establishment from [date of issue/1 January 20...]*

*[Delete as appropriate. A licence may run either from the date of issue or from 1 January next and remains valid for the remainder of the year in which it is issued]

I/~~WE~~ CERTIFY that to the best of [my] [our] knowledge and belief, the above particulars are true.

Dated : 7/1/2018

Signed *: LHOON

*If signing on behalf of a Company or Partnership, state in what capacity

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DATE OF INSPECTION _____

RECOMMENDATION _____

DATE REPORTED TO COUNCIL & DECISION _____

NO. OF LICENCE ISSUED _____

DATE ENTERED IN REGISTER _____

Office address: Licensing Team, City of Lincoln Council, City Hall, Beaumont Fee, Lincoln, LN1 1DB
NOTE: THE APPROPRIATE FEE MUST ACCOMPANY THIS APPLICATION

ANIMAL BOARDING ESTABLISHMENTS ACT 1963

INSPECTION OF PREMISES

1. Date of inspection 04/10/17
2. Name of Owner
(or person to whom
licence will be issued) Mrs Lynn Leary
3. Address 58 Wolsey Way
Lincoln
LN2 4ST
Tel No: 01522 829489.
4. Address of Establishment
(if different from above) as above
5. Address of any other premises connected
with the establishment N/A.
6. Is the applicant disqualified for the time being:-
 - from keeping a boarding establishment for animals, under this Act? **YES/NO**
 - from keeping a pet shop, under the Pet Animals Act 1951? **YES/NO**
 - from keeping a dog, under the Protection of Animals (Cruelty to Dogs)
(Scotland) Act 1934? or **YES/NO**
 - from having the custody of animals, under the Protection of Animals
(Amendment) Act 1954? **YES/NO**
7. Are the animals at all times kept in accommodation suitable in respect of
construction, size of quarters, number of occupants, exercising facilities,
temperature, lighting, ventilation and cleanliness? **YES/NO**
8. Are the animals adequately supplied with suitable food, drink and bedding
material, adequately exercised, and (so far as necessary) visited at suitable
intervals? **YES/NO**
9. Are reasonable precautions taken to prevent and control the spread among
animals of infectious or contagious diseases, including the provision of
adequate isolation facilities? **YES/NO**
10. Are appropriate steps taken for the protection of the animals in case of fire
or other emergency? **YES/NO**

11. Is a register kept containing a description of any animals received into the establishment, date of arrival and departure, and the name and address of the owner, such register being available for inspection at all times by an officer of the local authority, veterinary surgeon or veterinary practitioner authorised under Section 2(1) of this Act?

☒ YES/NO

Declaration by Inspecting Officer

I have inspected the premises as detailed in this report and in my opinion a licence/
no licence should be granted.

SIGNED P. J. Munro DATE 04/10/17

P. J. MUNRO BUS MRCVS

If it is recommended that no licence should be granted please state reasons:-

WHITEGATES VETERINARY PRACTICE

3 Main Road
Washingborough
Lincoln LN4 1AT
Tel: Lincoln 790928

To: The Licensing Team
City of Lincoln Council
City Hall
Baumont Fee
Lincoln
LN1 3HL