

	<p align="center">The Licensing Team Environmental Health & Housing North Devon Council Civic Centre, North Walk Barnstaple, Devon EX31 1EA</p>	<p align="right">Contact Details: Tel: 01271 388870 Fax: 01271 388328 Email: licensing@northdevon.gov.uk Web: www.northdevon.gov.uk/licensing</p>
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NOTICE OF INTENTION TO APPLY FOR A ZOO LICENCE

Form Ref: G/ZO2

Data Protection

North Devon Council is the Data Controller.

Your personal information will be held and used in accordance with the requirements of the Data Protection Act 1998.

We will use the information you have provided in connection with the administration of Licensing.

We may lawfully disclose information to other public sector agencies to:

- prevent or detect fraud and any other crime;
- support national fraud initiatives;
- protect public funds;
- progress your request for service.

We may also use basic information about you, e.g name and address, in other areas of service provision at North Devon Council if this:

- helps you to access our services more easily;
- promotes the more efficient and cost-effective delivery of services;
- helps us to recover monies that you owe us.

We will not use your personal information in a way that may cause you unwarranted detriment.

If you require this document in an alternative format, please contact us.

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

If you are completing this form by hand, please write legibly in block capitals using ink. Use additional sheets if necessary (marked with the number of the relevant questions). You may wish to keep a copy of the completed form for your records.

NOTICE OF INTENTION TO APPLY FOR A ZOO LICENCE

ZOO LICENSING ACT 1981

Part 1 – Applicant(s) Details

1. Title: Mr Mrs Miss Ms Dr Other (*please specify*)

Surname:

Other name(s):

2. Home Address:

Postcode:

3. Telephone:

Daytime:

Mobile:

Evening:

4. Email Address:

[please give as many contact details as possible in case we need to contact you]

Joint Applicant (if applicable)

5. Title: Mr Mrs Miss Ms Dr Other (*please specify*)

Surname:

Other name(s):

6. Home Address:

Postcode:

7. Telephone:

Daytime:

Mobile:

Evening:

8. Email Address:

[please give as many contact details as possible in case we need to contact you]

Part 2 – Notice

- I/We* Hereby give notice that in not less than 2 months after publication in one local and one national newspaper of a notice of intention to make an application for a licence to operate a proposed zoo at:

[insert full postal address]

- I/We* intend to make an application for a licence to the North Devon Council, being the Local Authority for the area in which the whole or majority of the zoo is to be situated.
- The following details of the proposed zoo and its operation are required by section 2(2) of the Act:

9. A complete and detailed list of animals to be kept:

10. Brief details of the accommodation provided for the animals (i.e. the number, type, approximate size and security of the enclosures, including confined quarters during the night and winter, and the grouping of animals).

[if you prefer this information could be submitted in the form of annotated drawings or plans. In any event a plan showing the layout of the zoo should be enclosed]

11. Please give brief details of the arrangements that are in place for the animals maintenance and wellbeing, including information about the provision, storage and preparation of food, and arrangements for veterinary care, including preventative measures:

12. Please give details of the number and categories of staff employed at the zoo:

Senior administrative staff under director/manager	
Other administrative staff	
Keeper staff	
Maintenance staff	
Others (please specify)	

13. Approximate number of visitors who are to be accommodated per day

14. Type and size of car parking facilities (if any):

15. Safari parks – approximate number of vehicles which are to be accommodated per day:

16. Please give details of the approximate number and position of means of access to be provided to the premises:

[if preferred, this information can be given in the form of an annotated drawing or plan]

• I/WE* DO HEREBY CERTIFY that to the best of my/our* knowledge and belief, the above particulars are true.

Part 5 – Signature(s)

17. Signature of applicant or applicant's solicitor or other duly authorised agent. If signing on behalf of the applicant, please state in what capacity:

Signature:	
Print Name:	
Capacity:	
Date:	

18. For joint applications, signature of 2nd applicant, or 2nd applicant's solicitor or other authorised agent. If signing on behalf of the applicant, please state in what capacity:

Signature:	
Print Name:	
Capacity:	
Date:	

[Where there are more than two applicants, please use an additional sheet clearly marked "Signature(s) of further applicant(s)". The sheet should include all the information requested in paragraphs 17 and 18 above.]

[Where the application is to be submitted in an electronic form, the signature should be generated electronically and should be a copy of the person's written signature.]

Part 6 – Contact Details

19. Please give the name of a person who can be contacted about the application:

20. Please give one or more telephone numbers at which the person identified in question 19 can be contacted:

Daytime:	
Mobile:	
Evening:	

21. Postal address for correspondence associated with this application:

Postcode:	

22. If you are happy for correspondence in relation to your application to be sent via e-mail, please give the e-mail address below:

* Delete or select as appropriate.