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| Application for a Riding Establishment Licence | U:\Home\Images\rbchead.png |
| Riding Establishments Acts 1964 and 1970 |

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| DETAILS OF APPLICANT |
| First name(s): |
| Surname: | Title: |
| Postal Address: |
| Phone (Home): |
| Phone (Mobile): |
| e-mail address: |
| Date of Birth: |
| NI number: |

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| DISQUALIFICATIONS |
| Are you, or have you ever been disqualified from: |
| Keeping an animal boarding establishment? | YES | NO |
| Keeping a dog? | YES | NO |
| Having the custody of animals? | YES | NO |
| Keeping a pet shop? | YES | NO |
| Keeping any dangerous wild animals? | YES | NO |
| Keeping a riding establishment? | YES | NO |
| Keeping a dog breeding establishment? | YES | NO |

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| DETAILS OF PREMISES TO BE USED AS A RIDING ESTABLISHMENT |
| Trading Name: |
| Address of premises: |

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| OPERATION / MANAGEMENT OF ESTABLISHMENT |
| Does the establishment operate throughout the year? | YES | NO |
| If not, state the period when normally operative: |
| Who will have direct control or management of the establishment? |
| Does the above named person hold any of the certificates shown below? (if so please enclose copies) |
| Assistant Instructor’s Certificate of the British Horse Society | YES | NO |
| Instructor’s Certificate of the British Horse Society | YES | NO |
| Fellowship of the British Horse Society | YES | NO |
| Fellowship of the Institute of the Horse | YES | NO |
| If the person named above does not hold any of the certificates give details of his/her experience in the management of horses (continue on separate sheet if necessary): |
| Is a responsible person living at the establishment? | YES | NO |
| If not, what arrangements are there in case of emergency? |
| Will the carrying on of the business of the Establishment be left at any time in the charge of a person under 16 years of age? (see guidance note 1) | YES | NO |
| Will supervision by a responsible person of the age of 16 years or over be provided at all times while horses from the Establishment are used for providing instruction in riding or are let out on hire for riding (except in the case of a horse let out for hire or riding when the hirer is competent to ride without supervision)? (see guidance note 2) | YES | NO |

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| NUMBER OF HORSES |
| How many horses/ponies are kept under the terms of the Act at the present time? |  |
| How many horses/ponies is it intended to keep under the terms of the Act during the year? |  |

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| ACCOMMODATION FOR HORSES / FORAGE / BEDDING / EQUIPMENT |
| What accommodation is available for horses? (Please state number, or dimensions in the case of a yard) |
| Stalls |  |
| Boxes |  |
| Covered Yard |  |
| What accommodation is available for forage / bedding? |
| What accommodation is available for equipment and saddlery?  |
| Is land available for grazing? (please give details) |
| Is land available for Instruction or demonstrating riding? (please give details) |

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| INSURANCE |
| Are you the holder of a current insurance policy which: insures you 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 from you, in return for payment, instruction in riding? insures you against liability arising out of such hire or use of a horse? insures 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?Please enclose a copy of this policy. | YES | NO |

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| VETERINARY SURGEON |
| Name and address of your usual veterinary surgeon: |

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| DECLARATIONS |
| I understand that the Authority is under a duty to protect the public funds it administers, and to this end may use the information I have provided on this form for the prevention and detection of fraud.  I understand that it may also share this information with other bodies responsible for auditing or administering public funds for these purposes.I declare that the information given above is true to the best of my knowledge and that I have not wilfully omitted any necessary material. I understand that if there are any wilful omissions, or incorrect statements made, my application may be refused without further consideration or, if a licence has been issued, it may be liable to immediate suspension or revocation.I understand that the Authority is collecting my data for the purposes described on this form and will not be used for any other purpose, or passed on to any other body, except as required by law, without my consent. |
| Signature: |
| Print Name: |
| Date: |

Please return your completed form with any relevant supporting documents to either:

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| LicensingRedditch Borough CouncilTown HallWalter Stranz SquareRedditchWorcestershireB98 8AH | Worcestershire Regulatory ServicesWyre Forest HouseFinepoint WayKidderminsterWorcestershireDY10 1NW Email: wrsenquiries@worcsregservices.gov.ukTelephone: 01905 822799 |

GUIDANCE NOTES

1) A licence may be granted to an individual over the age of 18 years or a body corporate. It will be a condition of any licence granted that the carrying on of the business of a riding establishment shall at no time be left in the charge of any person under 16 years of age.

2) It will be a condition of any licence granted that no horse will be let out on hire for riding or used for providing instruction in riding without supervision by a responsible person of the age of 16 years or over unless (in the case of a horse let out for hire for riding) the holder of the licence is satisfied that the hirer of the horse is competent to ride without supervision.

3) a) “Horse” includes any mare, gelding, pony, foal, colt, filly or stallion, and also any ass, mule or jennet.

b) The Act regulates riding establishments which let out horses on hire or use them for the purpose of providing, in return for payment, instruction in riding or for the purpose of demonstrating riding.

# List of Horses for Inspection

| **Name** | **Age** | **Colour** | **Sex** | **Approx Height** | **Notes** |
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