

[insert full postal address]

## Licensing Section Environmental Services East Cambridgeshire District Council The Grange Nutholt Lane

Ely Cambridgeshire CB7 4EE Contact Details Tel: 01353 665555

Fax: 01353 616223

Email: licensing@eastcambs.gov.uk
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## NOTICE OF INTENTION TO APPLY FOR A ZOO LICENCE

## **ZOO LICENSING ACT 1981**

Part 1 – Applicant(s) Deta	ails			
	ss Ms	Dr 🗌	Other (please specify)	
Surname:				
Other name(s):				
2. Home Address:				
Postcode:				
3. Telephone:	Daytime:			
	Mobile:			
	Evening:			
4. Email Address:				
		possik	ole in case we need to contact you]	
Joint Applicant (if applicable)				
5. Title: Mr . Mrs . Mi	ss 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 conta	act details as <sub>l</sub>	possib	le 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:				

• I/We* intend to make an application for a licence to East Cambridgeshire District 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]		
L. F. C. C., and an entraction can be given in the form of an armidiated drawing of plain		

I/WE* DO HEREBY CERTIFY that to the best of my/our* knowledge and belief, the				
above particulars are true.				
Part 5 – Signati				
	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 ap	olications, signature of 2 <sup>nd</sup> applicant, or 2 <sup>nd</sup> applicant's solicitor or other gent. If signing on behalf of the applicant, please state in what capacity:			
Signature:				
Print Name:				
Capacity:				
Date:				
"Signature(s) of in paragraphs 1"	e more than two applicants, please use an additional sheet clearly marked further applicant(s)". The sheet should include all the information requested 7 and 18 above.]			
	lication is to be submitted in an electronic form, the signature should be onically and should be a copy of the person's written signature.]			
generated electr	omeany and endare be a copy of the percent written dignature.			
Part 6 – Contac	t Details			
	he name of a person who can be contacted about the application:			
20. Please give 19 can be co	one or more telephone numbers at which the person identified in question ntacted:			
Daytime:				
Mobile:				
Evening:				
	ss for correspondence associated with this application:			
<b>D</b> .				
Postcode:				
•	ppy for correspondence in relation to your application to be sent via e-mail, he e-mail address below:			

<sup>\*</sup> Delete or select as appropriate.