



RIDING ESTABLISHMENTS ACTS 1964 & 1970

Application for [Licence] [Extension of Provisional Licence]

Environment and Housing, High Peak Borough Council, Town Hall, Buxton, High Peak, SK17 6EL
Tel 0845 129 7777, Fax 01298 27639, Email neila@highpeak.gov.uk

Full Name

Address

Tel/Fax No:

Age (if under 18 years)

I am aware of the requirements of the Riding Establishments Acts 1964 and 1970 and APPLY for [a **LICENCE**] [an **EXTENSION to my PROVISIONAL LICENCE**] to keep a riding establishment commencing on [the first day of issue][1st January]

PARTICULARS**

1.	Postal address of Riding Establishment (including Post Code)	
2.	Is the Establishment operative throughout the year? If not, state period when normally operative	[YES] [NO]
3.	Who will have direct control or management of the Establishment?	
4.	If that person is the holder of any of the certificates shown opposite, tick box against each of those held and enclose the certificate(s) with this application.	British Horse Society Assistant Instructor's Certificate British Horse Society Intermediate Instructor's Certificate British Horse Society Instructor's Certificate Fellowship of the British Horse Society
5.	If the person named at 3 above does not hold any of these certificates, give details of his/her experience in the management of horses.	

** Attach separate sheets if necessary

[] Cross out any words in square brackets that do not apply

PARTICULARS (continued)**

6.	Is a responsible person living on the establishment?	[YES] [NO]
7.	Will the carrying on of the business of the establishment be left at any time in charge of a person under 16 years of age?	[YES] [NO]
8.	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 let out on hire for riding (except in the case of a horse let out for hire for riding when the hirer is competent to ride without supervision)?	[YES] [NO]
9.	<p>The applicant is required to answer YES or NO to the following questions:</p> <p>(i) Are you, or any person who will have control or management of the establishment disqualified for the time being from:</p> <p>(a) keeping a riding establishment? (b) Keeping a dog? (c) Keeping a pet shop? (d) Having the custody of animals? (e) Keeping a boarding establishment for animals?</p> <p>(ii) Are you the holder of a current insurance policy which:</p> <p>(a) 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; (b) insures you against liability arising out of such hire or use of a horse; and (c) 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 derived from, such hire or use?</p>	<p>[YES] [NO] [YES] [NO] [YES] [NO] [YES] [NO] [YES] [NO] [YES] [NO] [YES] [NO]</p> <p>(if YES, enclose with this application evidence that you hold such insurance; if NO, state below what steps you are taking to obtain such insurance)</p>
10	<p>How many horses are kept under the terms of the Act at the present time?</p> <p>How many horses is it intended to keep under the terms of the Act during the year?</p>	

PARTICULARS (continued)**		
11	What accommodation is available for: (a) Horses (b) Forage and bedding (c) Equipment and saddlery	Stalls Boxes Covered yard (Please state number, or dimensions in the case of a yard)
12	Is land available for: (a) Grazing (b) Instruction or demonstrating riding? (please give details)	
13	What is the name and address of your usual veterinary surgeon?	

I enclose: [The appropriate Licence fee of **£60**]*

[The certificate(s) referred to in item 4 above]

[The policy or other evidence of insurance referred to in item 9(ii) above]

[Read the following statement carefully before signing it. A false statement may render you liable to prosecution]

I declare my answers to the above questions to be correct in every respect.

Signed _____ Date _____

If signing on behalf of a body corporate, state appointment held:

*** Cross out in the case of an application for an extension of a provisional licence**