

KILDARE COUNTY COUNCIL

Dog Breeding Establishments Act 2010

Application to register a Dog Breeding Establishment (in accordance with Section 9 of the Dog Breeding Establishment Act 2010)

Part 1 - Applicant(s) Details		
1. Title:	Mr. <input type="checkbox"/>	Mrs. <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other (please specify) _____
Surname:		
Other name(s):		
2. Home Address:		
3. Telephone:	Daytime:	
	Mobile:	
	Evening:	
4. Email Address:		
<i>(please give as many contact details as possible)</i>		
Joint Applicant (if applicable, if further applicants please supply similar details for all other applicants)		
5. Title:	Mr. <input type="checkbox"/>	Mrs. <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other (please specify) _____
Surname:		
Other name(s):		
6. Home Address:		
7. Telephone:	Daytime:	
	Mobile:	
	Evening:	
8. Email Address:		
<i>(please give as many contact details as possible in case we need to contact you)</i>		
<i>[Where there are more than two applicants, please use additional sheet(s) clearly marked "Applicant(s) Details - further applicant(s)". The sheet(s) should include all the information requested in paragraphs 1 to 4 above.]</i>		

As operator/proposed operator(s)* of the premises hereinafter mentioned I/WE* HEREBY MAKE APPLICATION in pursuance of the provisions of the Dog Breeding Establishment Act 2010, TO REGISTER A DOG BREEDING ESTABLISHMENT at the premises of which particulars are given below.

* strike out as appropriate throughout form

Part 2 - Premises Details

9. Postal Address of Premises:

10. Telephone Number:

11. Email Address:

Part 3 - Particulars

12. Description of type of accommodation to be used: Indoors/Outdoors/Combination of Both*

13. Breeds of dogs concerned:

14. Number of bitches over 6 months old and capable of breeding at date of application:

15. Max number of bitches over 6 months old and capable of breeding intended to be kept:

Part 4 – Fees (strike out as appropriate)

I/We* enclose the appropriate fee (cheques should be made payable to KILDARE COUNTY COUNCIL

or

I/We* are exempt from fees due to the following reason(s):

Premises	Fee
not less than 6 and not more than 18 bitches	€400
not less than 19 and not more than 30 bitches	€800
not less than 31 and not more than 100 bitches	€1,600
not less than 101 and not more than 200 bitches	€3,000
more than 200 bitches	€3,000 + €1,600 in respect of every 100 bitches in excess of 200

Part 6 - Declaration & Signature(s)

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

I/WE* DO CERTIFY that I/we* understand and accept the "Dog Breeding Establishment Guidelines" that a Dog Breeding Establishment must follow.

I/WE* ARE AWARE OF THE PROVISIONS OF THE DOG BREEDING ESTABLISHMENTS ACT 2010, AND I APPLY TO HAVE MY ESTABLISHMENT PLACED ON THE REGISTER.

If any person named in this form has committed an offence involving cruelty to an animal give details here:

16. Applicant	
Signature:	
Print Name:	
Date:	

17. Joint Applicant (if applicable)	
Signature:	
Print Name:	
Date:	

(Where there are more than two applicants, please use additional sheet(s) clearly marked "Declaration & Signature(s) - further applicant(s)". The sheet(s) should include the declarations listed above.]

THIS APPLICATION MUST BE ACCOMPANIED BY THE REQUISITE FEE.

Return completed form to: KILDARE COUNTY COUNCIL,
VETERINARY SECTION, ÁRAS
CHILL DARA, DEVOY PARK,
NAAS, CO. KILDARE.

FOR OFFICIAL USE ONLY

Date of Inspection _____ Inspected by: _____

Recommendation _____

Decision _____

Date entered on Register _____ Registration Number _____

Officials Signature _____

Registration Cert issued? _____ **Y / N**
