**Privacy Statement**

Havant Borough Council need to process your data to comply with a legal obligation primarily under The Animal Welfare (Licensing of Activities Involving Animals) (England) Regulations 2018. You have a number of rights on how your data is used, including the right to object, for more information on your rights see: <https://www.havant.gov.uk/privacy-policy>

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| --- | --- |
|  | **HOST / CARER LEGAL DECLARATION**  The Animal Welfare (Licensing of Activities Involving Animals)  (England) Regulations 2018 |

**1. HOST / CARER DETAILS**

|  |  |  |  |
| --- | --- | --- | --- |
| **FIRST HOST / CARER** | | | |
| **Title** | Mr  Mrs  Miss  Ms  Other  (Please specify) | | |
| **Surname** | |  | |
| **Forename(s)** | |  | |
| **Address** | | |  |
| **Postcode** | |  | |

|  |  |  |  |
| --- | --- | --- | --- |
| **SECOND HOST / CARER** | | | |
| **Title** | Mr  Mrs  Miss  Ms  Other  (Please specify) | | |
| **Surname** | |  | |
| **Forename(s)** | |  | |
| **Address** | | |  |
| **Postcode** | |  | |

**Please provide details of any additional host(s) / carer(s) at the same premises on a separate sheet.**

**2. DECLARATION**

|  |  |
| --- | --- |
| **I confirm that I / we, the person(s) named in Section 1 above, work as a host / carer for [NAME OF FRANCHISEE / ARRANGER] and as such have received no payment for carrying out this activity beyond the minimal expenses or Trading Allowance\* actually incurred for carrying out home boarding.**  **I / we are not making a profit and are fully aware I / we should not receive any payment or commission for carrying out home boarding beyond minimal expenses / Trading Allowance.**  **I / we agree that I / we fully understand that should payment be received beyond minimal expenses then I / we must hold the appropriate Animal Activities Licence and failure to do so could leave me / us liable to prosecution.**  **I / we are aware of the criteria set out in The Animal Welfare (Licensing Of Activities Involving Animals) (England) Regulations 2018 and will meet these requirements for the duration of the time I / we act as a host / carer.**  **I / we agree to complete the host notification form and submit this with the relevant fee to be inspected and the franchise company then to be informed by the Licensing Authority as to whether or not I / we meet the relevant criteria and the number of dogs suitable for my / our accommodation.**  **I / we confirm that I / we have read and understand the guidance documents and that I /we are aware of the provisions of all the relevant legislation. I / we believe that the facts and details contained in this statement and declaration form (along with attached documentation) are true and correct, and signing this declaration indicates that I / we have read and understood the above declaration.** | |
| **Signature(s)** |  |
| **Full name(s)** |  |
| **Date** |  |

**Please send with your Declaration with your supporting information and fee.**