

Riding Establishments Acts 1964 and 1970
**Application for licence/extension of
provisional licence**



1. Surname (BLOCK CAPITALS) _____
Christian names (BLOCK CAPITALS) _____
Title (Mr/Mrs/Miss/Ms) _____
Age (if under 18 years) (see Note 1) _____

2. Private address (or, if a body corporate, name
of body and address of registered office) _____

3. Address of riding establishment
(if different from above) _____

4. Is the establishment operative throughout the year? YES NO
If not state period when normally operative _____

5. Who will direct control or management of
the establishment? _____

6. If that person is the holder of any of the certificates, tick against the name(s) of the one(s) held
and enclose the certificate(s) with this application
 - i) Assistant Instructor's Certificate of the British Horse Society
 - ii) Instructor's Certificate of the British Horse Society
 - iii) Fellowship of the British Horse Society
 - iv) Fellowship of the Institute of the Horse

7. If the person named at 5 does not hold any of these certificates, give details of his or her experience in the management of horses (continue on a separate sheet if necessary)

8. Is a responsible person living on the establishment? YES NO
If not what arrangements are there in case of emergency?

9. 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 Note 1) YES NO

10. Will supervision by a responsible person of the age of 16 years or over be provided at all time 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 for riding, when the hirer is competent to ride without supervision)? _____

11. The applicant is required to answer 'YES' or 'NO' to the following questions:

i) Are you; or any person who will have control or management of the establishment disqualified for the time being from:

- | | | | | |
|--|--------------------------|-----|--------------------------|----|
| a) keeping a riding establishment? | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO |
| b) keeping a dog? | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO |
| c) Keeping a pet shop? | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO |
| d) Having the custody of animals? | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO |
| e) Keeping a boarding establishment for animals? | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO |

ii) Are you the holder of a current insurance policy which

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;

YES NO

b) insures you against liability arising out of such hire or use of a horse, and YES NO

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 arising from, such hire or use? YES NO

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).

12. How many horse are kept under the terms of the Act at the present time? _____
How many horses is it intended to keep under the terms of the Act during the year? (see Note 3) _____

13. What accommodation is available for horse:
a) Horses? Stalls: _____
Boxes: _____
Covered yard: _____
(Please state number, or dimensions in the case of a yard).

b) Forage and bedding? _____
c) Equipment and saddlery? _____

14. Is land available for:
a) Grazing? _____
b) Instruction or demonstration riding? _____
(please give details outlined in red on a copy of a map of the area)

15. What is the name and address of your usual veterinary surgeon/practitioner? _____

I am aware of the provisions of the Riding Establishments Acts 1964 and 1970 and I apply for a licence/an extension to my provisional licence* to keep a Riding Establishment commencing

I enclose: The license fee of £ _____

(Cheques should be made payable to North Somerset Council)

The certificate(s) referred to at item 6 above*

The policy or other evidence of insurance referred to at item 11 (ii) above*

The map referred to in item 14 above.

(Read the following statement carefully before signing it. A false statement may render you liable for prosecution.)

I DECLARE MY ANSWERS TO THE ABOVE QUESTIONS TO BE CORRECT IN EVERY RESPECT.

Date: _____ Signature: _____

(If signing on behalf of a body corporate, state appointment held) _____

*Delete as appropriate

NOTES

1. A licence may be granted to an individual over the age of eighteen 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 be at no time 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 by a responsible person of the age of 16 years or over unless (in the case of a horse let out for riding) the holder of the licence is satisfied that the hirer of the horse is competent to ride without supervision.
3. I) 'Horse' includes any mare, gelding, pony, foal, colt, filly or stallion, and also any ass, mule or jennet.
ii) 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.

Please return this form to:

North Somerset Council
Environmental Services Development and Environment
Somerset House
Oxford Street
Weston-super-Mare
BS23 1TG

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provisional licence**



For official use only – inspector’s report

1. Should a licence be issued?

YES

NO

2. Limitations on numbers to be specified in licence conditions.

3. Other conditions to be specified in licence.

4. Additional comments

Date: _____

Signature: _____

Fee received £_____ cash/cheque

Receipt No. _____

Date received _____

Licence No. _____

Issued date _____