

WICKLOW COUNTY COUNCIL

Article 4 – FORMS S.L. 1

SLAUGHTER OF ANIMALS ACT, 1935

APPLICATION FOR A SLAUGHTER LICENCE

SECTION A – PARTICULARS TO BE FURNISHED BY APPLICANT

1. Surname: _____
2. Full Christian Name: _____
3. Address within area of abovenamed Sanitary Authority where applicant
(a) ordinarily resides _____ OR
(b) carries on business _____ OR
(c) is employed _____

NOTE: To be eligible for a Slaughter Licence, an applicant must reside in or carry on business or be employed in the Sanitary District.

4. Age on last birthday _____ (the _____ day of _____).
5. Particulars of last slaughter licence (if any) issued to applicant by the abovenamed Sanitary Authority or other Sanitary Authority including date of issue:

6. Whether the applicant has at any time been refused a slaughter licence by a Sanitary Authority (if so, the name of the Refusing Sanitary Authority and the grounds for the refusal must be given).

7. Whether any slaughter licence held by the applicant now or at any time has been revoked or suspended. (If so, full particulars must be given).

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8. Whether the applicant has, at any time, been convicted of an offence under abovenamed Act (if so, full particulars must be given).

9. Whether the applicant has at any time been disqualified by a court from holding a slaughter licence (if so, full particulars must be given).

SECTION B – APPLICATION

To: WICKLOW COUNTY COUNCIL being the Sanitary Authority of the _____ District, I hereby apply for a Slaughter Licence commencing on the _____ day of _____ 2000, and I declare that the particulars furnished in Section A of this application are correct. I send with this application the prescribed fee of £ _____.

SIGNATURE OF APPLICANT

Date: _____

SECTION C – RECORDS

(To be completed for purposes of record by the Officer who issued the Licence)

1. Serial number of licence issued _____
2. Date of Issue of Licence _____
3. Date of expiry of Period of Validity _____
4. Observations (if any) _____

Initials of Issuing Officer _____