



APPLICATION FORM

FOR

PET SHOP LICENCE / DOG BREEDER LICENCE

PART I: INSTRUCTIONS

- 1 Tick in the relevant boxes.
- 2 *Delete whichever is not applicable.

Photo of
Applicant or
Nominee

PART II: PARTICULARS OF APPLICANT/NOMINEE

| | | | | |
|----|--|---|---|--|
| 1 | Name of *Applicant / Nominee: | | | |
| 2 | Identity Card / Passport number: | 3 | Date of birth: | |
| 4 | Race: | 5 | Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female | |
| 6 | Nationality & Country: | 7 | H/P number: | |
| 8 | Personal email: | | | |
| 9 | Correspondence address: | | | |
| 10 | *If the applicant / nominee is representing a firm / company, etc & please also complete 10 (a) - (h): | | | |
| a | Name of firm / company, etc: | b | Registration number: | |
| c | Address of firm / company, etc: | | | |
| d | Date of registration: | e | Trading license expiry date: | |
| f | Office telephone number: | g | Office fax number: | |
| h | Office email: | | | |