**Form to appeal against a star rating for animal licensing purposes.**

In completing this form please ensure;

* the appeal is signed and lodged by all licence holders
* you are specific about the reason or reasons for your rating appeal
* you provide and reference dated evidence to support the specifics of the appeal

|  |  |
| --- | --- |
| 1  | **Your details**  |

Name (s) of licence holder

Name and address of the licensed

business

Postcode

Telephone number

Mobile telephone number

Email address

|  |  |
| --- | --- |
| **2** | **About the decision you are appealing against**  |

License reference number

Date of the decision you

are appealing

Date you received the decision

You are appealing

Inspecting officer

Please tick this box to show it is attached and include its attachment reference,

eg Appendix 1

You must attach a copy of the

decision with this form.

|  |  |
| --- | --- |
| **3** | **What you are appealing against**  |

Because of the complexity of the rating process you may wish to appeal your risk rating ( low risk / higher risk ) and, or our assessment of your welfare standards eg whether your business falls into the minor failings/ minimum standards or higher standards categories. Please make this clear below.

risk rating / welfare standards / both

(please circle or delete as relevant)

I wish to appeal the following

Please state below what aspects of the above you are appealing against and why. It will help if you refer to specific sections of the licence or covering letter you disagree with and then explain why you disagree with them. If required please use an extra sheet of paper.

|  |  |
| --- | --- |
| **4** | **Outcome of appeal**  |

Please tell us what outcome you are seeking from your appeal.

|  |  |
| --- | --- |
| **5** | **Supporting documents**  |

Please list any documents that you wish the assessing officer to consider in support of your appeal. Please use and extra sheet of paper if required.

Please tick this box to confirm the information referenced below has been attached.

Please confirm the supporting

information has been included.

|  |  |
| --- | --- |
| **6** | **Declaration**  |

Signature of licence holder

appealing

Date

Signature of second licence holder

Where this is not applicable please insert N/A

Appealing (if relevant)

Date

**Please note**

* if the evidence you are relying on was not available at the time of the officer inspection then, this cannot be considered and it is recommended that you apply for a re-rating.
* It is not possible to determine non-specific appeals. These will be rejected.
* Once your rating appeal has been received the Local Authority has 21 days to make a decision. This will involve consideration of paperwork submitted and may include a visit. Where this is required the cost of any revisit will be recharged to the applicant unless the appeal results in a higher rating being issued.
* Challenge against the Local Authority decision is by way of judicial review.

**Please send** the completed from and attachments to:

Animal Health and Welfare

Wyvern House,

The Drumber

Winsford

Cheshire

CW7 1AH

Or scan and email to TST@cheshirewestandchester.gov.uk

Cheshire West and Chester Council process personal information about you in order to administer its licensing functions. For details of the standards we follow please view our [privacy policy](https://cheshirewestandchester.gov.uk/system-pages/privacy-notices/environmental-health-licensing-and-trading-standards-privacy-notice.aspx).

If you would like to see a paper copy of our privacy notice please request one by email on TST@cheshirewestandchester.gov.uk or by phone on 01606 288598.