## European Communities (Birds and Natural Habitats) Regulations 2011

# Application for a Licence to Exclude Bats from Domestic Dwellings

- This form should be completed by the home owner or occupier.
- Please complete this application form using **dark ink** and BLOCK CAPITALS.
- Please ensure that you answer questions fully in order to avoid delays. NPWS will aim to determine whether a licence should be issued within 15 working days of receipt of a completed application.
- If you experience any problems filling in this form, please contact the Wildlife Licensing Unit (details opposite).

Wildlife Licensing Unit,
Department of Housing, Local Government and Heritage
National Parks and Wildlife Service
Wildlife Licensing Unit, R. 2.03
90 North King Street
Smithfield
Dublin 7 D07 N7CV

Email:
wildlifelicence@housing.gov.ie

I have received advice about bats roosting in my house from (insert the name of NPWS officer) | JOHN MCMAHON

Having carefully considered this and discussed alternative solutions, I wish to apply for a licence under Section 54 of the European Communities (Birds and Natural Habitats) Regulations 2011.

### Part A. The Applicant: Personal details

These questions relate to the owner or occupier, or a person acting on their behalf, who will be the **named licensee**. As the licensee you will be responsible for ensuring compliance with the licence and its conditions, even though you may employ another person to act on your behalf.

1. (a) Name of applicant

| Title (Mr/Mrs/Miss/Ms) | Forename(s) | Surname |
|---|---|---|
| MRS | ANGELA | BELL NOVASIO |

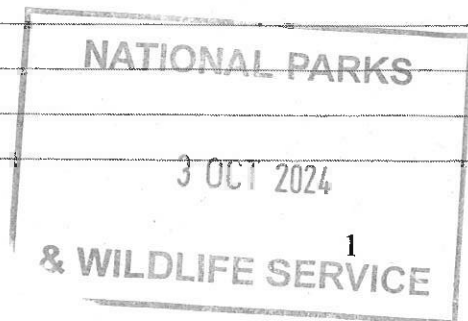| (b) Address | 6 DRAGOON HILL |
|---|---|
| Town | HOLLYWOOD |
| County | WICKLOW |
| Tel number | |
| Mobile number | 087 2067621 |
| Email address | angela.bell1@hotmail.it |

| (c) Address where works are to be carried out if different from (b) above | |
|---|---|
| Town | |
| County | |

NATIONAL PARKS

3 OCT 2024

& WILDLIFE SERVICE

3D license application

1

## Part B. The Application:

**2. Species of Bat.** Please indicate which species is affected by the proposed works.

COMMON PIPISTRELLE (*Pipistrellus pipistrellus*) ☑

SOPRANO PIPISTRELLE (*Pipistrellus pygmaeus*) ☑

Other (Please specify)

Pipistrelle Species

**3. Satisfactory alternatives:**

The continuing presence of bats in my property is intolerable for the reason given below and there is no satisfactory alternative solution other than to safely exclude the bats, thus destroying the roost. ☑

**4. Activity to be licensed:**

Damage or destroy a breeding or resting place of bats. ☑   Deliberately disturb bats during the course of exclusion. ☐

**5. Purpose of licence**

| | | |
|---|---|---|
| Public health | The bats are causing intolerable smell or noise within the property which is affecting the resident's health or the health of their family. | ☐ |
| | The resident of the property finds the presence of the bats disturbing to the extent that it is threatening their health or the health of their family. | ☑ |
| Serious damage | Continued bat access is causing damage to the property and this is likely to continue for as long as the roost is present. | ☐ |
| Conservation | Bats are entering the living-area of my property from their roost area and endangering themselves. Excluding the bats is the only way to prevent this occurring. | ☑ |

## Part C. Declarations.

6. I understand that this licence application will be considered by the Wildlife Licensing Unit in conjunction with the report submitted by the NPWS representative named above.

I understand that the deliberate killing, injuring, capturing or disturbing of bats, or damage or destruction of their roosts is illegal without a licence and that it is a legal requirement to comply with the conditions of any licence I may be granted following this application. I understand that NPWS may visit to check compliance with a licence.

I authorise employees of NPWS to enter the site which is the subject of this application for the purpose of monitoring and inspecting the permitted works where a prior appointment has been agreed.

Signature of the Applicant  *Angela Bell*   Date  1/10/2024

Name in BLOCK LETTERS  ANGELA BELL NOVASIO