

Removal from the Statutory Register of Veterinary Practice Premises

To remove your premises please complete all sections of this form and return it using the contact details below

Premises name	
Premises Registration Number	A copy of this will be on previous invoices sent to you by RCVS
Premises address	

Date premises will be closing	
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Please tell the reason you are closing your practice:	Please <input checked="" type="checkbox"/> one option
Moving premises (please tell us the new address)	
Retirement	
I have sold my business (please tell us who you sold to)	
Unable to meet regulatory requirements	
Prefer not to say	
Other (please give details)	

Declaration

There are no veterinary medicines being supplied, stored* or administered* from this premises.

I declare that the information given above is, to the best of my knowledge, correct:

Full name of Responsible Person: _____

RCVS Register Number of Responsible Person: _____

Signed by Responsible Person: _____

Date: ____ / ____ / ____

* Please note medicines can still be stored and administered at an unregistered premises for own animal use as long as the veterinary surgeon is appropriately registered.

Contact Details

Please return your completed form by email to registration@rcvs.org.uk

(Please note we can accept photographs of the form if you do not have access to a scanner).