According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0036 and 0579-XXXX. The time required to complete this information collection is estimated to average .25 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB APPROVED 0579-0036 and 0579-XXXX Exp.: XX/XXXX

No license may be issued unless a completed application has been received (7 U.S.C. 2132-2143), and the applicant is in compliance with the standards and regulations Section 2133

Section 2133.						
UNITED STATES DEPARTMENT OF AGRICULTURE	DO NOT USE THIS SPACE- OFFICIAL USE ONLY					
ANIMAL AND PLANT HEALTH INSPECTION SERVICE	SEND THE COMPLETED FORM TO:					
APPLICATION FOR LICENSE						
(TYPE OR PRINT)						
(TTE OKT KINT)		LICENSE NUME	BER RENEWAL DATE	FEE		
DENEWAL				AMOUNT	DATE RECEIVED	
RENEWAL 1. NAME (S) OF APPLICANT(S) AND MAILING ADDRESS:		2 ALL BUGINES	SC NAMES I OCATIONS	AND SITES HOUSING	ANIMAL C.	
1. NAME (3) OF APPLICANT(3) AND MAILING ADDRESS:		2. ALL BUSINESS NAMES, LOCATIONS, AND SITES HOUSING ANIMALS: (P.O. Box not acceptable)				
COUNTY: TELEPHONE:	COUNTY: TELEPHONE:					
3. IF THE APPLICANT IS A CORPORATION, PARTNERSHIP, OR OTHER BUSI ENTITY, LIST THE ENTITY'S PARTNERS OR OFFICERS AND AGENT FOR SEF	4. (A) PREVIOUS USDA LICENSE NUMBER: (If any)					
OF PROCESS.						
NAME TITLE	(B) ACTIVE USDA LICENSE NUMBER IN WHICH YOU HAVE AN INTEREST:					
	5. TYPE OF LICENSE:					
	Class A – Breeder Class B – Dealer Class C – Exhibitor					
6. LIST YOUR 12 MONTH BUSINESS YEAR: (Calendar or Fiscal)	7. TYPE OF ORGANIZATION:					
FROM TO MO DAY YEAR MO DAY YEAR		Individual Corporation Partnership				
		Other (Unive	rsity, State, Municipality, L	LC, Trust)		
8. APPLICANTS FOR CLASS A OR CLASS B LICENSES MUST COMPLETE THIS PLOCE. (Applicants for Class Class and Class B LICENSES MUST COMPLETE EXHIBITED AT ANY ONE TIME DURING THE PREVIOUS BUSINESS YEAR.						
THIS BLOCK (Applicants for Class C. Licenses go to Block 9)		Sections 2.6 and 2.7)		IS BUSINESS YEAR.		
CLASS A (PREFRED) LINE "D" - 14 OF LINE "C"				DODEN	TC	
CLASS A (BREEDER) – LINE "D" = ½ OF LINE "C" CLASS B (DEALER) – LINE "D" = LINE C LESS THE PURCHASE COST OF		ogs	NON-HUMAN PRIMATES			
THE SOLD ANIMAL SOLD. (9 CFR Sections 2.6 and 2.7)			PRIMATES	lab rats or mice)		
A. ESTIMATE TOTAL NUMBER OF ANIMALS TO BE PURCHASED IN THE NEXT BUSINESS YEAR		ATS	MARINE	WILD/EXOTIC HOOFSTOCK		
			MAMMALS			
B. ESTIMATE TOTAL NUMBER OF ANIMALS						
TO BE SOLD IN THE NEXT BUSINESS YEAR GUINE		A PIGS FARM ANIMALS		BEARS		
·						
C. ESTIMATE GROSS DOLLAR AMOUNT DERIVED FROM REGULATED ACTIVITIES (SALES, COMMISSIONS, ETC.)				WILD/EXOTIC WILD/EXOTIC MAMMALS CANINES (Not listed		
		STERS				
				èlsewhe	elsewhere)	
D. ESTIMATE DOLLAR AMOUNT ON WHICH FEE IS BASED RAB		BITS	WILD/EXOTIC		TOTAL (All animals listed in Block 9)	
			FELINES	• '		
	CERTIF	ICATION				
I hereby make application for a license under the Animal Welfare Act 7 U.S.C. 2131 et seq	. I certify th	nat the information prov	ided herein is true and correct	to the best of my knowledge	. I hereby	
acknowledge receipt of and agree to comply with all the regulations and standards in 9 CFR, Subpart A, Parts 1, 2, and 3. I certify that the applicant is 18 years of age or older.						
10. SIGNATURE: 13. DATE:						
11. PRINT NAME AND TITLE:						