

OBTAINING A NEW REGISTRATION	All facilities engaging in research activities covered by the AWA must have a valid registration. [2.30]
Criteria	<p>The research facility must:</p> <ul style="list-style-type: none"> • submit a properly completed APHIS Form 7011 (Application for Registration) (see 3.4.4) • have the Institutional Official or CEO sign APHIS Form 7011: <ul style="list-style-type: none"> ▶ certifying that the information provided is true and correct ▶ acknowledging receipt of the regulations and agreeing to comply with the regulations and standards • complete and submit the Taxpayer Identification Number (TIN) sheet (see 3.4.5) • submit the completed Application and TIN sheet to the Animal Care Regional Office for the State in which the principal place of business/headquarters is located
Registering Unit	<p>The registering unit is the lowest independent legal entity which uses or intends to use live animals for research, tests, experiments, or teaching.</p> <p>College or University School or Department: The college or university is considered the research facility, rather than the school or department, UNLESS the school or department demonstrates to the AC Deputy Administrator that:</p> <ul style="list-style-type: none"> • it is a separate legal entity, and • its operations and administration are independent of the college or university <p>Business Corporation The subsidiary of a business corporation is considered the research facility, rather than parent corporation, UNLESS:</p> <ul style="list-style-type: none"> • the subsidiary is under direct control of the parent corporation, and • the AC Deputy Administrator determines that, based on

this control, the parent corporation is the unit to be registered

Federal Research Facility

A Federal Research Facility is exempt from registration by the USDA.

Registrant

Registrant must provide all of the following information on the Application for Registration:

- name of the research facility
- valid mailing address
- a list of all locations where animals are housed, used or regulated activities occur
- business information requested on APHIS Form 7011
- name, title and address of each partner or principal officer

Note: It is strongly recommended that a contact person and phone number be submitted with the Application for Registration.

Issuance of a Registration

Registrations are issued to a specific research facility.

If a non-registered institution, organization or person acquires or purchases a registered research facility, the new owner must, before conducting any regulated activities:

- properly complete an Application for Registration
- file the Application with the appropriate AC Regional Director

If two or more registered research facilities merge, and:

- a completely new research facility is formed, the new research facility must:
 - ▶ inform the appropriate AC Regional Office
 - in writing
 - by certified mail
 - within 10 days of the change
 - ▶ have the merged research facilities cancel their registrations

- ▶ complete a new Application for Registration
- one registered research facility absorbs the other one(s), the research facility must:
 - ▶ inform the appropriate AC Regional Office
 - in writing
 - by certified mail
 - within 10 days of the change
 - ▶ have the absorbed research facility(s) cancel its registration
 - ▶ submit a list of the absorbed research facility's sites or locations which are to be added to the existing registration
 - ▶ complete a new Application for Registration (APHIS Form 7011) ONLY if the Institutional Official, partners, or principal officers change

**U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
APPLICATION FOR REGISTRATION**

(TYPE OR PRINT)

- Research Facility (Complete items 1, 2, and Sections A, B, and C)
- Exhibitor (Complete items 1, 2, and Sections B and C)
- Carrier (Complete items 1, 2, and Section C)
- Intermediate Handler (Complete items 1, 2, and Section C)

USDA USE ONLY

Applicant should send four (4) completed copies to this address:

REGISTRATION NO.

DATE REGISTERED

1. REGISTRANT (Name and permanent mailing address, including Zip Code)

2. LOCATION(S) OF BUSINESS, EXHIBITION SITE(S), OR RESEARCH FACILITIES (Use additional sheets if necessary)

3. DO YOU USE OR INTEND TO USE DOGS OR CATS OR OTHER ANIMALS COVERED BY THE ANIMAL WELFARE ACT

Yes No

4. DO YOU PURCHASE OR TRANSPORT DOGS OR CATS OR OTHER ANIMALS AS DEFINED IN THE ANIMAL WELFARE ACT

Yes No

5. ARE YOU USING FEDERAL FUNDS TO CARRY OUT RESEARCH, TESTS, OR EXPERIMENTS

Yes No

6. IF "YES" IN ITEM 5, "X" OR SPECIFY

Grant Award Loan Contract

Other (Specify)

7. NAME OF FEDERAL AGENCY(S) SUPPLYING FUNDS

8. NAME AND LOCATION OF EACH RESEARCH REPORTING FACILITY (see 9 CFR, Section 2.36) WHERE TEACHING, RESEARCH, TESTS, OR EXPERIMENTS ARE CONDUCTED WITH ANIMALS WHICH ARE COVERED BY THIS REGISTRATION. (Use reverse or attach additional sheets.)

9. NO. ANIMALS USED OR EXHIBITED ANNUALLY (Attach additional sheets if needed)

A. Dogs	B. Cats	C. Guinea Pigs	D. Hamsters	H. Other (Specify and give No.)
E. Rabbits	F. Non-human Primates	G. Marine Mammals		

10. NATURE OR ORGANIZATION OR BUSINESS ("X" one)

Private Commercial
 State, County or Municipal
 Federal

11. TYPE OF OPERATION ("X" each applicable operation)

College or University Hospital Exhibitor
 Carrier Intermediate Handler Air Rail Marine
 Truck

12. TYPE OF ORGANIZATION

Partnership Corporation
 Individual Association

Other (Specify)

13. STATE WHERE INCORPORATED

14. DATE INCORPORATED

15. IF PARTNERSHIP, IDENTIFY EACH PARTNER OR OFFICER
IF CORPORATION OR ORGANIZATION, IDENTIFY PRINCIPAL OFFICERS (Use reverse, if needed)

A.	NAME	B.	TITLE	C.	ADDRESS (full address, including zip code)

CERTIFICATION

I hereby register as a Research Facility, Exhibitor, Carrier, or Intermediate Handler under the Animal Welfare Act, 7 U.S.C. 2131 et seq. and I certify that the information provided herein is true and correct to the best of my knowledge and belief.

16. SIGNATURE

17. NAME AND TITLE (Type or Print)

18. DATE SIGNED

ACKNOWLEDGEMENT OF RECEIPT OF REGULATIONS AND STANDARDS

I hereby acknowledge receipt of and agree to comply with all the regulations and standards contained in 9 CFR, Chapter 1, Subchapter A.

19. SIGNATURE

20. NAME AND TITLE (Type or Print)

21. DATE SIGNED

IMPORTANT

THE FEDERAL DEBT COLLECTION ACT of 1996 requires us to obtain your Taxpayer Identification Number. This would be either your Social Security Number or your Employer Identification Number.

This number is for the purpose of collecting and reporting on any delinquent amounts arising out of a person's relationship with the government.

Our computer system will no longer allow processing of your license renewal without entering on of the above numbers.

We appreciate your cooperation in this matter. Please complete the following blanks and return this with your renewal application.

Your Name _____

License/Registration #: _____

Social Security Number: _____

OR

Employer Identification Number: _____

