| Every research facility, exhibitor, carrier, and intermediate handler not required to be licensed under<br>Section 3 of the Animal Welfare Act, shall register with the USDA (7 USC 2136). This application provides<br>information for such registration.                     |                  |                 |  |             |                              | lo. 0579-0036<br>1 APPROVED |
|--|------------------|-----------------|--|-------------|------------------------------|-----------------------------|
| U.S. DEPARTMENT OF AGRICULTURE<br>ANIMAL AND PLANT HEALTH INSPECTION SERVICE<br>APPLICATION FOR REGISTRATION<br>(TYPE OR PRINT)  |                  |                 | USDA USE ONLY<br>Applicant should send completed form to this address.<br>USDA APHIS ANIMAL CARE<br>EASTERN<br>2150 Centre Ave.<br>Building B, Mailstop #3W11<br>Fort Collins, CO 80526-8117<br>(970) 494-7478 |             |                              |                             |
| REGISTRATION UPDATE  |                  |                 | RTIFICATE NO./CUS<br>R-0119  | T NO:       | <b>RENEWA</b><br>21-Jul-2020 | L DATE                      |
| 1. REGISTRANT (Name and permanent mailing address, including Zip Code) Cornell University Office Of Research Integrity And Assurance 395 Pine Tree Road Suite 320 Ithaca, NY 14850 COUNTY: Tompkins TELEPHONE (607) 255-5398 3. (A) PREVIOUS USDA REGISTRATION NUMBER (IF ANY) |                  | <mark>(b</mark> | eccessary)   |             | (s), OR RESEARC              |                             |
| 5. ARE YOU USING FEDERAL FUNDS TO CARRY OUT<br>RESEARCH, TESTS, OR EXPERIMENTS   | 6. TYPE OF REGIS |                 | N:   |             | mediate Hand                 |                             |
| XYes 🗆 No  |                  |                 | Research Facility 🔷 Class T - Carrier  |             |                              |                             |
| 7. FEDERAL FUND TYPES:<br>X Award X Contract X Grant & Loan  | 8. TYPE OF ORGAN |                 | N:<br>♦ Corporation<br>University  | <b>◇</b> II | ndividual                    |                             |
|  |                  |                 |  | YPRIN       | ICIPAL                       |                             |
| (b) (6), (b  | ) (7             |                 | <b>(C)</b>   | es, inclu   | uding ZIP Code)              |                             |
|  |                  |                 |  |             |                              |                             |
|  |                  |                 |  |             |                              |                             |
|  |                  |                 |  |             |                              |                             |
|  |                  |                 |  |             |                              |                             |
| I hereby register as a Research Facility, Exhibitor, Carrier, or Intermediate Handler ur   | CERTIFICATI      |                 | 0.0.0424   | 1           |                              | 1. ferra and                |

the best of my knowledge. I hereby acknowledge receipt of and agree to comply with all the regulations and standards contained in 9 CFR, Subpart A, parts 1, 2 and 3. I certify that all listed persons are 18 years of age or older, 12. DATE SIGNED C

ACKNOWLEDGEMENT OF RECEIPT OF REGULATIONS AND STANDARDS

| 10. SIGNATU | b) (6), (b) (7)(C) | (b) (6), (b) (7)( |
|-------------|--------------------|-------------------|
|             |                    |                   |