

Every research facility, exhibitor, carrier, and intermediate handler not required to be licensed under Section 3 of the Animal Welfare Act, shall register with the USDA (7 USC 2136). This application provides information for such registration.		OMB No. 0579-0036 FORM APPROVED	
U.S. DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE <b>APPLICATION FOR REGISTRATION</b> (TYPE OR PRINT)  <b>REGISTRATION UPDATE</b>		<b>USDA USE ONLY</b>  Applicant should send completed form to this address. USDA APHIS ANIMAL CARE WESTERN 2150 Centre Ave. Building B, Mailstop #3W11 Fort Collins, CO 80526-8117 (970) 494-7478	
<b>1. REGISTRANT (Name and permanent mailing address, including Zip Code)</b>  Weber State University 3850 Dixon Parkway Department 1027 Ogden, UT 84408  COUNTY: Weber TELEPHONE ( ) -		<b>2. LOCATION (S) OF BUSINESS, EXHIBITION SITE(S), OR RESEARCH FACILITIES</b> (Use additional sheets if necessary) <div style="background-color: black; color: red; font-size: 2em; text-align: center; padding: 10px;">           (b) (7)(F) (b) (7)(F)         </div>	
<b>3. (A) PREVIOUS USDA REGISTRATION NUMBER (IF ANY)</b>		<b>4. (B) ACTIVE USDA CERTIFICATE NUMBER(S) IN WHICH YOU HAVE AN INTEREST:</b>	
<b>5. ARE YOU USING FEDERAL FUNDS TO CARRY OUT RESEARCH, TESTS, OR EXPERIMENTS</b>  <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<b>6. TYPE OF REGISTRATION:</b> <input checked="" type="checkbox"/> Class E – Exhibitor <input type="checkbox"/> Class H – Intermediate Handler <input checked="" type="checkbox"/> Class R – Research Facility <input type="checkbox"/> Class T – Carrier	
<b>7. FEDERAL FUND TYPES:</b> <input type="checkbox"/> Award <input type="checkbox"/> Contract <input type="checkbox"/> Grant <input type="checkbox"/> Loan		<b>8. TYPE OF ORGANIZATION:</b> <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Individual <input type="checkbox"/> Other (Specify) _____	
<b>9. IF INDIVIDUAL IDENTIFY EACH OWNER, IF PARTNERSHIP IDENTIFY EACH PARTNER OR OFFICER, IF CORPORATION, IDENTIFY PRINCIPAL OFFICERS FOR RESEARCH FACILITIES INCLUDE THE INSTITUTIONAL OFFICIAL (Use separate sheet if needed)</b>			
A. NAME	B. TITLE	C. ADDRESS (full address, including ZIP Code)	
(b) (6), (b) (7)(C)			
<b>CERTIFICATION</b>			
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. 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.			
<b>10. SIGNATURE</b> <div style="background-color: black; color: red; font-size: 1.5em; text-align: center; padding: 5px;">           (b) (6), (b) (7)(C)         </div>		<b>11. NAME AND TITLE (Type or Print)</b> <div style="background-color: black; color: red; font-size: 1.5em; text-align: center; padding: 5px;">           (b) (6), (b) (7)(C)         </div>	
<b>12. DATE SIGNED</b> 11/19/19		<b>ACKNOWLEDGEMENT OF RECEIPT OF REGULATIONS AND STANDARDS</b>	



United States  
Department of  
Agriculture

Marketing and  
Regulatory  
Programs

Animal and  
Plant Health  
Inspection  
Service

Animal Care

EXPIRATION DATE: NOVEMBER 29, 2022

This is to certify that

WEBER STATE UNIVERSITY

is a registered  
under the

CLASS R RESEARCH FACILITY

## Animal Welfare Act

(7 U.S.C. 2131 et seq.)

Certificate No. 87-R-0008

Customer No. 5

A handwritten signature in black ink. The signature appears to read "Eliphelet Golding". The script is cursive and somewhat stylized.

Deputy Administrator