

APR 25 2017

<p>According to the Paperwork Reduction Act of 1995, no persons are 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. 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.</p>		<p>FORM APPROVED OMB NO.: 0579-0036</p>																																				
<p>U.S. DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE</p> <p><b>APPLICATION FOR LICENSE</b> (TYPE OR PRINT)</p> <p><b>X RENEWAL</b></p>		<p>DO NOT USE THIS SPACE- OFFICIAL USE ONLY</p> <p>SEND THE COMPLETED FORM TO: USDA APHIS ANIMAL CARE EASTERN 920 Main Campus Drive Suite 200 Raleigh, NC 27606-5210 (919) 855-7100</p>																																				
<p>1. NAME(S) OF OWNER(S) AND MAILING ADDRESS Bartons West End Farms Inc (b) (6) Great Meadows, NJ (b) (6) COUNTY: WARREN TELEPHONE (b) (6)</p>		<p>LICENSE NO./CUST NO 22-B-0002 701</p>	<p>RENEWAL DATE 11-May-2017</p>																																			
<p>2. ALL BUSINESS NAME, LOCATIONS, AND ALL SITES HOUSING ANIMALS (P. O. Box not acceptable) (b) (6) Great Meadows, NJ (b) (6) County: Warren TELEPHONE ( )</p>		<p>FEES AMC (b) (4) DATE RECEIVED 25 April 17</p>																																				
<p>3. IF PREVIOUSLY LICENSED - NAME AND ADDRESS NA PREVIOUS LICENSE NO.:</p>		<p>4. NAME AND ADDRESS OF OTHER BUSINESS(S) HANDLING ANIMALS IN WHICH APPLICANT/LICENSEE HAS AN INTEREST NA</p>																																				
<p>5. TYPE OF LICENSE ♦ A - Dealer (Breeder) ♦ B - Dealer ♦ C - Exhibitor</p>		<p>6. DATE OF LAST BUSINESS YEAR</p> <table border="1"> <thead> <tr> <th colspan="4">FROM</th> <th colspan="4">TO</th> </tr> <tr> <th>MO</th> <th>DAY</th> <th>YEAR</th> <th>MO</th> <th>DAY</th> <th>YEAR</th> <th>MO</th> <th>DAY</th> <th>YEAR</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>5</td> <td>1</td> <td>1</td> <td>1</td> <td>6</td> <td>0</td> <td>5</td> <td>1</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>7</td> </tr> </tbody> </table>		FROM				TO				MO	DAY	YEAR	MO	DAY	YEAR	MO	DAY	YEAR	0	5	1	1	1	6	0	5	1									7
FROM				TO																																		
MO	DAY	YEAR	MO	DAY	YEAR	MO	DAY	YEAR																														
0	5	1	1	1	6	0	5	1																														
								7																														
<p>7. NATURE OF BUSINESS (Check item that describes nature of your business)</p> <p><input type="checkbox"/> A - Zoo <input type="checkbox"/> B - Aquariums <input type="checkbox"/> C - Auction</p> <p><input type="checkbox"/> D - Breeder <input type="checkbox"/> E - Pets <input type="checkbox"/> F - Roadside Zoo</p> <p><input type="checkbox"/> G - Circus <input type="checkbox"/> H - Animal Acts <input type="checkbox"/> I - Carnival</p> <p><input type="checkbox"/> J - Drive thru Zoo <input type="checkbox"/> K - Pet Store <input type="checkbox"/> L - Broker</p>		<p>8. TYPE OF ORGANIZATION ♦ Partnership ♦ Corporation ♦ Individual ♦ Other (Specify) _____</p>																																				
<p>9. LIST OWNERS, PARTNERS, AND OFFICERS</p> <table border="1"> <thead> <tr> <th>NAME AND TITLE</th> <th>ADDRESS</th> </tr> </thead> <tbody> <tr> <td>JOHN M. BARTON CEO</td> <td>(b) (6)</td> </tr> </tbody> </table>				NAME AND TITLE	ADDRESS	JOHN M. BARTON CEO	(b) (6)																															
NAME AND TITLE	ADDRESS																																					
JOHN M. BARTON CEO	(b) (6)																																					
<p>10. DEALER ONLY CLASS A (BREEDER) - LINE 'D' = 1/2 OF LINE 'C' CLASS B (DEALER) - LINE 'D' = LINE 'C' LESS THE AMOUNT PAID FOR THE ANIMAL(S) (Sections 2.6)</p>		<p>11. EXHIBITOR ONLY (No. of animals holding now or held during the last business year, whichever is greater)</p>																																				
<p>A: TOTAL NO. OF ANIMALS PURCHASED IN THE LAST BUSINESS YEAR</p>	<p>(b) (4)</p>	<p>DOGS</p>	<p>RABBITS</p>																																			
<p>B: TOTAL NO. OF ANIMALS SOLD IN THE LAST BUSINESS YEAR</p>		<p>CATS</p>	<p>NONHUMAN PRIMATES</p>																																			
<p>C: TOTAL GROSS DOLLAR AMOUNT DERIVED FROM REGULATED ACTIVITIES (SALES, BOOKING FEES, COMMISSIONS, ETC.)</p>		<p>GUINEA PIGS</p>	<p>MARINE MAMMALS</p>																																			
<p>D: DOLLAR AMOUNT OF WHICH FEE IS BASED (Sections 2.6 and 2.7)</p>		<p>HAMSTERS</p>	<p>WILD OR EXOTIC MAMMALS</p>																																			
<p>CERTIFICATION</p> <p>I hereby make application for a license under the Animal Welfare Act 7 U.S.C. 2131 et seq. I certify that the information provided herein is true and correct to the best of my knowledge. I hereby acknowledge receipt of and certify to the best of my knowledge I am in compliance with all regulations and standards in 9 CFR, Subpart A, Parts 1, 2, and 3. I certify that I am over 18 years of age.</p>																																						
<p>12. SIGNATURE (b) (6)</p>	<p>13. NAME AND TITLE (Type or Print) JOHN M. BARTON CEO</p>	<p>14. DATE 4-20-17</p>																																				

APHIS FORM 1  
(JAN 1995)

(etc)

19-04297\_000001

Obtained by Rise for Animals. Uploaded 07/07/2020

According to the Paperwork Reduction Act of 1995, no persons are 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. 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.		FORM APPROVED OMB NO.: 0579-0036																																	
<b>U.S. DEPARTMENT OF AGRICULTURE</b> <b>ANIMAL AND PLANT HEALTH INSPECTION SERVICE</b>  <h2 style="margin: 0;">APPLICATION FOR LICENSE</h2> <p style="margin: 0;">(TYPE OR PRINT)</p> <p style="margin: 10px 0 0 40px;"><b>X RENEWAL</b></p>		<p style="margin: 0;">DO NOT USE THIS SPACE- OFFICIAL USE ONLY</p> <p style="margin: 5px 0;">SEND THE COMPLETED FORM TO:  USDA APHIS ANIMAL CARE  EASTERN  920 Main Campus Drive  Suite 200  Raleigh, NC 27606-5210  (919) 855-7100</p>																																	
		LICENSE NO./CUST NO 22-B-0002 701	RENEWAL DATE 11-May-2018																																
		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: center;">FEES</th> </tr> <tr> <td style="font-size: 8px;">AMOUNT</td> <td style="font-size: 8px;">DATE RECEIVED</td> </tr> <tr> <td style="text-align: center; vertical-align: middle;">(b) (4)</td> <td style="text-align: center; vertical-align: middle;">2 May 18 VMC</td> </tr> </table>		FEES		AMOUNT	DATE RECEIVED	(b) (4)	2 May 18 VMC																										
FEES																																			
AMOUNT	DATE RECEIVED																																		
(b) (4)	2 May 18 VMC																																		
1. NAME(S) OF OWNER(S) AND MAILING ADDRESS Bartons West End Farms Inc (b) (6) Great Meadows, NJ (b) (6)  COUNTY: Warren TELEPHONE (b) (6)		2. ALL BUSINESS NAME, LOCATIONS, AND ALL SITES HOUSING ANIMALS (P. O. Box not acceptable) (b) (6) Great Meadows, NJ (b) (6) County: Warren  TELEPHONE (b) (6)																																	
3. IF PREVIOUSLY LICENSED - NAME AND ADDRESS  PREVIOUS LICENSE NO.:		4. NAME AND ADDRESS OF OTHER BUSINESS(S) HANDLING ANIMALS IN WHICH APPLICANT/LICENSEE HAS AN INTEREST																																	
5. TYPE OF LICENSE <input checked="" type="checkbox"/> A - Dealer (Breeder) <input type="checkbox"/> B - Dealer <input type="checkbox"/> C - Exhibitor		6. DATE OF LAST BUSINESS YEAR <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="4" style="text-align: center;">FROM</th> <th colspan="4" style="text-align: center;">TO</th> </tr> <tr> <th>MO</th><th>DAY</th><th>YEAR</th><th></th> <th>MO</th><th>DAY</th><th>YEAR</th><th></th> </tr> <tr> <td style="text-align: center;">0</td><td style="text-align: center;">1</td><td style="text-align: center;">0</td><td style="text-align: center;">1</td> <td style="text-align: center;">0</td><td style="text-align: center;">1</td><td style="text-align: center;">0</td><td style="text-align: center;">1</td> </tr> <tr> <td style="text-align: center;">8</td><td style="text-align: center;">1</td><td style="text-align: center;">1</td><td style="text-align: center;">9</td> <td style="text-align: center;">9</td><td style="text-align: center;">1</td><td style="text-align: center;">1</td><td style="text-align: center;">9</td> </tr> </table>		FROM				TO				MO	DAY	YEAR		MO	DAY	YEAR		0	1	0	1	0	1	0	1	8	1	1	9	9	1	1	9
FROM				TO																															
MO	DAY	YEAR		MO	DAY	YEAR																													
0	1	0	1	0	1	0	1																												
8	1	1	9	9	1	1	9																												
7. NATURE OF BUSINESS (Check item that describes nature of your business) <input type="checkbox"/> A - Zoo <input type="checkbox"/> B - Aquariums <input type="checkbox"/> C - Auction <input type="checkbox"/> D - Breeder <input type="checkbox"/> E - Pets <input type="checkbox"/> F - Roadside Zoo <input type="checkbox"/> G - Circus <input type="checkbox"/> H - Animal Acts <input type="checkbox"/> I - Carnival <input type="checkbox"/> J - Drive thru <input type="checkbox"/> K - Pet Store <input type="checkbox"/> L - Broker Zoo		8. TYPE OF ORGANIZATION <input checked="" type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Individual <input type="checkbox"/> Other (Specify) _____																																	
9. LIST OWNERS, PARTNERS, AND OFFICERS																																			
NAME AND TITLE		ADDRESS																																	
John M. Barton CEO (b) (6)		(b) (6)																																	
10. DEALER ONLY CLASS A (BREEDER) - LINE 'D' = 1/2 OF LINE 'C' CLASS B (DEALER) - LINE 'D' = LINE 'C' LESS THE AMOUNT PAID FOR THE ANIMAL(S) (Sections 2.6)		11. EXHIBITOR ONLY (No. of animals holding now or held during the last business year, whichever is greater)																																	
A: TOTAL NO. OF ANIMALS PURCHASED IN THE LAST BUSINESS YEAR	(b) (4)	DOGS	RABBITS																																
B: TOTAL NO. OF ANIMALS SOLD IN THE LAST BUSINESS YEAR	(b) (4)	CATS	NONHUMAN PRIMATES																																
C: TOTAL GROSS DOLLAR AMOUNT DERIVED FROM REGULATED ACTIVITIES (SALES, BOOKING FEES, COMMISSIONS, ETC.)	(b) (4)	GUINEA PIGS	MARINE MAMMALS																																
D: DOLLAR AMOUNT OF WHICH FEE IS BASED (Sections 2.6 and 2.7)	(b) (4)	HAMSTERS	WILD OR EXOTIC MAMMALS																																
		OTHER (i.e., farm animals) (List Species and No.)																																	
<b>CERTIFICATION</b> I hereby make application for a license under the Animal Welfare Act 7 U.S.C. 2131 et seq. I certify that the information provided herein is true and correct to the best of my knowledge. I hereby acknowledge receipt of and certify to the best of my knowledge I am in compliance with all regulations and standards in 9 CFR, Subchapter D, Parts 1-12. I certify that I am over 18 years of age.																																			
(b) (6)		13. NAME AND TITLE (Type or Print) CEO	14. DATE 4/30/18																																



## Inspection Report

Bartons West End Farms Inc

Customer ID: 701

(b) (6), (b) (7)(C)

Certificate: 22-R-0147

Great Meadows, NJ (b) (6), (b) (7)(C)

Site: 003

BARTONS WEST END FARMS INC

Type: ROUTINE INSPECTION

Date: 31-JAN-2017

No non-compliant items identified during this inspection.

This inspection was conducted January 31-February 1, 2017.

This inspection and exit interview were conducted with facility representatives.

### Additional Inspectors

Gowins Jessica, Veterinary Medical Officer

### Prepared By:

MCINTOSH ASHLEY, VMO USDA, APHIS, Animal Care

Date:  
02-FEB-2017

Title: VETERINARY MEDICAL OFFICER 6083

### Received By:

JOHN BARTON

Obtained by Rise for Animals. Uploaded 07/07/2020

Title: OWNER/SENT VIA EMAIL  
19-04297\_000003

Date:  
02-FEB-2017



Cust No	Cert No	Site	Site Name	Inspection
701	22-R-0147	003	BARTONS WEST END FARMS INC	31-JAN-17

Count	Species
000007	DOMESTIC RABBIT / EUROPEAN RABBIT
000014	DOG PUPPY
000015	DOMESTIC PIG
<b>000036</b>	<b>Total</b>



## Inspection Report

Bartons West End Farms Inc

Customer ID: 701

(b) (6), (b) (7)(C)

Certificate: 22-R-0147

Great Meadows, NJ (b) (6), (b) (7)(C)

Site: 003

BARTONS WEST END FARMS INC

Type: ROUTINE INSPECTION

Date: 15-AUG-2018

No non-compliant items identified during this inspection.

This inspection and exit interview were conducted with facility representative.

### Additional Inspectors

Karr Ellis, Veterinary Medical Officer

### Prepared By:

GOWINS JESSICA, D.V.M USDA, APHIS, Animal Care

Date:  
16-AUG-2018

Title: VETERINARY MEDICAL OFFICER 6111

### Received By:

JOHN BARTON - CHIEF EXECUTIVE OFFICER

Obtained by Rise for Animals. Uploaded 07/07/2020

Title: SENT VIA EMAIL  
19-04297\_000005

Date:  
16-AUG-2018





## Species Inspected

Cust No	Cert No	Site	Site Name	Inspection
701	22-R-0147	003	BARTONS WEST END FARMS INC	15-AUG-18

Count	Scientific Name	Common Name
000009	<i>Ovis aries aries</i>	SHEEP INCLUDING ALL DOMESTIC BREEDS
000008	<i>Sus scrofa domestica</i>	DOMESTIC PIG / POTBELLY PIG / MICRO PIG
<b>000017</b>	<b>Total</b>	