



Inspection Report

Valley Biosystems
P.O. Box 2216
West Sacramento, CA 95691

Customer ID: **18820**
Certificate: **93-R-0479**
Site: 001
VALLEY BIOSYSTEMS

Type: ROUTINE INSPECTION
Date: 25-JAN-2017

No non-compliant items identified during this inspection.

This inspection and exit interview were conducted with facility representative

Prepared By:

STEVE DRLICA USDA, APHIS, Animal Care

Title: VETERINARY MEDICAL OFFICER 5004

Date:
26-JAN-2017

Received By:

FACILITY REPRESENTATIVE

Title: DIRECTOR

Date:
26-JAN-2017



Cust No	Cert No	Site	Site Name	Inspection
18820	93-R-0479	001	VALLEY BIOSYSTEMS	25-JAN-17

Count	Species
000200	RHESUS MACAQUE
000449	CRAB-EATING MACAQUE / LONG-TAILED MACAQUE / CYNOMOLGUS MONKEY
000649	Total



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Valley Biosystems
P.O. Box 2216
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VALLEY BIOSYSTEMS

Type: ROUTINE INSPECTION
Date: 25-JAN-2017

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Title: VETERINARY MEDICAL OFFICER 5004

Date:
26-JAN-2017

Received By:

FACILITY REPRESENTATIVE

Title: DIRECTOR

Date:
26-JAN-2017



Cust No	Cert No	Site	Site Name	Inspection
18820	93-B-0216	001	VALLEY BIOSYSTEMS	25-JAN-17

No Animals were Inspected.

Count	Species
000000	NONE
000000	Total



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Customer ID: **18820**
Certificate: **93-B-0216**
Site: 001
VALLEY BIOSYSTEMS

Type: ROUTINE INSPECTION
Date: 27-JUN-2017

No non-compliant items identified during this inspection.
This inspection and exit interview were conducted with facility representative

Prepared By:

DRLICA STEVE, D V M USDA, APHIS, Animal Care

Title: VETERINARY MEDICAL OFFICER 5004

Date:
30-JUN-2017

Received By:

FACILITY REPRESENTATIVE

Title: MANAGER

Date:
30-JUN-2017



Cust No	Cert No	Site	Site Name	Inspection
18820	93-B-0216	001	VALLEY BIOSYSTEMS	27-JUN-17

No Animals were Inspected.

Count	Species
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000000	Total



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Date: 27-JUN-2017

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This inspection and exit interview were conducted with facility representative

Prepared By:

DRLICA STEVE, D V M USDA, APHIS, Animal Care

Title: VETERINARY MEDICAL OFFICER 5004

Date:
30-JUN-2017

Received By:

FACILITY REPRESENTATIVE

Title: MANAGER

Date:
30-JUN-2017



Cust No	Cert No	Site	Site Name	Inspection
18820	93-R-0479	001	VALLEY BIOSYSTEMS	27-JUN-17

Count	Species
000242	RHESUS MACAQUE
000451	CRAB-EATING MACAQUE / LONG-TAILED MACAQUE / CYNOMOLGUS MONKEY
000693	Total



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Customer ID: **18820**
Certificate: **93-R-0479**
Site: 001
VALLEY BIOSYSTEMS

Type: ROUTINE INSPECTION
Date: 29-NOV-2017

No non-compliant items identified during this inspection.
This inspection and exit interview were conducted with facility representative

Prepared By:

DRLICA STEVE, D V M USDA, APHIS, Animal Care

Title: VETERINARY MEDICAL OFFICER 5004

Date:
01-DEC-2017

Received By:

FACILITY REPRESENTATIVE

Title: DIRECTOR

Date:
01-DEC-2017



Cust No	Cert No	Site	Site Name	Inspection
18820	93-R-0479	001	VALLEY BIOSYSTEMS	29-NOV-17

Count	Species
000231	RHESUS MACAQUE
000404	CRAB-EATING MACAQUE / CYNOMOLGUS MONKEY
000635	Total



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Customer ID: **18820**
Certificate: **93-B-0216**
Site: 001
VALLEY BIOSYSTEMS

Type: ROUTINE INSPECTION
Date: 29-NOV-2017

No non-compliant items identified during this inspection.
This inspection and exit interview were conducted with facility representative

Prepared By:

DRLICA STEVE, D V M USDA, APHIS, Animal Care

Title: VETERINARY MEDICAL OFFICER 5004

Date:
01-DEC-2017

Received By:

FACILITY REPRESENTATIVE

Title: DIRECTOR

Date:
01-DEC-2017



Cust No	Cert No	Site	Site Name	Inspection
18820	93-B-0216	001	VALLEY BIOSYSTEMS	29-NOV-17

No Animals were Inspected.

Count	Species
000000	NONE
000000	Total



Inspection Report

Valley Biosystems
P.O. Box 2216
West Sacramento, CA 95691

Customer ID: **18820**

Certificate: **93-R-0479**

Site: 001

VALLEY BIOSYSTEMS

Type: PILOT ANNOUNCED INSPECTION

Date: 23-MAY-2018

No non-compliant items identified during this inspection.

This inspection and exit interview were conducted with facility representative

Prepared By:

DRLICA STEVE, D V M USDA, APHIS, Animal Care

Title: VETERINARY MEDICAL OFFICER 5004

Date:

12-JUN-2018

Received By:

FACILITY REPRESENTATIVE

Title: MANAGER

Date:

12-JUN-2018



Species Inspected

Cust No	Cert No	Site	Site Name	Inspection
18820	93-R-0479	001	VALLEY BIOSYSTEMS	23-MAY-18

Count	Scientific Name	Common Name
000361	<i>Macaca fascicularis</i>	CRAB-EATING MACAQUE / CYNOMOLGUS MONKEY
000206	<i>Macaca mulatta</i>	RHESUS MACAQUE
000567	Total	



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Customer ID: **18820**
Certificate: **93-B-0216**
Site: 001
VALLEY BIOSYSTEMS

Type: ROUTINE INSPECTION
Date: 23-MAY-2018

No non-compliant items identified during this inspection.
This inspection and exit interview were conducted with facility representative

Prepared By:

DRLICA STEVE, D V M USDA, APHIS, Animal Care

Title: VETERINARY MEDICAL OFFICER 5004

Date:
24-MAY-2018

Received By:

FACILITY REPRESENTATIVE

Title: MANAGER

Date:
24-MAY-2018



Species Inspected

Cust No	Cert No	Site	Site Name	Inspection
18820	93-B-0216	001	VALLEY BIOSYSTEMS	23-MAY-18

No Animals were Inspected.

Count	Scientific Name	Common Name
000000	NONE	NONE
000000	Total	



Inspection Report

Valley Biosystems
P.O. Box 2216
West Sacramento, CA 95691

Customer ID: **18820**
Certificate: **93-R-0479**
Site: 001
VALLEY BIOSYSTEMS

Type: --RESCINDED--
Date: 23-MAY-2018

No non-compliant items identified during this inspection.
This inspection and exit interview were conducted with facility representative

Prepared By:

DRLICA STEVE, D V M USDA, APHIS, Animal Care

Title: VETERINARY MEDICAL OFFICER 5004

Date:
24-MAY-2018

Received By:

FACILITY REPRESENTATIVE

Title: MANAGER

Date:
24-MAY-2018



Species Inspected

--RESCINDED--

Cust No	Cert No	Site	Site Name	Inspection
18820	93-R-0479	001	VALLEY BIOSYSTEMS	23-MAY-18

Count	Scientific Name	Common Name
000361	<i>Macaca fascicularis</i>	CRAB-EATING MACAQUE / CYNOMOLGUS MONKEY
000206	<i>Macaca mulatta</i>	RHESUS MACAQUE
000567	Total	



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Customer ID: **18820**
Certificate: **93-R-0479**
Site: 001
VALLEY BIOSYSTEMS

Type: ROUTINE INSPECTION
Date: 23-MAY-2018

No non-compliant items identified during this inspection.

This inspection and exit interview were conducted with facility representative

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



Prepared By:

DRLICA STEVE, D V M USDA, APHIS, Animal Care

Title: VETERINARY MEDICAL OFFICER 5004

Received By:

FACILITY REPRESENTATIVE

Date:
24-MAY-2018

Date:



United States Department of Agriculture
Animal and Plant Health Inspection Service

Customer: 18820
Inspection Date: 23-MAY-18

Species Inspected

Cust No	Cert No	Site	Site Name	Inspection
18820	93-R-0479	001	VALLEY BIOSYSTEMS	23-MAY-18

Count	Scientific Name	Common Name
000361	<i>Macaca fascicularis</i>	CRAB-EATING MACAQUE / CYNOMOLGUS MONKEY
000206	<i>Macaca mulatta</i>	RHESUS MACAQUE
000567	Total	

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

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.

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

APPLICATION FOR LICENSE (TYPE OR PRINT)

X RENEWAL

DO NOT USE THIS SPACE - OFFICIAL USE ONLY

SEND THE COMPLETED FORM TO:
USDA APHIS ANIMAL CARE
WESTERN
2150 Centre Ave.
Building B, Mailstop 3W11
Fort Collins, CO 80526-8117
(970) 494-7478

LICENSE NO./CUST NO

93-B-0216

18820

RENEWAL DATE

15-Jul-2017

FEES

AMOUNT (b) (4)

DATE RECEIVED

12 July 2017

1. NAME(S) OF OWNER(S) AND MAILING ADDRESS

Valley Biosystems
P.O. Box 2216
West Sacramento, CA 95691

COUNTY: YOLO TELEPHONE (916) 374-2735

2. ALL BUSINESS NAME, LOCATIONS, AND ALL SITES HOUSING ANIMALS (P.O. Box not acceptable)

1265 Triangle Court
West Sacramento, CA 95605
County: Yolo

TELEPHONE (916) 374-2735

3. IF PREVIOUSLY LICENSED - NAME AND ADDRESS

PREVIOUS LICENSE NO

5. TYPE OF LICENSE

☒ A - Dealer (Breeder) ☐ B - Dealer ☐ C - Exhibitor

7. NATURE OF BUSINESS (Check item that describes nature of your business)

- ☐ A - Zoo ☐ B - Aquariums ☐ C - Auction
☐ D - Breeder ☐ E - Pets ☐ F - Roadside Zoo
☐ G - Circus ☐ H - Animal Acts ☐ I - Carnival
☐ J - Drive thru ☐ K - Pet Store ☐ L - Broker
Zoo

4. NAME AND ADDRESS OF OTHER BUSINESS(S) HANDLING ANIMALS IN WHICH APPLICANT/LICENSEE HAS AN INTEREST

6. DATE OF LAST BUSINESS YEAR

FROM			TO		
MO	DAY	YEAR	MO	DAY	YEAR
0	7	01	0	6	3

8. TYPE OF ORGANIZATION

- ☒ Partnership ☐ Corporation ☐ Individual
☐ Other (Specify) _____

9. LIST OWNERS, PARTNERS, AND OFFICERS

NAME AND TITLE

ADDRESS

Stephen Cello

P.O. Box 2216
West Sacramento, CA 95691

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)

A: TOTAL NO. OF ANIMALS PURCHASED IN THE LAST BUSINESS YEAR

(b) (4)

B: TOTAL NO. OF ANIMALS SOLD IN THE LAST BUSINESS YEAR

C: TOTAL GROSS DOLLAR AMOUNT DERIVED FROM REGULATED ACTIVITIES (SALES, BOOKING FEES, COMMISSIONS, ETC.)

D: DOLLAR AMOUNT OF WHICH FEE IS BASED (Sections 2.6 and 2.7)

11. EXHIBITOR ONLY (No. of animals holding now or held during the last business year, whichever is greater)

DOGS

CATS

GUINEA PIGS

HAMSTERS

OTHER (i.e., farm animals) (List species and No.)

RABBITS

NONHUMAN PRIMATES

MARINE MAMMALS

WILD OR EXOTIC MAMMALS

CERTIFICATION

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.

12. SIGNATURE (b) (6), (b) (7)(C)

13. NAME AND TITLE (Type or Print)

Stephen Cello, COO

14. DATE

11 Jul 17

JUL 12 2017



**United States
Department of
Agriculture**

**Marketing and
Regulatory
Programs**

**Animal and
Plant Health
Inspection
Service**

Animal Care

EXPIRATION DATE: MAY 28, 2018

This is to certify that

VALLEY BIOSYSTEMS

is a licensed
under the

CLASS R RESEARCH FACILITY

Animal Welfare Act

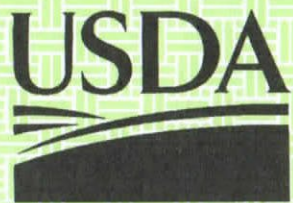
(7 U.S.C. 2131 et seq.)

Certificate No. 93-R-0479

Customer No. 18820

A handwritten signature in black ink, appearing to be "B. J. [unclear]", written over a horizontal line.

Deputy Administrator



**United States
Department of
Agriculture**

**Marketing and
Regulatory
Programs**

**Animal and
Plant Health
Inspection
Service**

Animal Care

EXPIRATION DATE: JULY 15, 2019

This is to certify that

VALLEY BIOSYSTEMS

is a licensed
under the

CLASS B DEALER

Animal Welfare Act

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

Certificate No. 93-B-0216

Customer No. 18820

A handwritten signature in black ink, appearing to be "J. L. [unclear]". The signature is written in a cursive, flowing style.

Deputy Administrator

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FORM APPROVED OMB NO.: 0579-0036

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U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

APPLICATION FOR LICENSE (TYPE OR PRINT)

X RENEWAL

DO NOT USE THIS SPACE - OFFICIAL USE ONLY

SEND THE COMPLETED FORM TO:
USDA APHIS ANIMAL CARE
WESTERN
2150 Centre Ave.
Building B, Mailstop 3W11
Fort Collins, CO 80526-8117
(970) 494-7478

LICENSE NO./CUST NO
93-B-0216
18820

RENEWAL DATE
15-Jul-2018

FEES

DATE RECEIVED

(b) (4)

7/9/18

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P.O. Box 2216
West Sacramento, CA 95691

COUNTY: Yolo TELEPHONE (916) 374-2735

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West Sacramento, CA 95605
County: Yolo

TELEPHONE ()

3. IF PREVIOUSLY LICENSED - NAME AND ADDRESS

PREVIOUS LICENSE NO.:

4. TYPE OF LICENSE

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☐ D - Breeder ☐ E - Pets ☐ F - Roadside Zoo
☐ G - Circus ☐ H - Animal Acts ☐ I - Carnival
☐ J - Drive thru Zoo ☐ K - Pet Store ☐ L - Broker

6. DATE OF LAST BUSINESS YEAR

FROM						TO					
MO		DAY		YEAR		MO		DAY		YEAR	
0	1	0	1	1	7	0	1	0	1	1	8

7. TYPE OF ORGANIZATION

- ◊ Partnership ◊ Corporation ◊ Individual
◊ Other (Specify) _____

8. LIST OWNERS, PARTNERS, AND OFFICERS

NAME AND TITLE

ADDRESS

Stephen Cello

P.O. Box 2216
West Sacramento, CA 95691

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)

A: TOTAL NO. OF ANIMALS PURCHASED IN THE LAST BUSINESS YEAR	108
B: TOTAL NO. OF ANIMALS SOLD IN THE LAST BUSINESS YEAR	45
C: TOTAL GROSS DOLLAR AMOUNT DERIVED FROM REGULATED ACTIVITIES (SALES, BOOKING FEES, COMMISSIONS, ETC.)	281,050
D: DOLLAR AMOUNT OF WHICH FEE IS BASED (Sections 2.6 and 2.7)	101,050

11. EXHIBITOR ONLY (No. of animals holding now or held during the last business year, whichever is greater)

DOGS	RABBITS
CATS	NONHUMAN PRIMATES
GUINEA PIGS	MARINE MAMMALS
HAMSTERS	WILD OR EXOTIC MAMMALS
OTHER (i.e., farm animals) (List Species and No.)	

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12. SIGNATURE (b) (6), (b) (7)(C)

13. NAME AND TITLE (Type or Print)

Stephen Cello, COO

14. DATE

7/6/18

09 JUL 2018