

## APPLICATION FOR APPROVAL TO KEEP AND USE LABORATORY ANIMALS

(Pursuant to California Health and Safety Code, Division 2, Chapter 5, Sections 1650 to 1677 and California Code of Regulations Title 17, Chapter 2, Subchapter I, Group 5, Care of Laboratory Animals: Sections 1150 to 1159.)

Return completed form to: California Department of Public Health  
 Animal Use Approval Program  
 850 Marina Bay Parkway, Room B-153  
 Richmond, California 94804

1. Name of institution		Telephone number (include area code)	
Address (number/street)	City	State	ZIP code
2. Mailing address, if different		City	State ZIP code
3. Name of owner (if a corporation, chief executive officer (CEO))			
Address (number/street)	City	State	ZIP code
4. Name of individual directly responsible for animal care and use program and records			

5. Attending or consulting veterinarian, if any

---

6. Are all animals maintained at a single location?

Yes

No-list additional locations and individual responsible at each (use additional sheet if necessary)

---

7. Types of animal use (check all that apply)

Instructional     
  Breeding     
  Testing     
  Research     
  Surgery     
  Clinical assay

Other: \_\_\_\_\_

---

8. Animals kept or used during the previous calendar year

Species	Number	Source
Laboratory mice		
Laboratory rats		
Other		

9. Signature of individual responsible for animal care \_\_\_\_\_ Date \_\_\_\_\_

10. Signature of owner or chief executive officer \_\_\_\_\_ Date \_\_\_\_\_