



Danny & Debra Kolwyck
Blitzen & Co
16101 S Lake Rd
Pleasant Hill, MO 64080

July 16, 2007

Customer No: 4535
Certificate No: 43-C-0208
Renewal Date: 09/19/2007
RE: LICENSE RENEWAL

United States
Department of
Agriculture

Animal and Plant
Health Inspection
Service

Animal Care
Western Region

2150 Centre Ave.
Building B
Mail Stop # 3W11
Ft. Collins, CO 80526
Phone: 970/494-7478

Dear Licensee:

This is to remind you that your U.S. Department of Agriculture (USDA) Animal Welfare Act (AWA) license is due for renewal on or before the above expiration date. This is the only renewal notice you will receive.

Please complete the enclosed application form, making any necessary corrections to the pre-printed information, and return it to the above address, along with the appropriate license renewal fee. The annual fee is calculated by using the enclosed fee schedule. You may pay by cashier's check, certified check, personal check or money order made payable to the United States Department of Agriculture. You can also pay with a Visa or MasterCard, using the enclosed credit card authorization form. However, we cannot accept cash payments.

Please note that you must have an approved, complete, and up-to-date program of veterinary care form on file at your place of business. You can obtain blank forms -- or any others you may need -- directly from this office or your USDA inspector. The AWA also requires that you report to us any changes in your name, address, location, management, control or ownership of your business via certified mail within 10 days after the change has occurred.

It is very important that you file your AWA license renewal application before the expiration date elapses -- any renewal notices received after that date will be considered invalid and returned. Accordingly, to continue to conduct AWA regulated business, it would be necessary for you to reapply and undergo the entire pre-licensing process. If your license expires and you continue to operate as a dealer or exhibitor, you will be in violation of the AWA and subject to legal action.

We appreciate your efforts in complying with the Animal Welfare Act. Contact this office at 970-494-7469 if you have any questions regarding this letter or the Animal Welfare Act.

Sincerely,

Robert M. Gibbens
Regional Director - Animal Care
Western Region

cc: Jennifer M. Schmitz, A.C.I.

Enclosures



Safeguarding American Agriculture
APHIS is an agency of USDA's Marketing and Regulatory Programs

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United States
Department of
Agriculture

Animal and Plant
Health Inspection
Service

Animal Care
Western Region

2150 Centre Ave.
Building B
Mail Stop # 3W11
Ft. Collins, CO 80526
Phone: 970/494-7478
Fax: 970/494-7461

September 7, 2007

Customer No: 4535
Certificate No: 43-C-0208
Renewal Date: 09/19/2008
RE: ACKNOWLEDGEMENT OF RENEWAL

Danny & Debra Kolwyck
Blitzen & Co
16101 S Lake Rd
Pleasant Hill, MO 64080

Dear Licensee:

Thank you for submitting your Animal Welfare Act (AWA) license renewal documents and applicable fees. Enclosed is a copy of the renewal form and a new certificate indicating that your AWA license has been renewed for another year.

As a reminder, you should file your application for renewal and pay your licensing fees on or before the expiration date each year. We will send you a renewal notice again next year about 60 days before the expiration date of your license. If you cease conducting regulated activities, you may cancel your license at any time by notifying us, in writing, that you wish to terminate your license.

The law also requires that you notify us, by certified mail, of any change in the name, address, location, management and control or ownership of your business within 10 days after such a change has occurred.

Please be advised that your facility records must be kept current and they are subject to review by APHIS Officials during compliance inspections. You may order record keeping forms from this office free of charge.

We appreciate your efforts in complying with the Animal Welfare Act. Contact this office at 970-494-7469 if you have any questions regarding this letter or the Animal Welfare Act.

Sincerely,

Robert M. Gibbens
Regional Director - Animal Care
Western Region

cc: Jennifer M. Schmitz, A.C.I.

Enclosures



**United States
Department of
Agriculture**

**Marketing and
Regulatory
Programs**

**Animal and
Plant Health
Inspection
Service**

Animal Care

EXPIRATION DATE: SEPTEMBER 19, 2008

This is to certify that
DANNY & DEBRA KOLWYCK

is a licensed
under the
CLASS C EXHIBITOR

Animal Welfare Act

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

Certificate No. 43-C-0208

Customer No. 4535


Deputy Administrator

Public reporting burden for this collection of information 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. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, D.C. 20250, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503

FORM APPROVED OMB NO. 0579-0036

No license may be issued unless a completed application has been received (7 U.S.C. 2133-2143), and the applicant is in compliance with the standards and regulations Section 2133.

<p>U.S DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE</p> <p>APPLICATION FOR LICENSE (TYPE OR PRINT)</p> <p>LICENSE RENEWAL</p>	<p style="text-align: center;">DO NOT USE THIS SPACE - OFFICIAL USE ONLY</p> <p>SEND THE COMPLETED FORM TO: 2150 Centre Ave, Building B <i>WE 7-0059, CC#444</i> Mailstop # 3w11 Fort Collins, CO 80526 8117 Telephone: (970) 494-7478 <i>Renewal Fee 5529</i></p>								
	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:40%;">CERTIFICATE / CUSTOMER NO.</th> <th style="width:20%;">RENEWAL DATE</th> <th style="width:20%;">FEES</th> <th style="width:20%;"></th> </tr> <tr> <td>CERT: 43-C-0208 CUST: 4535</td> <td>19-SEP-2007</td> <td>AMOUNT 235.00</td> <td>DATE RECEIVED 6 Sep 07</td> </tr> </table>	CERTIFICATE / CUSTOMER NO.	RENEWAL DATE	FEES		CERT: 43-C-0208 CUST: 4535	19-SEP-2007	AMOUNT 235.00	DATE RECEIVED 6 Sep 07
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CERT: 43-C-0208 CUST: 4535	19-SEP-2007	AMOUNT 235.00	DATE RECEIVED 6 Sep 07						

<p>1. NAME(S) OF LICENSEE(S) AND MAILING ADDRESS</p> <p>Danny & Debra Kolwyck</p> <p>16101 S Lake Rd Pleasant Hill, MO 64080</p> <p>Telephone: (816)540-6050</p>	<p>2. ALL BUSINESS (Site) LOCATIONS HOUSING ANIMALS; INCLUDE DIRECTIONS TO EACH LOCATION (P.O. Box not acceptable)</p> <p>16101 S. Lake Rd Pleasant Hill, MO 64080 County: Cass</p> <p>Telephone: (816)540-6050</p>
--	--

<p>3. LIST PERSONS 18 YEARS OF AGE OR OLDER AUTHORIZED TO CONDUCT BUSINESS. RESPONSIBLE OFFICIAL SIGNING BLOCK 10 SHOULD BE LISTED IN THIS BLOCK.</p>	<p>4. (A) PREVIOUS USDA LICENSE NUMBER (if any)</p> <p style="text-align: center;">--</p> <p>(B) ACTIVE USDA CERTIFICATE NUMBER IN WHICH YOU HAVE AN INTEREST:</p>
--	--

5. TYPE OF LICENSE

Class A - Breeder
 Class B - Dealer
 Class C - Exhibitor

<p>6. DATE OF LAST 12-MONTH BUSINESS YEAR (CALENDAR OR FISCAL)</p> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; text-align: center; border-bottom: 1px solid black;">FROM</td> <td style="width:50%; text-align: center; border-bottom: 1px solid black;">TO</td> </tr> <tr> <td style="text-align: center;">01-SEP-2006</td> <td style="text-align: center;">01-SEP-2007</td> </tr> </table>	FROM	TO	01-SEP-2006	01-SEP-2007	<p>7. TYPE OF ORGANIZATION</p> <p> <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other (Specify) _____ </p>
FROM	TO				
01-SEP-2006	01-SEP-2007				

<p>8. DEALERS ONLY. Class A or Class B licensees must complete this Block. (Class C Exhibitors go to Block 9)</p> <p>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) NOT A FOIA DELETION</p> <p>A. TOTAL NO. OF ANIMALS PURCHASED IN THE LAST BUSINESS YEAR</p> <p>B. TOTAL NO. OF ANIMALS SOLD IN THE LAST BUSINESS YEAR</p> <p>C. TOTAL GROSS DOLLAR AMOUNT DERIVED FROM REGULATED ACTIVITIES (SALES, BOOKING FEES, COMMISSIONS, ETC.)</p> <p>D. DOLLAR AMOUNT ON WHICH FEE IS BASED (SECTIONS 2.6 AND 2.7)</p>	<p>9. CLASS C EXHIBITORS ONLY. (Number of animals holding now or held during the last business year, whichever is greater.)</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">DOGS</td> <td style="width:25%;">NONHUMAN PRIMATES</td> <td style="width:25%; text-align: center;">30</td> <td style="width:25%;">RODENTS <small>(Do not include lab rats or mice)</small></td> </tr> <tr> <td>CATS</td> <td>MARINE ANIMALS</td> <td></td> <td>WILD/EXOTIC HOOFSTOCK</td> </tr> <tr> <td>GUINEA PIGS</td> <td>FARM ANIMALS</td> <td style="text-align: center;">6</td> <td>BEARS</td> </tr> <tr> <td>HAMSTERS</td> <td>WILD/EXOTIC CANINES</td> <td style="text-align: center;">4</td> <td>WILD/EXOTIC MAMMALS <small>(NOT LISTED ELSEWHERE)</small></td> </tr> <tr> <td>RABBITS</td> <td>WILD/EXOTIC FELINES</td> <td></td> <td>TOTAL <small>(ALL ANIMALS LISTED IN BLOCK 9)</small></td> </tr> </table> <p style="text-align: right; font-size: 2em;">138</p>	DOGS	NONHUMAN PRIMATES	30	RODENTS <small>(Do not include lab rats or mice)</small>	CATS	MARINE ANIMALS		WILD/EXOTIC HOOFSTOCK	GUINEA PIGS	FARM ANIMALS	6	BEARS	HAMSTERS	WILD/EXOTIC CANINES	4	WILD/EXOTIC MAMMALS <small>(NOT LISTED ELSEWHERE)</small>	RABBITS	WILD/EXOTIC FELINES		TOTAL <small>(ALL ANIMALS LISTED IN BLOCK 9)</small>
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CERTIFICATION *Last insp. 9/21/06 (163 animals) Re-SEP - 6 2007*

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 the regulations and standards in 9 CFR, Subpart A, Parts 1, 2 and 3. I certify that I am 18 years of age or older.

<p>11. PRINT NAME</p> <p style="font-size: 1.5em; text-align: center;"><i>Debra Kolwyck</i></p>	<p>12. SOCIAL SECURITY OR TAX IDENTIFICATION NUMBER</p>	<p>13. DATE</p> <p style="font-size: 1.5em; text-align: center;">9-4-07</p>
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July 21, 2008



Danny & Debra Kolwyck
Blitzen & Co
16101 S Lake Rd
Pleasant Hill, MO 64080

Customer No: 4535
Certificate No: 43-C-0208
Renewal Date: 09/19/2008
RE: LICENSE RENEWAL

United States
Department of
Agriculture

Dear Licensee:

Animal and Plant
Health Inspection
Service

This is to remind you that your U.S. Department of Agriculture (USDA) Animal Welfare Act (AWA) license is due for renewal on or before the above expiration date. This is the only renewal notice you will receive.

Animal Care
Western Region

Please complete the enclosed application form, making any necessary corrections to the pre-printed information, and return it to the above address, along with the appropriate license renewal fee. The annual fee is calculated by using the enclosed fee schedule. You may pay by cashier's check, certified check, personal check or money order made payable to the United States Department of Agriculture. You can also pay with a Visa or MasterCard, using the enclosed credit card authorization form. However, we cannot accept cash payments.

2150 Centre Ave.
Building B
Mail Stop # 3W11
Ft. Collins, CO 80526
Phone: 970-494-7478
Fax: 970/494-7461

Please note that you must have an approved, complete, and up-to-date program of veterinary care on file at your place of business. You can obtain blank forms -- or any others you may need -- directly from this office or your USDA inspector. The AWA also requires that you report to us any changes in your name, address, location, management, control or ownership of your business via certified mail within 10 days after the change has occurred.

It is very important that you file your AWA license renewal application before the expiration date elapses -- any renewal notices received after that date will be considered invalid and returned. Accordingly, to continue to conduct AWA regulated business, it would be necessary for you to reapply and undergo the entire pre-licensing process. If your license expires and you continue to operate as a dealer or exhibitor, you will be in violation of the AWA and subject to legal action.

We appreciate your efforts in complying with the Animal Welfare Act. Contact this office at 970-494-7469 if you have any questions regarding this letter or the Animal Welfare Act.

Sincerely,

Robert M. Gibbens
Regional Director - Animal Care
Western Region

cc: Jennifer M. Schmitz, A.C.I.

Enclosures



Safeguarding American Agriculture
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May 19, 2008

United States
Department of
Agriculture

Animal and Plant
Health Inspection
Service

Animal Care
Western Region

2150 Centre Ave.
Building B
Mail Stop # 3W11
Ft. Collins, CO 80526
Phone: 970/494-7478
Fax: 970/494-7461

43-C-0208
DANNY & DEBRA KOLWYCK
16101 S LAKE RD
PLEASANT HILL, MO 64080

Dear licensee,

Your certificate has, to date, been issued to the two (or more) individuals listed in Block 1 of your applications. Our legal department recently informed us that we can no longer issue "individual" licenses to more than one person.

Therefore, as of June 9, 2008, your "Type of Organization" status will be changed from "individual" to "partnership" for all future documents and all names will still appear as shown on the above label.

Please notify us by June 6, 2008 if you wish to make any corrections or changes.

Thank you for your cooperation.

Sincerely,

Robert M. Gibbens, DVM
Director, Western Region
USDA, APHIS, Animal Care



Safeguarding American Agriculture
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FORM APPROVED OMB NO. 0579-0036

No license may be issued unless a completed application has been received (7 U.S.C. 2133-2143), 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)

LICENSE RENEWAL

DO NOT USE THIS SPACE - OFFICIAL USE ONLY

SEND THE COMPLETED FORM TO: 2150 Centre Ave, Building B
Mailstop # 3w11
Fort Collins, CO 80526 8117
Telephone: (970) 494-7478
WE-8-0061, VC 9718
Rae

CERTIFICATE / CUSTOMER NO.	RENEWAL DATE	FEES	
		AMOUNT	DATE RECEIVED
CERT: 43-C-0208 CUST: 4535	19-SEP-2008	235.00	15 Sep 08

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

Danny & Debra Kolwyck
16101 S Lake Rd
Pleasant Hill, MO 64080
Telephone: (816)540-6050

2. ALL BUSINESS (Site) LOCATIONS HOUSING ANIMALS; INCLUDE DIRECTIONS TO EACH LOCATION (P.O. Box not acceptable)

16101 S Lake Rd
Pleasant Hill, MO 64080
County: Cass
Telephone: (816)540-6050

3. LIST PERSONS 18 YEARS OF AGE OR OLDER AUTHORIZED TO CONDUCT BUSINESS. RESPONSIBLE OFFICIAL SIGNING BLOCK 10 SHOULD BE LISTED IN THIS BLOCK.

Same as Block 1. Rae

4. (A) PREVIOUS USDA LICENSE NUMBER (if any)

--

(B) ACTIVE USDA CERTIFICATE NUMBER IN WHICH YOU HAVE AN INTEREST:

5. TYPE OF LICENSE

Class A - Breeder Class B - Dealer Class C - Exhibitor

6. DATE OF LAST 12-MONTH BUSINESS YEAR (CALENDAR OR FISCAL)

FROM	TO
01-SEP-2007	01-SEP-2008

7. TYPE OF ORGANIZATION

Individual Corporation Partnership
 Other (Specify) _____

8. DEALERS ONLY. Class A or Class B licensees must complete this Block. (Class C Exhibitors go to Block 9)

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) **NOT A FOIA DELETION**

A. TOTAL NO. OF ANIMALS PURCHASED IN THE LAST BUSINESS YEAR
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 ON WHICH FEE IS BASED (SECTIONS 2.6 AND 2.7)

9. CLASS C EXHIBITORS ONLY. (Number of animals holding now or held during the last business year, whichever is greater.)

DOGS	10	NONHUMAN PRIMATES	47	RODENTS (Do not include lab rats or mice)	
CATS	/	MARINE ANIMALS	/	WILD/EXOTIC HOOFSTOCK	26
GUINEA PIGS	/	FARM ANIMALS	6	BEARS	/
HAMSTERS	/	WILD/EXOTIC CANINES	/	WILD/EXOTIC MAMMALS (NOT LISTED ELSEWHERE)	32
RABBITS	/	WILD/EXOTIC FELINES	1	TOTAL (ALL ANIMALS LISTED IN BLOCK 9)	172

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 the regulations and standards in 9 CFR, Subpart A, Parts 1, 2 and 3. I certify that I am 18 years of age or older.

11. PRINT NAME

Debra Kolwyck

12. SOCIAL SECURITY OR TAX IDENTIFICATION NUMBER

[REDACTED]

13. DATE

9/12/08



United States
Department of
Agriculture

Marketing and
Regulatory
Programs

Animal and
Plant Health
Inspection
Service
Animal Care

EXPIRATION DATE: SEPTEMBER 19, 2009

This is to certify that DANNY & DEBRA KOLWYCK

is a licensed
under the
CLASS C EXHIBITOR

Animal Welfare Act

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

Certificate No. 43-C-0208

Customer No. 4535


Deputy Administrator



United States
Department of
Agriculture

Animal and Plant
Health Inspection
Service

Animal Care
Western Region

2150 Centre Ave.
Building B
Mail Stop # 3W11
Ft. Collins, CO 80526
Phone: 970-494-7478
Fax: 970/494-7461

September 17, 2008

Customer No: 4535
Certificate No: 43-C-0208
Renewal Date: 09/19/2009
RE: ACKNOWLEDGEMENT OF RENEWAL

Danny & Debra Kolwyck
Blitzen & Co
16101 S Lake Rd
Pleasant Hill, MO 64080

Dear Licensee:

Thank you for submitting your Animal Welfare Act (AWA) license renewal documents and applicable fees. Enclosed is a copy of the renewal form and a new certificate indicating that your AWA license has been renewed for another year.

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Sincerely,

Robert M. Gibbens
Regional Director - Animal Care
Western Region

cc: Jennifer M. Schmitz, A.C.I.

Enclosures



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United States
Department of
Agriculture

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Animal Care
Western Region

2150 Centre Ave.
Building B
Mail Stop # 3W11
Ft. Collins, CO 80526
Phone: 970-494-7478
Fax: 970/494-7461

RE: LICENSE RENEWAL
Certificate Number: 43-C-0208
Renewal Date: 09/19/2009

July 20, 2009
Customer ID Number: 4535

Danny Kolwyck
Debra Kolwyck
Blitzen & Co
16101 S Lake Rd
Pleasant Hill, MO 64080

Dear Licensee:

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Sincerely,

Robert M. Gibbens, D V M
Regional Director – Animal Care
Western Region

cc: Jennifer M. Schmitz, A.C.I.

Enclosures



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An Equal Opportunity Provider and Employer



09-Sep-09

CERTIFIED MAIL
RETURN RECEIPT
#7008 0500 0000 7755 2309

United States
Department of
Agriculture

Danny Kolwyck
Debra Kolwyck
16101 S. Lake Rd.
Pleasant Hill, MO 64080

Customer ID: 4535
License #: 43-C-0208
Renewal Date: 19-Sep-09

Animal and Plant
Health Inspection
Service

Dear Licensee:

Animal Care
Western Region

We recently received your check and application for a License Renewal under the Animal Welfare Act (AWA). However, we are unable to process it for the reasons indicated below. Please return the appropriate fee to our office on or before 23-Sep-09 to avoid cancellation.

2150 Centre Ave.
Building B
Mail Stop # 3W11
Ft. Collins, CO
80526
Phone: 970/494-
7478
Fax: 970/494-7461

- Please complete and submit original form APHIS Form 7003-A.
- Please send \$10.00 application fee.
- Please send \$ 235.00 fee required under Block 11 of form.
- Please return the corrected form along with payment of \$_____.
- Please correct/complete the enclosed Credit Card Authorization form.
- Please provide an original signature.
- We have returned your check #8063 in the amount of \$ 245.00, which was received on 8-Sep-09, because of incorrect amount. Please send payment in the amount of \$235.00 to our office on or before 23-Sep-09 to avoid cancellation.

PLEASE CORRECT THE FOLLOWING BLOCKS ON THE FORM:

- | | | |
|----------------------------------|---|-----------------------------------|
| <input type="checkbox"/> Block 1 | <input type="checkbox"/> Block 6 | <input type="checkbox"/> Block 10 |
| <input type="checkbox"/> Block 2 | <input type="checkbox"/> Block 11 | |
| <input type="checkbox"/> Block 3 | <input type="checkbox"/> Block 7 | |
| <input type="checkbox"/> Block 4 | <input type="checkbox"/> Block 8 | <input type="checkbox"/> Block 13 |
| <input type="checkbox"/> Block 5 | <input type="checkbox"/> Block 9 | <input type="checkbox"/> Block 14 |
| | <input type="checkbox"/> Federal Tax ID (green sheet) | |

If you have any questions regarding this letter or the Animal Welfare Act, please feel free to contact this office at (970) 494-7469.

Sincerely,

Robert M. Gibbens, DVM
Director
Western Region, Animal Care

cc: Jennifer Schmitz, ACI

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)

RENEWAL

DO NOT USE THIS SPACE - OFFICIAL USE ONLY

SEND THE COMPLETED FORM TO: *WR-9-0056, ck. 8078*
Western Region
2150 Centre Ave.
Building B, Mailstop 3W11
Fort Collins, CO 80526-8117
(970) 494-7478 *Rae*

LICENSE NO./CUST NO	RENEWAL DATE	FEES	
43-C-0208 4535	19-Sep-2009	AMOUNT	DATE RECEIVED
		<i>235.00</i>	<i>21 Sep 09</i>

1. NAME(S) OF OWNER(S) AND MAILING ADDRESS
Danny Kolwyck
Debra Kolwyck
16101 S Lake Rd
Pleasant Hill, MO 64080
COUNTY: CASS TELEPHONE (816) - 540 - 6050

2. ALL BUSINESS NAME, LOCATIONS, AND ALL SITES HOUSING ANIMALS (P. O. Box not acceptable)
16101 S Lake Rd
Pleasant Hill, MO 64080
County: CASS TELEPHONE ()
Blitzen & Co.

3. IF PREVIOUSLY LICENSED - NAME AND ADDRESS

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

5. TYPE OF LICENSE
 A - Dealer (Breeder) B - Dealer C - Exhibitor

6. DATE OF LAST BUSINESS YEAR

FROM						TO					
MO	DAY	YEAR		MO	DAY	YEAR					
0	9	0	1	0	9	0	1				

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

8. TYPE OF ORGANIZATION
 Partnership Corporation Individual
 Other (Specify) _____

9. LIST OWNERS, PARTNERS, AND OFFICERS

NAME AND TITLE	ADDRESS
<i>Same as Block 1. Rae per ph w/Debra Rae</i>	

10. DEALER ONLY	11. EXHIBITOR ONLY (No. of animals holding now or held during the last business year, whichever is greater)			
TOTAL NO. OF ANIMALS PURCHASED IN THE LAST BUSINESS YEAR	DOGS	<i>2</i>	RABBITS	<i>1</i>
TOTAL NO. OF ANIMALS SOLD IN THE LAST BUSINESS YEAR	CATS		NONHUMAN PRIMATES	<i>38</i>
TOTAL GROSS AMOUNT DERIVED FROM THE SALE OF ANIMALS	GUINEA PIGS		MARINE MAMMALS	
DOLLAR AMOUNT OF WHICH FEE IS BASED (Sections 2.6 and 2.7)	HAMSTERS		WILD OR EXOTIC MAMMALS	<i>93</i>
	OTHER (i.e., farm animals) (List Species and No.)	<i>old goats 10 horses 3</i>		TOTAL: <i>148</i>

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 and 3. I certify that I am over 18 years of age.

13. NAME AND TITLE (Type or Print)	14. DATE
<i>Debra Kolwyck - president</i>	<i>9/2/09</i>

Previous editions are obsolete)



**United States
Department of
Agriculture**

**Marketing and
Regulatory
Programs**

**Animal and
Plant Health
Inspection
Service**

Animal Care

EXPIRATION DATE: SEPTEMBER 19, 2010

This is to certify that

DANNY KOLWYCK
DEBRA KOLWYCK

is a licensed
under the

CLASS C EXHIBITOR

Animal Welfare Act

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

Certificate No.

43-C-0208

Customer No.

4535


Deputy Administrator



United States
Department of
Agriculture

Animal and Plant
Health Inspection
Service

Animal Care
Western Region

2150 Centre Ave.
Building B
Mail Stop # 3W11
Ft. Collins, CO 80526
Phone: 970-494-7478
Fax: 970/494-7461

RE: ACKNOWLEDGEMENT OF RENEWAL
Certificate Number: 43-C-0208
Renewal Date: 09/19/2010

September 23, 2009
Customer ID Number: 4535

Danny Kolwyck
Debra Kolwyck
Blitzen & Co
16101 S Lake Rd
Pleasant Hill, MO 64080

Dear Licensee:

Thank you for submitting your Animal Welfare Act (AWA) license renewal documents and applicable fees. Enclosed is a copy of the renewal form and a new certificate indicating that your AWA license has been renewed for another year.

As a reminder, you should file your application for renewal and pay your licensing fees on or before the expiration date each year. We will send you a renewal notice again next year about 60 days before the expiration date of your license. If you cease conducting regulated activities, you may cancel your license at any time by notifying us, in writing, that you wish to terminate your license.

The law also requires that you notify us, by certified mail, of any change in the name, address, location, management and control or ownership of your business within 10 days after such a change has occurred.

Please be advised that your facility records must be kept current and they are subject to review by APHIS Officials during compliance inspections. You may order record keeping forms from this office free of charge.

We appreciate your efforts in complying with the Animal Welfare Act. Contact this office at (970) 494-7478 if you have any questions regarding this letter or the Animal Welfare Act.

Sincerely,

Robert M. Gibbens, D V M
Regional Director – Animal Care
Western Region

cc: Jennifer M. Schmitz, A.C.I.

Enclosures



Safeguarding American Agriculture
APHIS is an agency of USDA's Marketing and Regulatory Programs
An Equal Opportunity Provider and Employer