



## Inspection Report

AMANDA CRESSEL  
GEORGE CRESSEL  
NOAH CRESSEL

Customer ID: **321752**  
Certificate: **43-B-3680**

Site: 001

AMANDA CRESSEL & GEORGE CRESSEL & NOAH CRESSEL

30500 STERLING RD

Type: ROUTINE INSPECTION

Date: Feb-28-2011

LAQUEY, MO 65534

### 2.40 (b) (2)

#### ATTENDING VETERINARIAN AND ADEQUATE VETERINARY CARE (DEALERS AND EXHIBITORS).

Sec. 2.40 Attending veterinarian and adequate veterinary care (dealers and exhibitors).

(b) Each dealer or exhibitor shall establish and maintain programs of adequate veterinary care that include:

(2) The use of appropriate methods to prevent, control, diagnose, and treat diseases and injuries.

\*\*\*In the sheltered facility there was one adult dog (MC# 4A3B1C6111) with hair loss on legs, chest, neck and facial areas. The skin underneath was red and had small raised areas on it. According to the owner this started approximately a week ago. No veterinarian contact had been made at the time of inspection. Health issues not treated by a veterinarian may worsen the condition.

The owner has 48 hours to take this animal to be evaluated by a veterinarian and follow treatment instructions to assure that appropriate methods to prevent, control, diagnose, and treat diseases and injuries are being used throughout the facility in order to be in compliance with this regulation.

Affects 1 adult dog.

To be corrected by March 2, 2011.

\*\*\*In the Old Whelping building, the following medications had expired:

Cal Pho Sol- 11/10

Albon- 7/09

Gentamicin Sulfate- 11/10

Medications that are expired or have an unknown expiration date and are given to the animals may not produce the desired result.

The owner needs to discard all expired medications to assure that appropriate methods to prevent, control, diagnose, and treat diseases and injuries are being used throughout the facility in order to be in compliance with this regulation.

Affects all of the dogs receiving these medications.

#### Prepared By:

BEVERLY HICKS, A.C.I. USDA, APHIS, Animal Care

Date:

Title: ANIMAL CARE INSPECTOR Inspector 5051

Feb-28-2011

#### Received By:

NOAH AND AMANDA CRESSEL- OWNER

Date:

Title: SENT BY EMAIL

Feb-28-2011



## Inspection Report

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To be corrected by March 3, 2011.

\*\*\*In the hutch facility, primary enclosure E, there was one dog (MC# 101314889) that had moderately matted hair around the face and neck.

Matted hair increases the risk of skin issues and does not provide appropriate insulation for the animals.

The owner needs to remove the matted hair from the animals to assure that appropriate methods are being used to prevent diseases and injuries in order to be in compliance with this regulation.

Affects 1 adult dog.

To be corrected by March 3, 2011.

\*\*\*In the outdoor facility, primary enclosures #2 (MC# 464C375148) and #7 (MC# 4720506C22) these two dogs had green matter in their eyes, with dried matter on the edge of the eyelids.

Health issues not treated by a veterinarian may worsen the condition.

The owner needs to contact the attending veterinarian and follow treatment instructions to assure that appropriate methods to prevent, control, diagnose, and treat diseases and injuries are being used throughout the facility in order to be in compliance with this regulation.

Affects 2 adult dogs.

To be corrected by March 3, 2011.

### 3.1 (c) (1)

#### HOUSING FACILITIES, GENERAL.

Sec. 3.1 Housing facilities, general.

(c) Surfaces--(1) General requirements. The surfaces of housing facilities--including houses, dens, and other furniture-type fixtures and objects within the facility--must be constructed in a manner and made of materials that allow them to be readily cleaned and sanitized.

\*\*\*In the Double Decker building, the main walkway is constructed of treated sub-floor material, yet it is not sealed. Raw wood cannot be sanitized.

Moisture and disease hazards can penetrate raw wood and increase the disease risk to the animals.

The owner needs to provide finishing material to this area so that proper cleaning and sanitizing can be performed in order to be in compliance with this regulation.

Affects approximately 20 dogs.

To be corrected by March 21, 2011.

---

#### Prepared By:

BEVERLY HICKS, A.C.I.                      USDA, APHIS, Animal Care                      **Date:**  
**Title:** ANIMAL CARE INSPECTOR                      Inspector 5051                      Feb-28-2011

#### Received By:

NOAH AND AMANDA CRESSEL- OWNER                      **Date:**  
**Title:** SENT BY EMAIL                      Feb-28-2011



## Inspection Report

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### 3.1 (c) (2)

#### HOUSING FACILITIES, GENERAL.

3.1 Housing facilities, general.

(c) Surfaces-

(2) Maintenance and replacement of surfaces. All surfaces must be maintained on a regular basis. Surfaces of housing facilities- including houses, dens, and other furniture-type fixtures and objects within the facility- that cannot be readily cleaned and sanitized, must be replaced when worn or soiled.

\*\*\*In the outdoor facility, the primary enclosures are built on cement slabs. Three of these slabs have small to large cracks in them that extend into the primary enclosures. Some of these areas were repaired in the past, yet the repair material has worn away and the cracks are collecting waste material.

The owner needs to provide finishing material to this area so that proper cleaning and sanitizing can be performed in order to be in compliance with this regulation.

Affects 22 adult dogs.

To be corrected by May 30, 2011.

### 3.1 (e)

#### HOUSING FACILITIES, GENERAL.

Sec. 3.1 Housing facilities, general.

(e) Storage. Supplies of food and bedding must be stored in a manner that protects the supplies from spoilage, contamination, and vermin infestation. The supplies must be stored off the floor and away from the walls, to allow cleaning underneath and around the supplies.

\*\*\*In the Double Decker, there were several unopened bags of feed stacked on the floor in the corner. Proper food storage is essential for appropriate cleaning.

The owner needs to assure that all food is kept off of the floor and away from walls, to allow cleaning underneath and around the supplies to be in compliance with this regulation.

Affects approximately 20 dogs.

To be corrected by March 14, 2011.

This inspection began at 1447.

Inspection and exit interview conducted with owner.

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#### Prepared By:

BEVERLY HICKS, A.C.I. USDA, APHIS, Animal Care

Date:

Title: ANIMAL CARE INSPECTOR Inspector 5051

Feb-28-2011

#### Received By:

NOAH AND AMANDA CRESSEL- OWNER

Date:

Title: SENT BY EMAIL

Feb-28-2011



## Inspection Report

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End of report.

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**Prepared By:**

BEVERLY HICKS, A.C.I.      USDA, APHIS, Animal Care  
**Title:** ANIMAL CARE INSPECTOR      Inspector 5051

**Date:**  
Feb-28-2011

**Received By:**

NOAH AND AMANDA CRESSEL- OWNER  
**Title:** SENT BY EMAIL

**Date:**  
Feb-28-2011



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|               |  |                |           |
|---------------|--|----------------|-----------|
| Photographer: | Beverly Hicks  | Legal Name:    | 43-B-3680 |
| Photo Taken:  | Mon, Feb 28, '11 1614  | AMANDA CRESSEL |           |
| Inspection:   | 59112010480590   | GEORGE CRESSEL |           |
| Description:  | Adult dog with hair loss, red skin and small raised areas on skin surface. |                |           |



United States  
Department of  
Agriculture

Marketing and  
Regulatory  
Programs

Animal and  
Plant Health  
Inspection  
Service

Animal Care

EXPIRATION DATE: JUNE 4, 2010

This is to certify that

AMANDA DEARDUFF  
GEORGE CRESSEL  
NOAH CRESSEL

is a licensed  
under the

CLASS B DEALER

### Animal Welfare Act

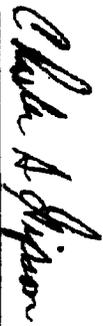
(7 U.S.C. 2131 et seq.)

Certificate No.

43-B-3680

Customer No.

321752

  
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.

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

# APPLICATION FOR LICENSE

(TYPE OR PRINT)

NEW LICENSE

DO NOT USE THIS SPACE - OFFICIAL USE ONLY

SEND THE COMPLETED FORM TO:

WR-9-0038, ch. 1653  
Appl Annual Fee  
Lose

USDA-APHIS-Animal Care  
2150 Centre Ave, Building B  
Mail Stop # 3W11  
Fort Collins, CO 80526-8117

| LICENSE NO. | RENEWAL DATE | FEES   |               |
|-------------|--------------|--------|---------------|
|             |              | AMOUNT | DATE RECEIVED |
| 43-B-3680   | 4 June 10    | 760.00 | 1 June 09     |

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

Noah Cressel  
George Cressel  
Amanda [redacted] b6  
COUNTY: Pulaski TELEPHONE 573 765-9985

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

30500 Sterling Rd  
Laguer MO 65534  
COUNTY: Pulaski TELEPHONE 573 765 9985

3. IF PREVIOUSLY LICENSED - NAME AND ADDRESS

Barkers Delux  
20500 Sterling Rd  
Laguer MO 65534  
PREVIOUS LICENSE NO: 43 B 0177

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

7. NATURE OF BUSINESS (Check item(s) that describe 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 Zoo  K - Pet Store  L - Broker

6. DATE OF LAST BUSINESS YEAR

| FROM |     |      | TO |     |      |
|------|-----|------|----|-----|------|
| MO   | DAY | YEAR | MO | DAY | YEAR |
| 04   | 26  | 08   | 04 | 26  | 09   |

8. TYPE OF ORGANIZATION

Partnership  Corporation  Individual  
 Other (Specify)

9. LIST OWNERS, PARTNERS, AND OFFICERS

| NAME AND TITLE                                      | ADDRESS                                       |
|---|---|
| Noah Cressel<br>George Cressel<br>Amanda Dearden FF | 30500 Sterling Rd<br>Laguer MO 65534<br>(all) |

10. DEALER ONLY

|  |               |
|--|---------------|
| TOTAL NO. OF ANIMALS PURCHASED IN THE LAST BUSINESS YEAR   | [redacted] b4 |
| TOTAL NO. OF ANIMALS SOLD IN THE LAST BUSINESS YEAR        |               |
| TOTAL GROSS AMOUNT DERIVED FROM THE SALE OF ANIMALS        |               |
| DOLLAR AMOUNT ON 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  |  | RABBITS                |  |
| CATS  |  | NONHUMAN PRIMATES      |  |
| GUINEA PIGS                                       |  | MARINE MAMMALS         |  |
| HAMSTERS  |  | WILD OR EXOTIC MAMMALS |  |
| OTHER (i.e., farm animals) (List Species and No.) |  |                        |  |

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 agree to comply with all the regulations and standards in 9 CFR, Subpart A, Parts 1, 2 and 3. I certify that I am over 18 years of age.

13. NAME AND TITLE (Type or Print)

14. DATE

Owner

5-11-09

(JAN 95)

(Previous editions are obsolete.)

PART 1 - SECTOR OFFICE

MAY 18 2009



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: NEW LICENSE APPROVAL  
Certificate Number: 43-B-3680  
Renewal Date: 06/04/2010

June 4, 2009  
Customer ID Number: 321752

George Cressel  
Amanda [REDACTED] b6  
Noah Cressel  
30500 Sterling Rd  
Laquey, MO 65534

Dear Licensee:

We are pleased to inform you that you have met the licensing requirements under the Animal Welfare Act (AWA). Accordingly, we are enclosing a copy of your approved application (APHIS Form 7003A), along with the official license certificate, which is suitable for display.

Please note the license expiration date; each year, you are required to submit your license renewal application and renewal fees on or before the expiration date. The appropriate forms and instructions will be sent to you at least 60 days prior to the expiration date -- this will serve as the sole reminder that your license is nearing expiration.

In addition to maintaining your facility and animals in accordance with the AWA regulations and standards, you must keep current, accurate records -- including a written program of veterinary care. We have enclosed a supply of forms to assist you in maintaining your records in the prescribed manner. You must also notify this office by certified mail of any change of name, address, management, or substantial control or ownership of your business within 10 days of the change.

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: Beverly Hicks, A.C.I.  
Enclosures



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

An Equal Opportunity Provider and Employer



20-May-2009

CERTIFIED MAIL  
RETURN RECEIPT  
7008 0500 0000 7754 9705

43-B-3030  
321752

United States  
Department of  
Agriculture

Noah Cressel, George Cressel &  
Amanda [redacted] b6  
30500 Sterling Rd.  
Laquey, MO 65534

Customer ID: 321752

Animal and Plant  
Health Inspection  
Service

Dear Applicant:

Animal Care  
Western Region

We recently received your check and application for a License 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 01-June-2009 to avoid further delay.

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 \$ 760.00 fee required under Block 10 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 #1681 in the amount of \$ 770.00 , which was received on 18-May-2009, because of incorrect amount. Please send payment in the amount of \$760.00 to our office on or before 01-Jun-2009 to avoid further delay.

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: Beverly Hicks, ACI



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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

RE: LICENSE RENEWAL  
Certificate Number: 43-B-3680  
Renewal Date: 06/04/2010

April 5, 2010  
Customer ID Number: 321752

Amanda [REDACTED] b6  
George Cressel  
Noah Cressel  
30500 Sterling Rd  
Laquey, MO 65534

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 renewal 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. 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) 494-7478 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: Beverly Hicks, A.C.I.

Enclosures



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

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

DO NOT USE THIS SPACE - OFFICIAL USE ONLY

**APPLICATION FOR LICENSE**  
(TYPE OR PRINT)

SEND THE COMPLETED FORM TO:  
USDA APHIS ANIMAL CARE *W.R. 10-0052, CR. 1206*  
Western Region  
2150 Centre Ave.  
Building B, Mailstop 3W11  
Fort Collins, CO 80526-8117  
(970) 494-7478

RENEWAL

| LICENSE NO./CUST NO | RENEWAL DATE | FEES   |               |
|---------------------|--------------|--------|---------------|
|                     |              | AMOUNT | DATE RECEIVED |
| 43-B-3680<br>321752 | 4-Jun-2010   | 485.00 | 28 Apr 10     |

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

Amanda ~~DeWitt~~ Cressel  
George Cressel  
Noah Cressel  
30500 Sterling Rd  
Laquey, MO 65534

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

30500 Sterling Rd.  
Laquey, MO 65534  
County: PULASKI

COUNTY: PULASKI TELEPHONE (573) - 765 - 9985

3. IF PREVIOUSLY LICENSED - NAME AND ADDRESS

PREVIOUS LICENSE NO.:

5. TYPE OF LICENSE

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

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    | 1   | 0 1  | 1  | 2   | 3 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                              |
|--|--------------------------------------|
| Noah Cressel<br>Amanda Cressel<br>George Cressel | 30500 Sterling Rd<br>Laquey MO 65534 |

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   | b4 | DOGS  | RABBITS                |
| B: TOTAL NO. OF ANIMALS SOLD IN THE LAST BUSINESS YEAR  |    | CATS  | NONHUMAN PRIMATES      |
| C: TOTAL GROSS DOLLAR AMOUNT DERIVED FROM REGULATED ACTIVITIES (SALES, BOOKING FEES, COMMISSIONS, ETC.) |    | GUINEA PIGS                                       | MARINE MAMMALS         |
| D: DOLLAR AMOUNT OF WHICH FEE IS BASED (Sections 2.6 and 2.7)   |    | HAMSTERS  | WILD OR EXOTIC MAMMALS |
|   |    | OTHER (i.e., farm animals) (List Species and No.) |                        |

**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.

|        |  |                    |
|--------|--|--------------------|
| (b)(6) | 13. NAME AND TITLE (Type or Print)<br>Noah Cressel Owner | 14. DATE<br>4-7-10 |
|--------|--|--------------------|

APR 28 2009



**United States  
Department of  
Agriculture**

**Marketing and  
Regulatory  
Programs**

**Animal and  
Plant Health  
Inspection  
Service**

**Animal Care**

**EXPIRATION DATE: JUNE 4, 2011**

This is to certify that

AMANDA CRESSEL  
GEORGE CRESSEL  
NOAH CRESSEL

is a licensed  
under the

CLASS B DEALER

**Animal Welfare Act**

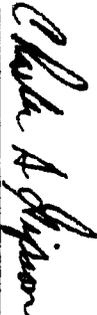
(7 U.S.C. 2131 et seq.)

Certificate No.

43-B-3680

Customer No.

321752

  
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-B-3680  
Renewal Date: 06/04/2011

April 29, 2010  
Customer ID Number: 321752

Noah Cressel  
Amanda Cressel  
George Cressel  
30500 Sterling Rd  
Laquey, MO 65534

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: Beverly Hicks, A.C.I.

Enclosures



Safeguarding American Agriculture  
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