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

FEB 06 2008

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: 920 Main Campus Drive Suite 200, Unit 3040
Raleigh, NC 27606
Telephone: (919) 855-7101

RENL

CERTIFICATE / CUSTOMER NO.	RENEWAL DATE	FEES	
		AMOUNT	DATE RECEIVED
CERT: 55-B-0107 CUST: 3222	16-MAR-2008	$760	06 Feb 08

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

L B S Biological Inc

945 East Elm Street
Graham, NC 27253

Telephone: (336)578-7036

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

945 East Elm Street
Graham, NC 27253
County: Alamance

Telephone:

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

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
15-MAR-2007	15-MAR-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)

A. TOTAL NO. OF ANIMALS PURCHASED IN THE LAST BUSINESS YEAR	(b)(4)
B. TOTAL NO. OF ANIMALS SOLD IN THE LAST BUSINESS YEAR	(b)(4)
C. TOTAL GROSS DOLLAR AMOUNT DERIVED FROM REGULATED ACTIVITIES (SALES, BOOKING FEES, COMMISSIONS, ETC.)	(b)(4)
D. DOLLAR AMOUNT ON WHICH FEE IS BASED *(SECTIONS 2.6 AND 2.7)*	(b)(4)

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

DOGS	[redacted]	NONHUMAN PRIMATES	[redacted]	RODENTS (Do not include lab rats or mice)	[redacted]
CATS	[redacted]	MARINE ANIMALS	[redacted]	WILD/EXOTIC HOOFSTOCK	[redacted]
GUINEA PIGS	[redacted]	FARM ANIMALS	[redacted]	BEARS	[redacted]
HAMSTERS	[redacted]	WILD/EXOTIC CANINES	[redacted]	WILD/EXOTIC MAMMALS (NOT LISTED ELSEWHERE)	[redacted]
RABBITS	[redacted]	WILD/EXOTIC FELINES	[redacted]	TOTAL (ALL ANIMALS LISTED IN BLOCK 9)	[redacted]

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.

10. SIGNATURE	11. PRINT NAME	12. SOCIAL SECURITY OR TAX IDENTIFICATION NUMBER	13. DATE
(b)(6), (b)(7)c	(b)(6), (b)(7)c	56-1780918	2/5/08

APHIS FORM 7003

Public reporting burden for this collection of information is estimated to average ... 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

FEB 14 2007

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)

LICENSE RENEWAL

DO NOT USE THIS SPACE - OFFICIAL USE ONLY

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Raleigh, NC 27606
Telephone: (919) 855-7101

CERTIFICATE / CUSTOMER NO.	RENEWAL DATE	FEES	
		AMOUNT	DATE RECEIVED
CERT: 55-B-0107 CUST: 3222	16-MAR-2007	$710	02-01-2007

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

L B S Biological Inc
945 East Elm Street
Graham, NC 27253

Telephone: (336)578-7036

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

945 East Elm Street
Graham, NC 27253
County: Alamance
Telephone:

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

Mac Bowman - Owner

(b)(6), (b)(7)c

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
15-MAR-2006	15-MAR-2007

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 2.8)

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 2.5 AND 2.7)*	

(b)(4)

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

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

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.

10. SIGNATURE	11. PRINT NAME	12. SOCIAL SECURITY OR TAX IDENTIFICATION NUMBER	13. DATE
(b)(6), (b)(7)c		56-1780918	2/7/07

APHIS FORM 7003

USDA

United States Department of Agriculture
Animal and Plant Health Inspection Servi

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JUN 1 1 2008 3222 cust_id
308337 insp_id
5494 site_id

INSPECTION REPORT

L B S BIOLOGICAL INC

945 EAST ELM STREET
GRAHAM, NC 27253

Customer ID: 3222
Certificate: 55-B-0107

Site: 001
LBS BIOLOGICAL INC.

Inspection Type: ROUTINE INSPECTION
Date: JUN-05-2008

All items in compliance.

Prepared By:
F BINKLEY, D V M , USDA APHIS, Animal Care
Title: VETERINARY MEDICAL OFFICER [redacted] ID: 1020
Date: JUN-05-2008

Received By: [redacted]
Title: [redacted]
Date: JUN-05-2008

(b)(6) & (b)(7)c

USDA

JUN 25 2007

United States Department of Agriculture
Animal and Plant Health Inspection Serv

FBINKLE1

INSPECTION REPORT

3222 cust_id
308144 insp_id
5494 site_id

L B S BIOLOGICAL INC

945 EAST ELM STREET
GRAHAM, NC 27253

Customer ID: 3222
Certificate: 55-B-0107

Site: 001
LBS BIOLOGICAL INC.

Inspection
Type: ROUTINE INSPECTION
Date: JUN-13-2007

All items in compliance. Dead animals only.

Prepared By: F BINKLEY, D V M , USDA, APHIS, Animal Care
Date: JUN-13-2007
Title: VETERINARY MEDICAL OFFICER , Inspector ID: 1020
Received By: (b)(6) & (b)(7)c
Date: JUN-13-2007
Title: