



United States Department of Agriculture

Animal and Plant
Health Inspection
Service

Animal Care

Fort Collins Office
2150 Centre Ave.
Building B, 3W11
Fort Collins, CO 80526

Phone: 970-494-7478
AnimalCare@usda.gov

RE: LICENSE EXPIRATION REMINDER

Dear Licensee,

This letter is to inform you that your U.S. Department of Agriculture (USDA) Animal Welfare Act (AWA) license is set to expire and your application is due. **To prevent a lapse in license, you should submit your application no later than 90 days prior to your expiration date.**

Please complete the enclosed application and tax identification form and submit those forms, along with your non-refundable \$120.00 licensing fee. You may pay by cashier's check, certified check, personal check, money order, ACH checking, or credit card. If you choose to pay with a credit card or ACH checking, please use the enclosed credit card authorization form. Animal Care cannot accept cash payments.

You may submit your application online by going to the Animal Care website https://www.aphis.usda.gov/aphis/ourfocus/animalwelfare/SA_Regulated_Businesses and select the "Re-license Application". If you are unable to submit your application via our website, you may submit your application by email to AnimalCare@usda.gov or by mail to the address listed on this letter.

After your application and payment are received and processed, an inspector will contact you to schedule your re-license inspection. You are afforded up to three re-licensing inspections within 60 days to demonstrate compliance with the AWA. If you do not demonstrate compliance within 60 days of the first announced inspection, no new license will be issued, and you will be prohibited from reapplying for a new license for a period of 6 months. As a reminder, your current license will expire on the date listed on your license certificate. If you continue to conduct regulated activity after your license expires, you will be in violation of the AWA and regulations.

The AWA now requires that any changes to your animal inventory, addition of dangerous animals, and/or changes to your name, address, location, control, or ownership of your business must be reported to the office at least 90 days in advance of the change and may require a new license. Please contact our office if you have any changes to your business.

Once full compliance with the AWA regulations and standards has been demonstrated, a three-year license will be issued. Please note that by signing the application form, you are acknowledging that you have reviewed and understand the Act, regulations, and standards, and that you agree to remain in compliance at all times. Failure to maintain compliance at any licensed inspection site could result in enforcement action against your license, thereby impacting all inspection sites. Contact this office at 970-494-7478 or via email at AnimalCare@usda.gov if you have any questions.

Sincerely,



U.S. DEPARTMENT OF AGRICULTURE
USDA APHIS Animal Care
Animal and Plant Health Inspection Services
2150 Centre Ave., Building B, 3W11, Fort Collins, CO 80526
p: 970-494-7478 | e: AnimalCare@usda.gov

Scan to learn more.



<https://www.aphis.usda.gov/awa/apply>

The U.S. Department of Agriculture is an equal opportunity provider, employer, and lender.

This Packet is for: Current Licensees Re-Licensing

This application packet includes information to re-apply as a licensee due to the license expiring, change of animal, change of entity, or addition of dangerous animals. If you are unsure if a new license is required, please contact our office at 970-494-7478 or via email at AnimalCare@usda.gov.

NEW

The following forms are required to be submitted:

- APHIS Form 7003- New License Application
- APHIS Form 7030- Tax Identification Sheet

A \$120.00 non-refundable fee must be paid at the time of submission. If we receive an application without a valid payment, it will be returned and the application process will be delayed. All application fees are non-refundable; therefore, if you are unsure whether a license is required, please contact Animal Care to discuss your specific business model before applying.

If submitting via the online portal:

- Either the Credit Card Authorization Form or eCheck Form needs to be submitted.

If submitting by mail:

- Either the Credit Card Authorization Form, eCheck Form, or Check needs to be submitted.
-

All forms listed and linked below are available via our website on the [publication page](#); here you can also find a copy of the [Animal Welfare Act and Regulations](#). If you would like a physical copy of the forms listed below you will need to submit a request at ACLR@usda.gov.

Depending on the type of animal(s) you intend to use, the following information may be required to keep on-hand and prepare in advance of your pre-licensing inspection. The following forms can be found on our website publication page:

- [APHIS Form 7002](#): Program of Veterinary Care (other than dogs and cats)
- [APHIS Form 7002A](#): Program of Veterinary Care (dogs and cats only)
- [APHIS Form 7005](#): Records of Acquisition of Dogs and Cats on Hand (required form)
- [APHIS Form 7006](#): Record of Disposition of Dogs and Cats (required form)
- [APHIS Form 7013](#): Exercise Plan for Dogs
- [APHIS Form 7019](#): Record of Animals on Hand (other than dogs and cats)
- [APHIS Form 7020](#): Record of Acquisition, Disposition, or Transport of Animals
- [APHIS Form 7093](#): Contingency Planning Program
- [APHIS Form 7010](#): Itinerary for Overnight Travel Form

All Animal Care Technotes, Fact Sheets, and reference materials can be found on our website's publication page. We encourage you to go through the page and find information that would be suitable for you.

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICES APPLICATION FOR LICENSE (TYPE OR PRINT)	OFFICIAL USDA USE ONLY		OMB Approved 0579-0036 and 0579-0486
	SEND THE COMPLETED FORM TO: USDA APHIS ANIMAL CARE 2150 CENTRE AVE. BUILDING B, 3W11 FORT COLLINS, CO 80526		
	LICENSE/CUSTOMER NUMBER	EXPIRATION DATE	DATE RECEIVED

No license shall be issued unless a completed application and appropriate fees are received, and the applicant is in compliance with the standards and regulations (7 U.S.C. §§ 2132-2143). A license may be denied or license terminated if the applicant has made false or fraudulent statements or provided false or fraudulent records to USDA (9 C.F.R §§ 2.11 and 2.12).

1. TYPE OF LICENSE: ☐ CLASS A- BREEDER ☐ CLASS B- DEALER ☐ CLASS C- EXHIBITOR	2. TYPE OF ORGANIZATION: ☐ INDIVIDUAL ☐ PARTNERSHIP ☐ CORPORATION ☐ OTHER
3. NAME, MAILING ADDRESS, AND COUNTY (SEE INSTRUCTIONS): COUNTY:	4. ADDRESSES OF ALL LOCATIONS, FACILITIES, PREMISES, OR SITES (P.O. BOX ADDRESSES ARE NOT ACCEPTABLE): ☐ Same as Block 3 COUNTY: ☐ CHECK IF ADDITIONAL LOCATIONS ARE LISTED ON SEPARATE SHEET. ☐ CHECK IF YOU WILL BE TRAVELING OVERNIGHT WITH ANIMALS.
5. TELEPHONE NUMBER(S):	6. EMAIL ADDRESS:
7. PREVIOUS USDA LICENSE NUMBER (IF ANY):	8. ACTIVE USDA LICENSE NUMBER IN WHICH YOU HAVE AN INTEREST:

9. VIOLATIONS AND NOLO CONTENDRE (9 C.F.R § 2.1(a)(1)(vii))
Disclose any pleas of nolo contendere (no contest) or finding of a violation of Federal, State, or local laws or regulations pertaining to animal cruelty or the transportation, ownership, neglect, or welfare of animals.
☐ NONE ☐ YES, EXPLAIN (ATTACH ADDITIONAL INFORMATION OR RECORDS.)

10. IF THE APPLICANT IS A CORPORATION, PARTNERSHIP, OR OTHER BUSINESS ENTITY, LIST THE ENTITY’S OFFICERS AND AGENTS.
☐ CHECK THIS BOX IF ADDITIONAL PERSONS ARE LISTED ON AN ADDITIONAL SHEET.

NAME	TITLE

11. LIST THE ACTUAL OR ANTICIPATED TYPES AND MAXIMUM NUMBER OF ANIMALS OWNED, HELD, MAINTAINED, SOLD, EXHIBITED, OR LEASED AT ANY ONE TIME DURING THE PERIOD OF LICENSURE (9 CFR §2.1(a)(1)(i)):					
ANIMAL TYPE	NUMBER	ANIMAL TYPE	NUMBER	ANIMAL TYPE	NUMBER
DOGS		NONHUMAN PRIMATES (GROUPS 1-4) §3.80(B)(2)(i)		HIPPOTAMUSES	
CATS		NONHUMAN PRIMATES (GROUPS 5-6) §3.80(B)(2)(i)		GIRAFFES	
GUINEA PIGS		BEARS		WILD/EXOTIC HOOFSTOCK	
HAMSTERS		EXOTIC/WILD FELIDS AND HYBRIDS		MARINE MAMMALS	
RABBITS		HYENAS, EXOTIC/WILD CANIDS AND HYBRIDS		BIRDS	
FARM ANIMALS (exclude horses)		ELEPHANTS		TOTAL ANIMALS	
OTHER ANIMALS (not listed elsewhere)		RHINOCEROSES			

☐ CHECK THIS BOX IF ADDITIONAL PAGES ARE USED TO LIST ANIMALS.

CERTIFICATION
I hereby apply 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 certify that I have reviewed the Act, regulations, and standards. To the best of my knowledge and belief, I am in compliance with and agree to continue to comply with all the regulations and standards in 9 CFR, Subpart A, Parts 1, 2, and 3. I certify that I am and all listed persons are 18 years of age or older.

12. SIGNATURE:	13. PRINT NAME AND TITLE:	14. DATE:

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control numbers for this information collection are 0579-0036 and 0579-0486. The time required to complete this information collection is estimated to average 15 minutes 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.

INSTRUCTIONS FOR LICENSE APPLICATION
(APHIS FORM 7003A & TAX IDENTIFICATION SHEET)

- **Please** read all instructions before completing the application and Tax ID sheet.
- **Contact** the USDA APHIS Animal Care office at 970-494-7478 for any questions.
- **Corrections** and/or clarifications will delay the processing of your application.
- **ALL BLOCKS MUST BE COMPLETED**; if one does not apply please put "N/A".
- **ONLY send** to the USDA APHIS Animal Care office:
 1. Application (APHIS FORM 7003A)
 2. Tax ID sheet (APHIS Form 7030)
 3. License Fee
- **Payments** can be made by certified check, cashier's check, personal check, money order, or credit card. Cash is not accepted. If paying by credit card, be sure to include APHIS Form 7031.

Completing the APHIS Form 7003A License Application:

Block 1: Check the box that best describes your business activity.

- **Class A (breeder)** – Sells only animals bred and raised at your facility.
- **Class B (broker)** – Buys and sells animals or is an operator of an auction.
- **Class C (exhibitor)** – Exhibits animals to the public.

Block 2: Check the box that best describes your business.

- **Individual** – Owner name only listed in Block 3.
- **Partnership** – Either partner's name or business name listed in Block 3.
- **Corporation** or **Other** – Business name listed in Block 3.

Block 3: Complete this block with the applicant name, mailing address, and county.

- Enter the name the license will be under.

If applying as an **Individual**, put the individual's name only.

If applying as a **Partnership**, please either list all partner's names or the business name.

If applying as **Corporation** or **Other**, list the business name only.

- **Mailing Address** refers to the address all correspondences will be mailed to.

Cannot be left blank, and can include only one address.

Include the county that the business address is in.

Block 4: List the addresses of all locations, facilities, premises, or sites where the animals, equipment, vehicles, and records are or will be located.

- P.O. Boxes cannot be listed in this Block.
- Include the county that the address is located.
- If necessary, use an additional sheet if more than one address.

- Block 5:** List the telephone number where the applicant can be reached.
- Block 6:** List the email address that is used to send and receive electronic correspondence to the applicant/licensee.
- Block 7:** Complete this block if you had a previous license number.
- Block 8:** Complete this block if you have a business interest in another active USDA license.
- Block 9:** Disclose if you have any animal violations or have pled no contest to animal incidents. If yes, describe the incident(s) and attach additional information or records, if necessary.
- Block 10:** Complete this block with all officers authorized to conduct business for the license.
- If applying as an **Individual**, this block does not need to be completed.
 - If applying as a **Partnership**,
Under name this block does not need to be completed.
Under the business name list all names authorized to conduct business for this license.
Owner cannot be used as a title.
 - Indicate the person who should be listed as the attention person for receiving mail.
If applying as a **Corporation** or **Other**;
List all names authorized to conduct business for this license.
Owner cannot be used as a title.
Indicate the person who should be listed as the attention person for receiving mail.
- Block 11:** List the actual or anticipated number of animals for each types of animals in the businesses inventory.
- For animals listed under Group 5 Nonhuman primates include baboons and non-brachiating species larger than 33.0 lbs (15 kg.). (See 9CFR §3.80(b)(1) *footnote 4*)
 - For animals listed under Group 6 Nonhuman primates include great apes over 55.0 lbs (25 kg.) and brachiating species. (See 9CFR §3.80(b)(1) *footnote 4*)
- Block 12-14:** Complete these blocks with an authorized person's signature, name, title, and date the application is signed.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not 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.

OMB Approved
0579-0036

United States Department of Agriculture
Animal and Plant Health Inspection Service
Animal Care

Federal Debt Collection Form

1: State	2: Customer Number:
	3: Certificate Number:

The Federal Debt Collection Act of 1996 requires APHIS to obtain your Federal Taxpayer Identification Number. This would be either your Federal Employer Identification Number (EIN) or your Social Security Number(s) (SSN). This number is for the purpose of collecting and reporting any delinquent amounts arising out of a relationship with the Federal Government. Your SSN or EIN is required to process your license/registration application.

New license/registration applications: You must submit your SSN or EIN using this form.

Relicensing or re-registering applications:

- You must resubmit your SSN or EIN number using this form.
- If the number submitted does not match your previously submitted EIN or SSN, your application for relicensing or re-registration will be returned with instructions and your relicensing or re-registration will be delayed.
- If your SSN, EIN, and/or type of organization changes, you may have to apply for a new license/registration.

If the license/registration certificate is issued to a partnership, all partners' names and SSNs or a business name and an EIN must be listed.

4: Business Name or Individual Name or Partner Names (see instructions below for Blocks 4 and 5):	5: Federal Taxpayer Identification Number
Name:	EIN or SSN:
Name:	EIN or SSN:
Name:	EIN or SSN:
Name:	EIN or SSN:
Name:	EIN or SSN:
Name:	EIN or SSN:
Name:	EIN or SSN:
Name:	EIN or SSN:

Instructions: Federal Debt Collection Form

- **Please** read all instructions before completing the Federal Debt Collection form.
- **Contact** your USDA APHIS Animal Care office before mailing your application.
- **Corrections** and/or clarifications will delay the processing of your application.
- **Blocks** 1 - 3 must be completed. If Block 2 does not apply, put N/A. Blocks 4 and 5 must be completed as appropriate. See below.
- **Mail** in all original documents. We cannot accept applications that are copied, e-mailed, or faxed.
- **Complete** the application in Blue or Black ink.
- **Mail** in with the application and appropriate fees.

Block 1: Insert the State of the business address of the licensee/registrant.

Block 2: Insert the customer number.

Block 3: Insert the license or registration certificate number.

Block 4 and 5: Insert the name of the individual, business, partnership, corporation, or other;
e.g., John Smith; John Smith Kennels; JS Kennels; JS Kennels, Inc.

- (a) If an **Individual**, enter the individual's Social Security Number.
- (b) If a **Partnership**, enter either all partners' names and Social Security Numbers or the business name and Employer Identification Number.
- (c) If a **Corporation** or **Other**, enter the business name and Employer Identification Number.

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
ANIMAL CARE

CREDIT CARD PAYMENT AUTHORIZATION

RETURN COMPLETED FORM WITH YOUR LICENSE APPLICATION.
THIS FORM WHEN COMPLETED CONTAINS SENSITIVE PERSONAL INFORMATION. SEE REVERSE SIDE FOR PRIVACY ACT STATEMENT.

SECTION I - CARDHOLDER AND CUSTOMER INFORMATION

1A. USDA CERTIFICATE NUMBER:	1B. USDA CUSTOMER NUMBER:
2. CUSTOMER <i>(complete only if customer is different from the cardholder)</i>	3. CARDHOLDER
A. NAME <i>(first, middle initial, last):</i>	A. NAME <i>(as listed on card)</i>
B. PERMANENT MAILING ADDRESS <i>(no P.O. box):</i>	B. BILLING ADDRESS <i>(must be the billing address for the card):</i>
C. TELEPHONE NUMBER <i>(include area code):</i>	C. TELEPHONE NUMBER <i>(include area code):</i>
D. EMAIL ADDRESS:	D. EMAIL ADDRESS:

SECTION II - CREDIT CARD INFORMATION

4. CREDIT CARD TYPE <i>(select one):</i> ☐ VISA ☐ MASTERCARD ☐ AMEX ☐ DISCOVER	A. CREDIT CARD ACCOUNT NUMBER:	B. CARD EXPIRATION DATE:
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SECTION III - AUTHORIZATION

I authorize the United States Department of Agriculture Animal and Plant Health Inspection Service (USDA APHIS) to charge \$ _____ to my account.

5A. CARDHOLDER SIGNATURE:	5B. DATE:
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FOR USDA USE ONLY

6. ACTION <i>(select one):</i> ☐ ACCEPTED ☐ NOT ACCEPTED	A. DATE:	B. BY:	C. AUTHORIZATION CODE:
7. REASON IF NOT ACCEPTED:			



United States Department of Agriculture
Animal Plant and Inspection Services
Electronic Check Payment Form

United States
Department of
Agriculture

Marketing and
Regulatory
Programs

Animal & Plant
Health Inspection
Service

Animal Care
2150 Centre Ave.
Building B, 3W11
Fort Collins, CO
80526

Please type or print and write in all the information listed below. The payment submitted will be processed electronically as an ACH (Automatic Clearing House) through our Pay.gov system. Some banks have ACH Debt Blockers, meaning you will need to contact your bank and add USDA-APHIS to the bank's list of allowed "ACH company ID's".

Payee Information:

Account Holder Name _____

Account Address _____

City, State, Zip Code _____

Account Information:

Bank Account Type _____ Checking _____ Savings _____

Bank Routing Number _____

Bank Account Number _____

Amount Authorized _____ \$120.00 _____

Account Holders Signature _____ Date _____

FOR USDA OFFICE USE ONLY

Payment Accepted _____ Date Processed _____ Processed By _____

Authorization Code _____

or

Payment Declined _____ Reason Declined _____

Privacy Act Notice

Authority: The Animal Welfare Act (AWA), 7 U.S.C. 2131 *et seq.*, and the regulations issued thereunder, 9 CFR parts 1 through 4; and the Horse Protection Act (HPA), 15 U.S.C. 1821 *et seq.*, and the regulations issued thereunder, 9 CFR parts 11 and 12.

Purpose: This system supports APHIS' administrative activities and enforcement of the AWA and HPA.

Routine Uses:

In addition to those disclosures generally permitted under 5 U.S.C. 552a (b) of the Privacy Act, records maintained in the system may be disclosed outside USDA as follows:

- (1) APHIS may disclose the name, city, State, license or registration type and/or status, or change of a license or registrant to any person pursuant to 9 CFR 2.38(c) and 2.127;
- (2) APHIS may disclose annual reports submitted to APHIS by licensees and research facilities to any person pursuant to 9 CFR 2.7 and 2.36;
- (3) APHIS may disclose inspection reports and other regulatory correspondence issued to licensees and registrants [from the agency] to any attending veterinarian in order to carry out duties under the AWA pursuant to 9 CFR 2.33 and 2.40;
- (4) APHIS may disclose the name, telephone number and other contact information, location, inspection reports, and regulatory and other correspondence of licensees, registrants, permittees, and applicants for the same, to appropriate Federal, foreign, State, local, Tribal, or other public authority agencies or officials, in order to carry out duties under the AWA or State, local, Tribal or other public authority on the same subject pursuant to 7 U.S.C. 2145(b);
- (5) APHIS may disclose inspection reports of licensees and registrants, and permit status, to any pet store or other entity that is required under State, local, Tribal, or other public authority to verify a licensee, registrant, or permittee's compliance with the AWA;
- (6) APHIS may disclose information to the National Academies of Sciences, Engineering, and Medicine, and any other research institution engaged or approved by the Department, to the extent APHIS deems the disclosure necessary to complete research and/or compile a report in furtherance of the Department's mission;
- (7) APHIS may disclose final adjudicatory AWA and HPA decisions or orders by an appropriate authority to any person;
- (8) APHIS may disclose to any person the name, city, and State or other information to the extent necessary for proper identification of persons (referred to as "Designated Qualified Persons" or "DQPs") that are or have been qualified to detect and diagnose a horse that is sore or otherwise inspect horses for purposes of enforcing the HPA and of horse industry organizations or associations (referred to as "HIOs") that have currently or have had in the past DQP programs certified by the USDA;
- (9) APHIS may disclose to any regulated horse owner, HIO, and other entities responsible for licensure or required to verify compliance with the HPA, HPA inspection findings and regulatory and other correspondence issued to persons or entities regulated under the HPA;
- (10) APHIS may disclose to any person the name, city, and State or other information to the extent necessary for proper identification of any person or entity who has been disqualified, suspended, and/or otherwise prohibited from showing or exhibiting any horse, or judging or managing any horse show, horse exhibition, horse sale, or horse auction under the HPA and the terms of such action;
- (11) APHIS may disclose to any person the name, city, and State or other information to the extent necessary for proper identification of any regulated individual or entity whose license or permit has been suspended, revoked, expired, terminated, or denied under the AWA and the terms of such action;
- (12) APHIS may disclose to appropriate law enforcement agencies, entities, and persons, whether Federal, foreign, State, local, or Tribal, or other public authority responsible for enforcing, investigating, or prosecuting an alleged violation or a violation of law or charged with enforcing, implementing, or complying with a statute, rule, regulation, or order issued pursuant thereto, when a record in this system on its face, or in conjunction with other records, indicates a violation or potential violation of law, whether civil, criminal, or regulatory in nature, and whether arising by general statute or particular program statute, or by regulation, rule, or court order issued pursuant thereto, if the information disclosed is relevant to any enforcement, regulatory, investigative, or prosecutive responsibility of the receiving entity;
- (13) APHIS may disclose to the Department of Justice when the agency, or any component thereof, or any employee of the agency in his or her official capacity, or any employee of the agency in his or her individual capacity where the Department of Justice has agreed to represent the employee, or the United States, in litigation, where the agency determines that litigation is likely to affect the agency or any of its components, is a party to litigation or has an interest in such litigation, and the use of such records by the Department of Justice is deemed by the agency to be relevant and necessary to the litigation; provided, however, that in each case, the agency determines that disclosure of the records to the Department of Justice is a use of the information contained in the records that is compatible with the purpose for which the records were collected;
- (14) APHIS may disclose information in this system of records to a court or adjudicative body in administrative, civil, or criminal proceedings when: (a) The agency or any component thereof; or (b) any employee of the agency in his or her official capacity; or (c) any employee of the agency in his or her individual capacity where the agency has agreed to represent the employee; or (d) the United States Government, is a party to litigation or has an interest in such litigation, and by careful review, the agency determines that the records are to be for a purpose that is compatible with the purpose for which the agency collected the records;
- (15) APHIS may disclose information from this system of records to appropriate agencies, entities, and persons when: (a) USDA suspects or has confirmed that there has been a breach of the system of records; (b) USDA has determined that as a result of the suspected or confirmed breach there is a risk of harm to individuals, USDA (including its information systems, programs, and operations), the Federal Government, or national security; and (c) the disclosure made to such agencies, entities, and persons is reasonably necessary to assist in connection with USDA's efforts to respond to the suspected or confirmed compromise and prevent, minimize, or remedy such harm;
- (16) APHIS may disclose information from this system of records to another Federal agency or Federal entity, when the USDA determines that information from this system of records is reasonably necessary to assist the recipient agency or entity in (a) responding to a suspected or confirmed breach or (b) preventing, minimizing, or remedying the risk of harm to individuals, the recipient agency or entity (including its information systems, programs, and operations), the Federal Government, or national security, resulting from a suspected or confirmed breach;
- (17) APHIS may disclose information in this system of records to USDA contractors and other parties engaged to assist in administering the program, analyzing data, developing information management systems, processing Freedom of Information Act requests, and conducting audits. Such contractors and other parties will be bound by the nondisclosure provisions of the Privacy Act;
- (18) APHIS may disclose information in this system of records to USDA contractors, partner agency employees or contractors, or private industry employed to identify patterns, trends, or anomalies indicative of fraud, waste, or abuse;
- (19) APHIS may disclose information in this system of records to a Congressional office from the record of an individual in response to any inquiry from that Congressional office made at the written request of the individual to whom the record pertains;
- (20) APHIS may disclose information in this system of records to the National Archives and Records Administration or to the General Services Administration for records management activities conducted under 44 U.S.C. 2904 and 2906; and
- (21) APHIS may disclose information in this system of records to the Treasury Department as necessary to carry out any and all functions within their jurisdiction, including but not limited to, processing payments, fees, collections, penalties, and offsets.

Disclosure: Furnishing this information is voluntary; however, failure to furnish this information may impede your ability to comply with the requirements of the Animal Welfare Act, regulations, and standards.