

New or Renewal Registration Application

Please complete this application for registration of a research facility under section 4 of the *Animals for Research Act* in full. The Director appointed under the *Animals for Research Act* will determine all applications for registrations in accordance with the requirements of the Act. A registration expires with the 31st day of December of the year in which registration is made. Registrations must be renewed annually.

Required Fees

The fee is \$200 for one research facility (for the purposes of registration and fees incurred, one research facility is defined as any one or more facilities operated by the same organization and having the same postal code).

The fee is \$100 for each **additional** research facility (for the purposes of registration and fees incurred, additional research facilities are defined as any research facility operated by the same organization that have different postal codes).

Fields marked with an asterisk (*) are mandatory.

A fully completed application package contains:

- A full completed application form;
- A list of the current members of your organization's Animal Care Committee(s) (ACC);
- A list of all research facilities
- Payment of fees

Type of Registration *

- | | |
|----------------------------------|--|
| <input type="checkbox"/> New | Certificate Number (required if a renewal) |
| <input type="checkbox"/> Renewal | |

Section 1. Facility Information

Explanation of Terms

Research Facility: means premises on which animals are used in research and includes premises used for the collecting, assembling or maintaining of animals in connection with a research facility, but does not include a farm on which pregnant mares are kept for the collection of urine. R.S.O. 1990, c. A.22, s. 1.

Operator Name (person): This is the most senior administrator (e.g. President/CEO) of the institution who controls the registered animal facility and establishes the associated Animal Care Committee(s).

Contact Name (if different from Operator): Person on site who may be contacted by the Chief Veterinary Inspector to see an animal facility or to obtain information about the animal care and use program on site e.g. Facility Manager/Supervisor/ Animal Care Committee Co-ordinator.

Organization Name *

Operator Information

Operator Name (person) *

Position Title *

Telephone Number *

Email *

Mailing Address

Unit Number

Street Number *

Street Name *

PO Box

County

City/Town *	Province *	Postal Code *
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Contact Information Same as Operator Information

Last Name	First Name
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Position Title

Telephone Number	Email
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Section 2. Animal Care Committee

Attach a list of the current members of the ACC and identify each member's role on the committee (e.g. Dr. X, Veterinarian; Dr. Y, Scientist; Mr. Z, Committee Representative).

Section 3. Research Facility

Please list all facilities where research is conducted. If needed, use the Additional Research Facilities section at the end of this form.

Any one or more facilities operated by the same organization and having the same postal code are considered to be one research facility for the purpose of registration fees incurred (\$200).

Facilities operated by the same organization that have different postal codes (\$100 per additional facility).

Research Facility 1

Research Facility Name *

Address

Building Name

Unit Number	Street Number *	Street Name *	PO Box
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County

City/Town *	Province *	Postal Code *
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On-site Contact

Last Name *	First Name *
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Position Title *

Telephone Number *	Email *
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Research Facility 2

Research Facility Name

Address

Building Name

Unit Number	Street Number *	Street Name *	PO Box
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County

City/Town	Province	Postal Code *
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On-site Contact

Last Name	First Name
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Position Title

Telephone Number	Email
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Research Facility 3

Research Facility Name

Address

Building Name

Unit Number	Street Number	Street Name	PO Box
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County

City/Town	Province	Postal Code
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On-site Contact

Last Name	First Name
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Position Title

Telephone Number	Email
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Registration Fee Total \$

Section 4. Acquisitions/New Construction/Reconstruction (Renovations)

Explanation of when changes need to be reported to the Ministry

Without limitation by the generality of the following, rooms that are regulated under Regulations 22 and 24 under the *Animals for Research Act* include those used for animal housing, for surgical, experimental or testing procedures involving animals, storing feed, bedding or waste, including carcasses and excreta, as well as food preparation rooms. Elements of such rooms are also regulated, including floors, floor drains, walls, doors, windows, roofs and ceilings, light fixtures; pipes, drains, conduits or other service facilities; alleyways and service aisles between cages or pens, as well as their maintenance.

The Ministry must be informed of plans for changes of the premises. For example:

- converting an unregulated room for uses regulated under Regulation 24;
- converting a rodent holding room to a fish room or vice versa;
- converting a feed room to a surgery;
- renovations to older housing rooms with non-compliant surfaces (e.g. that have porous acoustic ceiling tiles, tiled floors, wood panelled walls, etc.)

Are you acquiring new animal facilities, planning renovations or reconstruction or new construction of animal facilities in the coming year? *

Yes No

If yes, you must provide a list of the premises you propose to acquire, renovate, construct or reconstruct as well as their plans and specifications, for Director approval prior to their acquisition, renovation, construction or reconstruction.

A list of premises the Applicant proposes to acquire, renovate, construct or reconstruct is included with this application.

Take notice that any plans or specifications that are submitted to the Director by a research facility operator will be assessed for the sole purpose of determining its compliance with the *Animals for Research Act* and its regulations. Such an assessment should not be construed as any form of determination of compliance with any other requirements of law. The Province of Ontario will not accept any liability for any damages, loss or injury arising in contract, tort or otherwise from an operator's reliance upon the Director's assessment for any other purposes or effect. The assessment comprises the Director's views. It does not constitute legal or other professional advice. You should consult your professional adviser for legal or other advice.

5. Certification

I certify that the foregoing information is, to the best of my knowledge, information and belief, true. I undertake to furnish to the Director appointed under the *Animals for Research Act* details of any material changes from the information provided on this form and any attachments no later than ten (10) business days after the date any such changes are made *

Operator Name (First Name and Last Name) *	Position Title *	Date (yyyy/mm/dd) *
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If you have any questions, please contact AHWApplications@ontario.ca or 226-979-2385.

Email completed application and supporting information to AHWApplications@ontario.ca and mail cheques or money orders (made out to Minister of Finance) to:

Animals for Research Registration
Animal Health and Welfare Branch
Ministry of Agriculture, Food and Rural Affairs
1 Stone Rd West, 5th Floor NW
Guelph ON N1G 4Y2

Use this page when registering more than three (3) Research Facilities.
Print or complete as many copies of this page as needed.

Additional Research Facilities

Please list all facilities where research is conducted. If needed, use the Additional Research Facilities form to supplement this document.

Any one or more facilities operated by the same organization and having the same postal code are considered to be one research facility for the purpose of registration fees incurred (\$200).

Facilities operated by the same organization that have different postal codes (\$100 per additional facility).

Research Facility 1

Research Facility Name

Address

Building Name

Unit Number	Street Number	Street Name	PO Box
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County

City/Town	Province	Postal Code
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On-site Contact

Last Name	First Name
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Position Title

Telephone Number	Email
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Research Facility 2

Research Facility Name

Address

Building Name

Unit Number	Street Number	Street Name	PO Box
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County

City/Town	Province	Postal Code
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On-site Contact

Last Name	First Name
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Position Title

Telephone Number	Email
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Research Facility 3

Research Facility Name

Address

Building Name

Unit Number	Street Number	Street Name	PO Box
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County

City/Town	Province	Postal Code
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On-site Contact

Last Name	First Name
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Position Title

Telephone Number	Email
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Research Facility 4

Research Facility Name

Address

Building Name

Unit Number	Street Number	Street Name	PO Box
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County

City/Town	Province	Postal Code
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On-site Contact

Last Name	First Name
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Position Title

Telephone Number	Email
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Registration Fee Total \$
