1. Name and address of establishment

*Application for Registration of Breeder/Establishment/ Educational Institutions / Shelters

| with T | el. No., Fax No. & E-r | nail. | | | | | | | | |
|--|---|--|-------------|------------------|--------------------------|--|--|--|--|--|
| a) | Number & date of registration as per company act / council or any other act | | | | | | | | | |
| b) | Name of the Siste | Name of the Sister organization and Address & Reference number | | | | | | | | |
| c) | Premises is Rente | Premises is Rented / leased / self owned. | | | | | | | | |
| | | | | | | | | | | |
| 2. Name of the Head of the organization with Address & Contact number. | | | | | | | | | | |
| 3. Object | ives of the organization | on | | | | | | | | |
| 4. Purpos | se of Registration | | | | | | | | | |
| 5. Procurement of animal | | | | | | | | | | |
| 1 | Name of the supplier 8 | & Address R | egistratio | n Number | Mode of transportation | | | | | |
| 6. Availability of animals and their housing facilities (please attach layout plan of AHF) | | | | | | | | | | |
| ľ | Name & breed of anim | nals Numl | per | Sex | Age | | | | | |
| 7. Place and facilities to conduct animal experimentation | | | | | | | | | | |
| a) Location of Animal House Facility (In the same premises or outside premises). | | | | | | | | | | |
| 8. Traine | d staff for animal exp | erimentation | | | | | | | | |
| 1 | Name Desig | nation | Qualific | cation | Experience | | | | | |
| | | | | | | | | | | |
| 9. Post e | xperimental facilities | or Animals | | | | | | | | |
| {In cas | se of rehabilitation, re | gistration numbe | er of shelt | er to which anim | al will be rehabilitate} | | | | | |

| b. Breeding | for trade or bus | iness | | | | |
|--------------------------------|------------------|----------------|--|-----------------------------------|-----------------------------|-------|
| | | | per Rule 13 of th 8, as amended) | e Breeding of and | d Experimen | ts on |
| a) Date of | constitution of | IAEC | | | | |
| b) | | | | | | |
| Name of member & age (DOB) | Designation | Qualification | Experience | Organization to which they belong | Resume Consent member | of |
| c) Minute: signature of all | | hich the propo | osal of registration | n with CPCSEA i | s approved, | with |
| | | | proposals with an ling sister organiz | | tion and date | es of |
| 13. Mode of tra | nsportation of a | nimals. | | | | |
| Verification: | | | | | | |
| | o 12 are true to | | cer), do hereby ve / knowledge and r | | | |
| | | | | Signature | | |
| | | | e and designation rman, IAEC | of head of the or | ganization / | |
| | | | | Seal | | |
| | | | | | | |
| Date: | | | | | | |

10. Details regarding Animal Breeding

a. Breeding for experimentation