

ANIMAL ACQUISITION WORKSHEET

Species desired African elephant (Loxodonta africana) Quan. 0.3  
 Reason: For new elephant exhibit opening Spring 1990

Source Alan Campbell Price \$15,000/ea. Quan. avail. 0.8  
 Address \_\_\_\_\_ Sexed \_\_\_\_\_ Related \_\_\_\_\_ Unrelated \_\_\_\_\_  
 Birth/Hatch date \_\_\_\_\_ w.c.  c.b.   
 Phone 303 399 2913 Contact Alan Date avail. immed. Letter sent? \_\_\_\_\_  
4337

Date 06/06/88 Called Alan in Denver. He reports Frank Thompson has  
8 54" African females available. Suggests we buy now, keep with him  
in Denver until '90. Campbell will break and train, pay for housing.

Source \_\_\_\_\_ Price \_\_\_\_\_ Quan. avail. \_\_\_\_\_  
 Address \_\_\_\_\_ Sexed \_\_\_\_\_ Related \_\_\_\_\_ Unrelated \_\_\_\_\_  
 Birth/Hatch date \_\_\_\_\_ w.c.  c.b.   
 Phone \_\_\_\_\_ Contact \_\_\_\_\_ Date avail. \_\_\_\_\_ Letter sent? \_\_\_\_\_

Date 06/06/88 - 08/10/88 discussed with Nancy Derrig & Roger Valles.  
Both agree we should buy the animals now and keep with Alan.  
Nancy will attempt to get funds, I will proceed.

Source \_\_\_\_\_ Price \_\_\_\_\_ Quan. avail. \_\_\_\_\_  
 Address \_\_\_\_\_ Sexed \_\_\_\_\_ Related \_\_\_\_\_ Unrelated \_\_\_\_\_  
 Birth/Hatch date \_\_\_\_\_ w.c.  c.b.   
 Phone \_\_\_\_\_ Date avail. \_\_\_\_\_ Letter sent? \_\_\_\_\_

Date 6/30/88 Flew to Sarasota, picked 3 elephants, paid  
\$25,000.00 deposit. Shipping arrangements to be made with  
Alan.

Source \_\_\_\_\_ Price \_\_\_\_\_ Quan. avail. \_\_\_\_\_  
 Address \_\_\_\_\_ Sexed \_\_\_\_\_ Related \_\_\_\_\_ Unrelated \_\_\_\_\_  
 Birth/Hatch date \_\_\_\_\_ w.c.  c.b.   
 Phone \_\_\_\_\_ Date avail. \_\_\_\_\_ Letter sent? \_\_\_\_\_

Date 7/31/88 Alan Campbell will transport elephants from  
FL to CO at the end of first week in August.

In-house discussion/comments \_\_\_\_\_

Date / /

Animal acquired from: \_\_\_\_\_

Shipping date / / Time \_\_\_\_\_ Airline \_\_\_\_\_ Flt # \_\_\_\_\_ Airbill # \_\_\_\_\_

# CERTIFICATE OF INSURANCE

SEE TABLES AT ARROWS  
 ISSUE DATE (MM/DD/YY)  
**7-18-88 as**

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

**General Corporation**  
 Box 4005  
 Denver, CO 80204

**Grant Goodson Ins. Agency (Broker)**  
 5600 S. Quebec #200C 796-7435  
 Englewood, CO 80111

## COMPANIES AFFORDING COVERAGE

- COMPANY LETTER **A** **Essex Insurance Company**
- COMPANY LETTER **B**
- COMPANY LETTER **C**
- COMPANY LETTER **D**
- COMPANY LETTER **E**

INSURED

**Elephantastic, Inc.**  
 540 Steele  
 Denver, CO 80206

### COVERAGES

THIS IS TO CERTIFY THAT POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS, AND CONDITIONS OF SUCH POLICIES.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIABILITY LIMITS IN THOUSANDS		
					EACH OCCURRENCE	AGGREGATE	
<b>A</b>	<b>GENERAL LIABILITY</b>	<b>3AB 10478</b>	<b>5-29-88</b>	<b>5-29-89</b>	BODILY INJURY	\$	\$
	<input type="checkbox"/> COMPREHENSIVE FORM				PROPERTY DAMAGE	\$	\$
	<input checked="" type="checkbox"/> PREMISES/OPERATIONS UNDERGROUND EXPLOSION & COLLAPSE HAZARD				BI & PD COMBINED	\$1,000	\$1,000
	<input type="checkbox"/> PRODUCTS/COMPLETED OPERATIONS CONTRACTUAL				PERSONAL INJURY		\$
	<input type="checkbox"/> INDEPENDENT CONTRACTORS						
	<input type="checkbox"/> BROAD FORM PROPERTY DAMAGE						
	<input type="checkbox"/> PERSONAL INJURY						
	<b>AUTOMOBILE LIABILITY</b>				BODILY INJURY (PER PERSON)	\$	
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (PER ACCIDENT)	\$	
	<input type="checkbox"/> ALL OWNED AUTOS (PRIV. PASS.)				PROPERTY DAMAGE	\$	
	<input type="checkbox"/> ALL OWNED AUTOS (OTHER THAN PRIV. PASS.)				BI & PD COMBINED	\$	
	<input type="checkbox"/> HIRED AUTOS						
	<b>EXCESS LIABILITY</b>				BI & PD COMBINED	\$	\$
	<input type="checkbox"/> UMBRELLA FORM						
	<input type="checkbox"/> OTHER THAN UMBRELLA FORM						
	<b>WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY</b>				STATUTORY		
					\$	(EACH ACCIDENT)	
					\$	(DISEASE-POLICY LIMIT)	
					\$	(DISEASE-EACH EMPLOYEE)	
	<b>OTHER</b>						

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

**\$500 ded per claim incl Loss Adjustment Expense**  
**Re: July 21 thru July 24, 1988**

### CERTIFICATE HOLDER

**Mission Trace Shopping Center**  
 3107 S. Academy Blvd.  
 Colorado Springs, CO 80916

### CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

*B. Nelson*

# GENERAL CHANGE ENDORSEMENT #2 JUL 7

INCREASE IN PREMIUM

ADDITIONAL

RETURN PREMIUM

\$ 250.00

Endorsement forms a part of Policy No. 3AB 10478 issued to Elephantastic, Inc.

the Essex Ins. Co. of its Agency located Wilmington, Delaware and is  
(Name of Insurance Company) (city and state)

effective from 7-15-88 In consideration of the premium charged it is understood and agreed that as of the  
(12:01 A.M. Standard Time)

effective date hereof the policy is amended as follows:

**An additional insured is hereby added per the attached L9451.**

OLD ANNUAL PREMIUM \$ \_\_\_\_\_ NEW ANNUAL PREMIUM \$ \_\_\_\_\_ DIFFERENCE \$ \_\_\_\_\_ + (-)

**7-18-88 as**

NOTHING HEREIN CONTAINED SHALL BE HELD TO WAIVE, ALTER, VARY OR EXTEND ANY AGREEMENTS, CONDITIONS OR TERMS OF THIS POLICY EXCEPT AS HEREIN STATED.

By \_\_\_\_\_  
(Duly Authorized Representative)

**CO GENERAL CORP. • P.O. BOX 4005 • DENVER, CO 80204**

BROKER

(The Attaching Clause need be completed only when this endorsement is issued subsequent to preparation of the policy.)

LIABILITY

G115  
ISO G115  
ADDITIONAL INSURED  
(Owners or Lessees)

L 9451  
(Ed. 1-73)

This endorsement modifies such insurance as is afforded by the provisions of the policy relating to the following:  
**COMPREHENSIVE GENERAL LIABILITY INSURANCE  
MANUFACTURERS' AND CONTRACTORS' LIABILITY INSURANCE**

This endorsement, effective 7-15-88, forms a part of policy No. 3AB 10478  
(12:01 A.M., standard time)

issued to Elephantastic, Inc.

by Essex Insurance Company

  
Authorized Representative

It is agreed that:

1. The "Persons Insured" provision is amended to include as an insured the person or organization named below but only with respect to liability arising out of operations performed for such insured by or on behalf of the named insured.
2. The applicable limit of the company's liability for the insurance afforded under the Contractual Liability Insurance Coverage Part forming a part of this policy shall be reduced by any amount paid as damages under this endorsement in behalf of the person or organization named below.

Name of Person or Organization  
(Additional Insured)

Division Trace Shopping Center



## Department of Public Parks

*"Building Pride In Providence"*

### LOAN AGREEMENT BETWEEN ELEPHANTASTIC, INC. (ALLEN CAMPBELL) AND THE ROGER WILLIAMS PARK ZOO

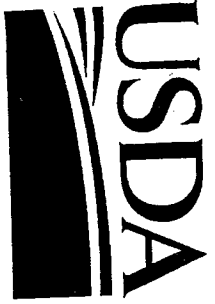
1. Allen Campbell agrees to provide the necessary housing, food, and veterinary care for three (3) female African elephants (*Loxodonta africana*) to the best of his ability. The Roger Williams Park Zoo agrees that in the event of disease, injury, or death of any of the elephants that Allen Campbell will be free of all responsibility to the zoo for such affliction and that no claim of any kind will be made against Mr. Campbell as long as it is certain that negligence, on his or any of his employees part, was not involved.
2. Mr. Campbell agrees to furnish the zoo with a complete report in case of severe illness or death of any of the animals.
3. Mr. Campbell will train these animals so that they can be handled by elephant keepers in the normal working routine of a zoo elephant exhibit. It is agreed that he will have use of the elephants and that any profits that accrue from this use while these animals are under his charge will be his financial gain and that no part of these profits will belong to the Roger Williams Park Zoo.
4. All transportation costs in shipping the elephants from their holding quarters in Florida to Elephantastic headquarters in Denver, Colorado and from Denver to the Roger Williams Park Zoo in Providence, Rhode Island will be borne by the Roger Williams Park Zoo.
5. Neither this agreement nor any rights or privileges granted hereunder shall be assigned without the prior written consent of the zoo.
6. This agreement will remain in effect until January 1, 1991.
7. Either party shall have the option of terminating this **agreement** prior to said date by giving the other party ninety (90) days written notice prior to the effective date of such earlier termination.

Roger Valles  
Roger Valles, director  
Roger Williams Park Zoo

2/27/88  
date

Allen Campbell  
Allen Campbell

8/1/88  
date



United States  
Department of  
Agriculture

Marketing and  
Regulatory  
Programs

Animal and  
Plant Health  
Inspection  
Service

Animal Care

EXPIRATION DATE: MARCH 21, 2006

This is to certify that

PROVIDENCE CITY OF  
DBA: ROGER WILLIAMS PARK ZOO

is a licensed  
under the

CLASS C EXHIBITOR

## Animal Welfare Act

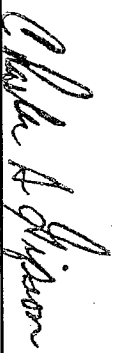
(7 U.S.C. 2131 et seq.)

Certificate No.

15-C-0004

Customer No.

2245

  
Deputy Administrator

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 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, Paperwork Project 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

MAR 04 2005

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

CERTIFICATE / CUSTOMER NO.	RENEWAL DATE	FEES	
		AMOUNT	DATE RECEIVED
CERT: 15-C-0004 CUST: 2245	21-MAR-2005	\$235.00	4 Mar 05

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

Providence City Of  
Roger Williams Park Zoo  
1000 Elmwood Avenue  
Providence, RI 02905

Telephone: (401)785-3510

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

Elmwood Ave  
Providence, RI 02905  
County: Providence  
Telephone: 401-785-3510

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

Jack Mulvena, Director

**4. (A) PREVIOUS USDA LICENSE NUMBER (if any)**

15-C-0004

**(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
01-JUL-2003	30-JUN-2004

**7. TYPE OF ORGANIZATION**

Individual  Corporation  Partnership  
 Other (Specify) zoological park

**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. 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 2.6 AND 2.7)

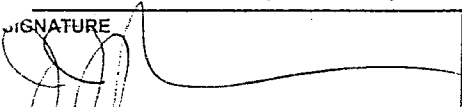
**9. CLASS C EXHIBITORS ONLY. (Number of animals holding now or held during the last business year, whichever is greater.)**

	DOGS	0	NONHUMAN PRIMATES	35	RODENTS (Do not include lab rats or mice)	36
CATS	0	MARINE ANIMALS	6	WILD/EXOTIC HOOFSTOCK	33	
GUINEA PIGS	0	FARM ANIMALS	10	BEARS	2	
HAMSTERS	0	WILD/EXOTIC CANINES	6	WILD/EXOTIC MAMMALS (NOT LISTED ELSEWHERE)	89	
RABBITS	6	WILD/EXOTIC FELINES	5	TOTAL (ALL ANIMALS LISTED IN BLOCK 9)	228	

**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, Su A, Parts 1, 2 and 3. I certify that I am 18 years of age or older.

10. SIGNATURE



11. PRINT NAME

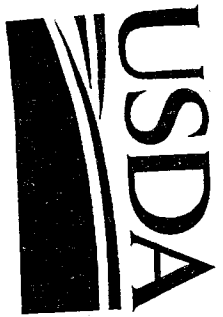
JACK MULVENA

12. SOCIAL SECURITY OR TAX IDENTIFICATION NUMBER

056016675

13. DATE

2/22/05



United States  
Department of  
Agriculture

Marketing and  
Regulatory  
Programs

Animal and  
Plant Health  
Inspection  
Service

Animal Care

EXPIRATION DATE: MARCH 21, 2005

This is to certify that

PROVIDENCE, CITY OF  
DBA: ROGER WILLIAMS PARK ZOO

is a licensed  
under the

CLASS C EXHIBITOR

## Animal Welfare Act

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

Certificate No.

15-C-0004

Customer No.

2245

Deputy Administrator

MAR 09 2004

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.

<p><b>U.S DEPARTMENT OF AGRICULTURE</b>  <b>ANIMAL AND PLANT HEALTH INSPECTION SERVICE</b></p> <p><b>APPLICATION FOR LICENSE</b>          (TYPE OR PRINT)</p> <p><b>LICENSE RENEWAL</b></p>	<p style="text-align: center;"><b>DO NOT USE THIS SPACE - OFFICIAL USE ONLY</b></p> <p>SEND THE COMPLETED FORM TO: <b>920 Main Campus Drive Suite 200, Unit 3040</b>  <b>Raleigh, NC 27606</b>  <b>Telephone: (919) 718-5537</b></p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:30%;">CERTIFICATE / CUSTOMER NO.</th> <th style="width:20%;">RENEWAL DATE</th> <th colspan="2" style="width:30%;">FEES</th> </tr> <tr> <td>CERT: 15-C-0004 CUST: 2245</td> <td>21-MAR-2004</td> <td style="width:15%;">AMOUNT</td> <td style="width:15%;">DATE RECEIVED</td> </tr> <tr> <td></td> <td></td> <td style="text-align: center; font-size: 1.2em;">235</td> <td style="text-align: center; font-size: 1.2em;">10 Mar 04</td> </tr> </table>	CERTIFICATE / CUSTOMER NO.	RENEWAL DATE	FEES		CERT: 15-C-0004 CUST: 2245	21-MAR-2004	AMOUNT	DATE RECEIVED			235	10 Mar 04
CERTIFICATE / CUSTOMER NO.	RENEWAL DATE	FEES											
CERT: 15-C-0004 CUST: 2245	21-MAR-2004	AMOUNT	DATE RECEIVED										
		235	10 Mar 04										

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

Providence, City O  
 Roger Williams Park Zoo  
 1000 Elmwood Avenue  
 Providence, RI 02905

Telephone: (401)785-3510

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

Elmwood Ave  
 Providence, RI 02905  
 County: Providence  
 Telephone: 401-785-3510

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

Jack Mulvena, Director

**4. (A) PREVIOUS USDA LICENSE NUMBER (if any)**

-- 15-C-0004

**(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
01-JUL-2002	30-JUN-2003

**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)

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

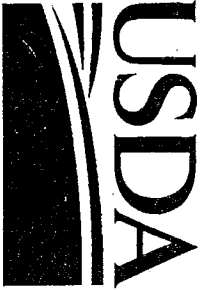
DOGS	0	NONHUMAN PRIMATES	37	RODENTS <small>(Do not include lab rats or mice)</small>	44
CATS	0	MARINE ANIMALS	6	WILD/EXOTIC HOOFSTOCK	33
GUINEA PIGS	0	FARM ANIMALS	12	BEARS	2
HAMSTERS	0	WILD/EXOTIC CANINES	6	WILD/EXOTIC MAMMALS <small>(NOT LISTED ELSEWHERE)</small>	95
RABBITS	9	WILD/EXOTIC FELINES	5	TOTAL <small>(ALL ANIMALS LISTED IN BLOCK 9)</small>	249

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

**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, Part A, Parts 1, 2 and 3. I certify that I am 18 years of age or older.

<b>10. SIGNATURE</b> 	<b>11. PRINT NAME</b> <b>JACK MULVENA</b>	<b>12. SOCIAL SECURITY OR TAX IDENTIFICATION NUMBER</b> 056016675	<b>13. DATE</b> 23 Feb. 2004
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United States  
Department of  
Agriculture

Marketing and  
Regulatory  
Programs

Animal and  
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Animal Care

EXPIRATION DATE: MARCH 21, 2004

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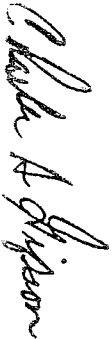
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CLASS C EXHIBITOR  
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(7 U.S.C. 2131 et seq.)

Certificate No. 15-C-0004

Customer No. 2245

  
Deputy Administrator

MAR 14 2003

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

APPLICATION FOR LICENSE

(TYPE OR PRINT)

LICENSE RENEWAL

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SEND THE COMPLETED FORM TO: 920 Main Campus Drive Suite 200, Unit 3040  
Raleigh, NC 27606  
Telephone: (919) 716-5537

CERTIFICATE / CUSTOMER NO.	RENEWAL DATE	FEES	
		AMOUNT	DATE RECEIVED
CERT: 15-C-0004 CUST: 2245	21-MAR-2003	\$235.00	14 Mar 03

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

Providence, City Of  
Roger Williams Park Zoo  
1000 Elmwood Avenue  
Providence, RI ~~02908~~ 02907  
Providence County  
Telephone: (401)785-3510

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

1000 Roger Williams Park Zoo  
Elmwood Ave  
Providence, RI ~~02908~~ 02907  
County: Providence  
Telephone: 401-785-3510

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

Jack Mulvena, Director  
Roger Williams Park Zoo  
1000 Elmwood Avenue  
Providence, RI 02907  
401-785-3510

4. (A) PREVIOUS USDA LICENSE NUMBER (if any)

(B) ACTIVE USDA CERTIFICATE NUMBER IN WHICH YOU HAVE AN INTEREST:  
15-C-0004

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  
01-JUL-2001 30-JUN-2002

7. TYPE OF ORGANIZATION

Individual  Corporation  Partnership  
 Other (Specify) zoological institution

8. DEALERS ONLY. Class A or Class B licensees must complete this Block. (Class C Exhibitors go to Block 9)

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CLASS B (DEALER) - LINE 'D' = LINE 'C' LESS THE AMOUNT PAID FOR THE ANIMAL(S)  
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D. DOLLAR AMOUNT ON WHICH FEE IS BASED (SECTIONS 2.6 AND 2.7)

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

DOGS	0	NONHUMAN PRIMATES	39	RODENTS (Do not include lab rats or mice)	45
CATS	0	MARINE ANIMALS	6	WILD/EXOTIC HOOFSTOCK	20
GUINEA PIGS	0	FARM ANIMALS	5	BEARS	2
HAMSTERS	0	WILD/EXOTIC CANINES	6	WILD/EXOTIC MAMMALS (NOT LISTED ELSEWHERE)	104
RABBITS	9	WILD/EXOTIC FELINES	5	TOTAL (ALL ANIMALS LISTED IN BLOCK 9)	241

CERTIFICATION

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SIGNATURE

11. PRINT NAME

12. SOCIAL SECURITY OR TAX IDENTIFICATION NUMBER

13. DATE

JOHN J. MULVENA

056016675

10 March 2003



United States  
Department of  
Agriculture

Marketing and  
Regulatory  
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Animal and  
Plant Health  
Inspection  
Service

Animal Care

EXPIRATION DATE: MARCH 21, 2003

This is to certify that

PROVIDENCE, CITY OF

DBA: ROGER WILLIAMS PARK ZOO

CLASS C EXHIBITOR

is a licensed  
under the

### Animal Welfare Act

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

Certificate No. 15-C-0004

Customer No. 2245

Deputy Administrator

FEB 11 2002

FORM APPROVED OMB NO. 0579-0036

No license may be issued unless a completed application has been received (7 U.S.C. 2133-2135), 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) 716-5537

CERTIFICATE / CUSTOMER NO.	RENEWAL DATE	FEES	
		AMOUNT	DATE RECEIVED
CERT: 15-C-0004	21-MAR-2002	\$235.00	13-Feb-02
CUST: 2245			

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

Providence, City O  
Roger Williams Park Zoo  
1000 Elmwood Avenue  
Providence, RI 02905

Providence county  
Telephone: (401)785-3510

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

1000 Roger Williams Park Zoo  
1000 Elmwood Ave  
Providence, RI 02905  
County: Providence  
  
Telephone: 401-785-3510

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

Bruce Clark, Director  
Roger Williams Park Zoo  
1000 Elmwood Avenue  
Providence, RI 02905  
  
401-785-3510

**4. (A) PREVIOUS USDA LICENSE NUMBER (if any)**

-- 15-C-0004

**(B) ACTIVE USDA CERTIFICATE NUMBER IN WHICH YOU HAVE AN INTEREST:**

NA

**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
01-JUL-2000	30-JUN-2001

**7. TYPE OF ORGANIZATION**

Individual  Corporation  Partnership  
 Other (Specify) Zoological institution

**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)
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 2.6 AND 2.7)

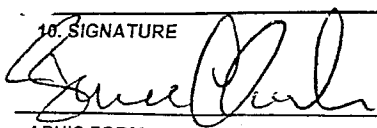
**9. CLASS C EXHIBITORS ONLY. (Number of animals holding now or held during the last business year, whichever is greater.)**

DOGS	NONHUMAN PRIMATES	39	RODENTS (Do not include lab rats or mice)	63
CATS	MARINE ANIMALS	3	WILD/EXOTIC HOOFSTOCK	31
GUINEA PIGS	FARM ANIMALS	6	BEARS	5
HAMSTERS	WILD/EXOTIC CANINES	6	WILD/EXOTIC MAMMALS (NOT LISTED ELSEWHERE)	95
RABBITS	WILD/EXOTIC FELINES	5	TOTAL (ALL ANIMALS LISTED IN BLOCK 9)	263

**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

**10. SIGNATURE**



**11. PRINT NAME**

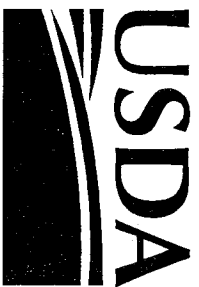
Bruce Clark, Director

**12. SOCIAL SECURITY OR TAX**

056016675

**13. DATE**

30 Jan. 2002



**United States  
Department of  
Agriculture**

**Marketing and  
Regulatory  
Programs**

**Animal and  
Plant Health  
Inspection  
Service**

**Animal Care**

**EXPIRATION DATE: MARCH 21, 2002**

This is to certify that

**PROVIDENCE, CITY OF  
DBA: ROGER WILLIAMS PARK ZOO**

is a licensed **CLASS C EXHIBITOR**  
under the

**Animal Welfare Act**

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

Certificate No. **15-C-0004**

Customer No. **2245**

Deputy Administrator

... searching existing data sources, gathering and maintaining the data needed, and collection of information. Send comments regarding this burden estimate or any other information, including suggestions for reducing this burden, to Department of Agriculture, Room 404-W, Washington, DC 20250, and to the Office of Information and Regulatory Management and Budget, Washington, DC 20503

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

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SEND THE COMPLETED FORM TO:

# APPLICATION FOR LICENSE

(TYPE OR PRINT)

RENEWAL

LICENSE NO.	RENEWAL DATE	FEES	
		AMOUNT	DATE RECEIVED
2245 15C0004	21 MAR 00	\$235.00	14 Feb 00

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

City of Providence  
Roger Williams Park zoo  
1000 Elmwood Avenue  
Providence, RI 02907

COUNTY: Providence TELEPHONE (401) 785-3510

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

Roger Williams Park Zoo  
1000 Elmwood Avenue  
Providence, RI 02907

COUNTY: Providence TELEPHONE (401) 785-3510

3. IF PREVIOUSLY LICENSED - NAME AND ADDRESS

Roger Williams Park Zoo  
1000 Elmwood Avenue  
Providence, RI 02907

PREVIOUS LICENSE NO.: 15-C-0004

4. NAME AND ADDRESS OF OTHER BUSINESS(S) HANDLING ANIMALS IN WHICH APPLICANT/LICENSEE HAS AN INTEREST

N/A

5. TYPE OF LICENSE

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

6. DATE OF LAST BUSINESS YEAR

FROM			TO		
MO	DAY	YEAR	MO	DAY	YEAR
07	01	98	06	31	99

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  
 Drive thru Zoo  K - Pet Store  L - Broker

8. TYPE OF ORGANIZATION

Partnership  Corporation  Individual  
 Other (Specify) Municipal run institution

9. LIST OWNERS, PARTNERS, AND OFFICERS

NAME AND TITLE	ADDRESS
Bruce Clark, Director City of Providence, Owner	Roger Williams Park Zoo 1000 Elmwood Avenue Providence, RI 02907

10. DEALER ONLY

TOTAL NO. OF ANIMALS PURCHASED IN THE LAST BUSINESS YEAR	
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 2.8 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	46
GUINEA PIGS		MARINE MAMMALS	7
HAMSTERS		WILD OR EXOTIC MAMMALS	172
OTHER (i.e., farm animals) (List Species and No)	Guinea hog 2 Dexter cattle 2 Tunis sheep 2 Nigerian dwarf goat 2		total-8

CERTIFICATION

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12. SIGNATURE 	13. NAME AND TITLE (Type or Print) Bruce Clark, Director	14. DATE 1/20/00
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