



# Department of Health

KATHY HOCHUL  
Governor

JAMES V. McDONALD, MD, MPH  
Commissioner

JOHANNE E. MORNE, MS  
Executive Deputy Commissioner

Dear Colleague,

Please find attached the license certificate for operation of your tissue, hematopoietic progenitor cell, or nontransplant anatomic bank.

**NOTE: the Tissue Resources Program has moved to electronic (PDF) licenses. Paper license certificates will no longer be issued.**

The certificate is effective until the date indicated. Please print the license, it must be posted conspicuously at the approved location. Your license is specific to this location; you must notify the Department of any changes in address.

You must submit a new application if you intend to expand your services or activities beyond those listed on this certificate. All tissue for clinical use must be procured, processed, stored, and distributed by tissue banks licensed by the Department for the relevant activities.

To remain in compliance with New York State regulations, you must also:

- Report any changes in director, medical director, and compliance officer within five days;
- Report any change in ownership of five percent or more within 30 days;
- Report any errors or accidents in retrieval, testing, processing, storage, or distribution that may affect the safety of any product within seven calendar days of discovery.

Application forms, specifics of 10 NYCRR Part 52 and Subpart 58-5 regulations, and updated policies are available online at [wadsworth.org/regulatory/tissue-resources](http://wadsworth.org/regulatory/tissue-resources). If you have any questions, please call (518) 485-5341, or e-mail [tissue@health.ny.gov](mailto:tissue@health.ny.gov). Please reference the Facility ID number at the top of your license in any correspondence.

Sincerely,

A handwritten signature in blue ink, appearing to read "Matthew Kohn".

Matthew Kohn, PhD  
Director  
Tissue Resources Program

Enclosure

# NEW YORK STATE DEPARTMENT OF HEALTH

## LICENSE FOR TISSUE BANK OPERATION

Issued in accordance with and pursuant to section 4364 Public Health Law of New York State

*Facility ID: 949*

**HPC Bank Director:**  
Sara H. Irrgang, MD

**Medical Director:**  
Sara H. Irrgang, MD

**Cord For Life, Inc.**  
**270 Northlake Boulevard, Suite 1012**  
**Altamonte Springs, FL 32701**

**is hereby APPROVED as a Tissue Bank for the following categories of service:**

**Comprehensive Tissue Procurement Service**  
**Tissue Processing Facility**

**Umbilical cord blood**  
**Umbilical cord blood**

**Issued: February 25, 2026**

**Owner: Cord For Life, Inc.**

**Expires: March 1, 2028**

Property of the New York State Department of Health. Valid only at the address shown. Must be conspicuously posted.

DOH-3908 (04/2001)