

## Request for Animal Shipment (Export)

INSTRUCTIONS: Please complete all sections and return by email or fax to: 845-8221-

Robyn Wilkins - LAR E-mail: [robyn.wilkins@roswellpark.org](mailto:robyn.wilkins@roswellpark.org) Phone: 716-845-1781

Please call (716) 845-1781 if you have questions. **Incomplete paperwork will be returned to preparer for completion.**

Date of Request: \_\_\_\_\_

### [RPCI Exporting Investigator Information](#)

PI Name:		Phone #:	
Department:		Fax #:	
Lab Contact	Phone #:	E-mail:	

### **Animal information:**

Species: \_\_\_\_\_ Room # \_\_\_\_\_ Prot# \_\_\_\_\_

Strain: \_\_\_\_\_ Number of Animals: \_\_\_\_ Sex: \_\_\_\_ Age: \_\_\_\_

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- Exact animal information will be requested once export approved for shipment

### **Destination**

#### [Receiving Institute Information](#)

**Institution Name:**

\_\_\_\_\_

**Address:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

<b>PI Name:</b>	<b>Lab Contact</b>
Phone #:	Phone #:
Fax#	Fax#:
E-mail:	E-mail:
<b>Facility Veterinarian:</b>	<b>Shipping Coordinator / Vivarium Contact</b>
Phone #:	Phone #:
Fax#	Fax#:
E-mail:	E-mail:

- An **Animal Transfer and Liability Agreement** from RPCI must be signed by receiving investigator/Institute Official prior to animal release. Once form is signed by appropriate personnel at receiving institute, the form is to be forwarded to Ms. Kristen Castner (901 Washington, room 235) for RPCI signatures
- An **Animal Protocol Assurance form** must be signed by the receiving investigator/Institution (see next page).

# Animal Protocol Assurance

(Filled out and signed by persons at receiving Institute)

Receiving PI. \_\_\_\_\_

Contact information if different from requestor:

Project / Experimental Title: \_\_\_\_\_

IACUC/ Ethics Program approval #: \_\_\_\_\_ Expiration date: \_\_\_\_\_

IACUC/Ethics Program Chairperson: Name:

\_\_\_\_\_

Phone Number: \_\_\_\_\_

PHS Animal Welfare Assurance Number: \_\_\_\_\_

PI's Signature: \_\_\_\_\_ Date: \_\_\_\_\_