

**DEPOSIT FOR PURPOSES OF PATENT PROCEDURE UNDER
BUDAPEST TREATY**
**ACCESSION FORM:
BACTERIA/YEAST/BACTERIOPHAGE/PLASMID**

*This form must be completed before, or at the same time as
the biological material is deposited.*

*Leave Blank: to be completed by
NCIMB*

Date deposit received:

NCIMB accession number:

1. DEPOSITOR INFORMATION		Main contact:
Depositor: (ie name of applicant) Note: Unless otherwise stated the name of the institute, company etc. will be taken as the depositor		
Depositor address		
Address for correspondence if different from above		
Telephone		
Email		

2. PATENT AGENT INFORMATION		Main contact:
Contact name		
Company		
Address for correspondence		
Telephone		
Email		

NCIMB Limited

Ferguson Building, Craibstone Estate, Bucksburn, Aberdeen, AB21 9YA., United Kingdom
Tel: +44 (0)1224 711100 Email: enquiries@ncimb.com Website: www.ncimb.com

3. DETAILS OF THE MICROORGANISM	
Name of microorganism	
Depositor's strain designation	
Pure culture If NO please specify:	YES <input type="checkbox"/> NO <input type="checkbox"/>
Genetically manipulated If YES please specify:	YES <input type="checkbox"/> NO <input type="checkbox"/>

4. CONDITIONS FOR CULTIVATION	
Can the organism be grown routinely on nutrient agar/broth? If No please specify medium:	YES NO
Additional supplements	
Incubation temperature	°C
Oxygen regime	Aerobic Microaerophilic Obligate anerobic
Specific gaseous regime	

5. LONG TERM PRESERVATION	
Can the microorganism be preserved without significant changes in its properties by:	
Freeze drying (Lyophilisation) in serum/glucose broth ('mist desicans')	YES NO UNKNOWN
Freezing In 10% glycerol broth	YES NO UNKNOWN

6. ENVIRONMENT AND SAFETY INFORMAITON	
Risk group	ACDP 1 ACDP 2
Is the deposit known to be or likely to be hazardous to the health of:	
Man: YES NO	If YES please provide details:
Animals: YES NO	If YES please provide details:
Plants: YES NO	If YES please provide details:

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Deposited biological material shall be stored for a period of at least 30 years and at least 5 years after the most recent request for the furnishing of a sample.

After this time, the biological material will be added to the NCIMB's open collection, from where NCIMB will make it generally available.

7. DECLARATION	
We hereby declare that to the best of our knowledge, the information given above is true and correct	
SIGNED	
DEPOSITOR	
DATE	
SIGNED	
OTHER APPROVED SIGNATORY	
DATE	

Important Information:

As soon as we receive your deposit, we will contact you with an NCIMB number and provisional date of deposit. Please note that this is not evidence that you have made a valid deposit. Results of viability testing are required before official notification can be made.

For more information about what we do with your personal information please see our [privacy notice](#).