

Free Microbial Identification Service for CABI Member Countries

Identification Request Form

A copy of this form must be enclosed with samples submitted for identification. If you have any queries about completing this form, please contact Microbial Services Tel: +44 (0) 1491 829080 or email: microbiologicalservices@cabi.org.

Please enter your reference, or code for correspondence (if not applicable, leave blank)

Your details (Please enter in BLOCK CAPITALS):

Title:

Surname:

Forename(s):

Address:

Tel:

Fax:

Email:

Processing requirements: [Please tick] Identification Deposit

The section below must be completed:

Please state the relevance of your enquiry to plant health issues of agricultural importance or food security:

INTERNAL USE ONLY

Parcel Number	<input type="text"/>	Number of idents	<input type="text"/>	Accepted by	<input type="text"/>
Date received	<input type="text"/>	Number of cultures	<input type="text"/>	Bag number	<input type="text"/>
H & S check date	<input type="text"/>	Number of specimens	<input type="text"/>	Enquiry number	<input type="text"/>
Mite check	<input type="text"/>	Number found broken	<input type="text"/>	IMI numbers	<input type="text"/>

Notes:

Category of submission

Please indicate the nature of your enquiry by ticking the relevant boxes in the list below:

Agriculture/Horticulture Plant pathology Food security Quarantine

Other (please state):

Samples submitted for deposit

If you are depositing samples in the CABI herbarium or culture collection, please send an email or covering letter explaining why you wish to deposit the samples. We will then consider your request. To be considered for free deposit, samples must be fully identified on submission. CABI operates in accordance with the Convention on Biological Diversity. Please refer to details on Page 4, paragraph 5 of this form and sign the Declaration below:

I have read paragraph 5 on Page 4 of this form and understand the requirements and my responsibilities under the Convention on Biological Diversity. I am not aware of any terms and conditions that prevent the deposit of material in the CABI collection for distribution and use.

Signature/authority _____ Date _____

Reports

To ensure the identification report reaches you immediately upon completion, this can be emailed as a pdf document provided you supply your email address on the front of this form. Please state your requirements for reporting by ticking the relevant box:

I am willing for the report to be emailed as a pdf document
I require a hard copy of the report sent by post

Declaration

Samples are submitted on the understanding that CABI retains all rights to use or dispose of these in any manner it deems appropriate unless contrary instructions are received at the time of submission.

Signature/authority _____ Date _____

Sample details

Read notes overleaf before completing.

Sender's number	Provisional Identification	Host organism	Substrate or organism part from which the sample was obtained (eg soil, air, settle plate, leaf, stem etc)
Date collected/isolated			
Collector/isolator	Where collection was made		Other information or special requirements
Recommended media			

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1. Acceptance criteria : Please note the following:

1. Samples must be submitted with adequate documentation.
2. Samples must not be known or suspected to be pathogenic to man or animals.
3. Samples must be free of mites.
4. Cultures must be pure (not mixed), containing only one organism.

2. Samples are not returned so please keep some material for your own reference. Samples that contain mites will be discarded and no identification attempted. Suitable packaging is vital to ensure the safe transmission of samples. Please refer to our website for recommendations.

3. Sample details: Required information is as follows:

Sender's number: Give your own number or code for each sample. This must be unique for each sample and each packet or culture relating to the material should be labelled with the number or code.

Provisional identification: If you have some idea of the genus or species of your sample, enter the name.

Host organism: Enter the latin name (genus and species if known) of the plant / insect etc. on which the sample was collected or from which it was isolated.

Substrate or organism part from which the sample was obtained: Enter the substrate: soil, air, contact plate etc. or describe the organism part e.g. 'leaf, fallen'; 'leaf, leafspot' or stem, root, etc.

Where collection was made: Enter in the following order: the country, state or county, nearest town, and name of site where the sample was collected or isolated. Omit the site if this is a laboratory address.

Date collected/isolated: Delete whichever does not apply and enter the date eg collected/isolated 5 Jan 2012 or collected/isolated 9 Mar 2012.

Collector / isolator: Enter the name of the person or persons who made the collection or isolation.

Letter of Authority

If sending samples from overseas, **please write our DEFRA plant health licence number: PHSI 139/6910 (11/2012) on the outside of your package and enclose a copy of our Letter of Authority.** This can be downloaded from our website: www.cabi.org/microbialservices For EU member countries, please complete Boxes 1 and 13 of the form. For all other countries, please complete Box 1 only of the form.

The address to send samples is:

Microbial Identification Service, CABI, Bakeham Lane, Egham, Surrey, TW20 9TY, England, UK.
Tel.:+44 (0)1491 829080 Fax.:+44 (0)1491 829100 Email: microbiologicalservices@cabi.org

Please follow biological sample postage and packaging regulations which are available on our website.

Recommended media: Enter the growth media used e.g. MA. Also state any special conditions for growth.

Other information: Enter any additional information e.g. ecological details; symptoms; pathogenicity; toxins or metabolites produced; whether the material was intercepted during quarantine checks; special requirements for the sample etc.

4. Genetically modified samples

Please state if any of your samples have been genetically modified and give full details in a covering letter.

5. Requests for deposit of material

This is a service offered primarily to those either publishing new species or submitting fully identified material relating to publications. If you are requesting deposit of samples, please state the reason for which the deposit is required and if possible, give details of the relevant publication.

CABI operates in accordance with the **Convention on Biological Diversity**. For those wishing to deposit samples collected after December 1993, you will need to confirm that prior informed consent (PIC) was received to collect the material and to deposit in an *ex situ* collection for distribution and use. This should have been obtained from the land owner and/or relevant national authority, stakeholders or rights holders, according to national law of the originating country. The UK respects property law in this context and therefore collectors must have permission from the land owner to collect the genetic resources for subsequent distribution and use. Please note that under the requirements of the CBD, CABI is unable to accept samples for deposit without such confirmation. Full details of the CBD and the relevant national authority are available at <http://www.cbd.int/> (See article 15.5 relating to PIC).

6. Intellectual Property Rights

CABI will own all IPR generated by its own activities except where CABI has agreed otherwise. This includes sequence data generated from samples submitted for identification. Molecular sequence data will be supplied to the client on request, but clients are requested to seek prior agreement with CABI to publish such data or to place such data on a public database.