Department of Health and Human Services Public Health Service, National Institutes of Health  Application for Permit to Introduce Rodents and Rodent Products  See NIH Manual 3043-1 for complete instructions. Use additional sheets if more space is needed.			1. Request Permit To	,			
			Introduce from Import into U.S			odents odent Products/Embryo	
			<u> </u>				
			4. From (Name, address, E-mail address, phone no. and fax no. of facility)				
3a. To (Name of requester)  3b. Institute/Laborato							
On All I Address (Dide /Des)	3d. E-mail a		F. Conveyand Chasis	. Camman	Nome (a)	Correct Names alatura	
3c. NIH Address (Bldg./Rm.)  3d. E-ma		address	5. Genus and Species, Common Name(s), Correct Nomenclature, Color, Strain/Stock or Description of Rodent Product				
3e. Phone No.	3f. FAX No.		_				
Co. Llava the co. coincide heavy initiated (Co. coincide de Co. coincide de Co			Ch. Loostian gurranthulagurant				
6a. Have these animals been injected/manipulated?			6b. Location currently housed  Building: Room:				
7. Number of Animals to be Rece	ived		8. Approximate Date of Arrival		9. Approved Animal Study		
Male: Female: Age range:						oposal No.	
10a. Medical History of the Origin	nating Colony or	Tissue					
10b. Current Location or Source	of the Colony or T	issue					
10c. What diseases or parasites	are known to be	present in the originating	ı colony?				
Too. What alcoacco of paracitos	are known to be	process in the originating	, 00.01.9 .				
11. Has colony or tissue been che			·— –	_		nt an antibody response?	
Choriomeningitis (LCM) virus  13. Name, title, E-mail address, p		(if applicable)? Yes  14a. Final Location whe	No Lere animals or tissue	_ Yes □ 15 Specia	No I requirem	Unknown ents for handling animals	
FAX no. of sending institution	's facility	will be housed and/or used or tissue du			e during the	ing the quarantine period	
				Reder	Rederivation by IETS Standards (modified)		
				r of Quarantine			
		Yes No	DO NOT B		_		
		14c. Quarantine location					
		140. Quarantino location		Other:			
						22. Date Signed	
I certify that these animals	16. Requeste	r's Name	19. Signature	19. Signature			
or tissues will be used in accordance with all	17 IC Animal	Program Director's Nam	ne 20 Signature	e 20. Signature			
restrictions and	)	1 Togram Director 3 Nam	20. dignature			23. Date Signed	
precautions as may be	18. Facility Ve	eterinarian's Name	21. Signature			24. Date Signed	
specified in the permit.	<u>/</u>						
25. Quarantine Requirements							
	Permit to	Introduce Rode	nts or Rodent Pr	oducts			
Permit Number							
2. Remarks						Quarantine location	
z. Romano						S. Sacramino location	
			_				
Fenbendazole feed in 127/128 & 14						F. Doto looved	
4. Signature of DVR Rodent Import Officer or designee						5. Date Issued	