

ANIMAL CARE OPERATIONS

NONTRADITIONAL VENDOR ANIMAL IMPORT-EXPORT FORM

Form Usage: To import or export animals from the vivariums at University of Houston.
713-743-9200 (fax) | ACO Office, Health and Biomedical Sciences Bldg., Ste. 505

ACO coordinates all animal imports and exports. All animal imports and exports require veterinarian approval.

This form must be submitted ten (10) days prior to requested delivery.

Because animals that carry diseases can jeopardize valuable animal colonies at our institution, animals from nontraditional vendors must be quarantined. Approval for shipment of rodents will be granted if the originating colony is negative for the presence of pathogens of concern based on sentinel health reports requested from the sending institution. Incoming nontraditional vendor rodents must be quarantined and tested for specific pathogens before they can be used. The method of length of quarantine varies depending on the testing method. Quarantine testing options will be discussed with the investigator prior to delivery. All charges for quarantine, including special feed and quarantine testing, will be charged the actual cost plus 30 percent.

ACO INFORMATION:

PI Name: _____	Protocol # _____
Department: _____	Shipping costs paid by UH investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No
Phone: _____	Acct./PO#: _____
Primary Contact: _____	Other Contact: _____
Phone: _____ Fax: _____	Phone: _____ Fax: _____
Email: _____	Email: _____
For Rodents: Dr. Angelina Williams	Phone: 713-743-2971
Shipping Contact: Animal Care Operations	Phone: 713-743-9199
Email: aco@central.uh.edu	Fax: 713-743-9200

OTHER INSTITUTION:

Institution Name: _____	Int'l Shipment? <input type="checkbox"/> Yes <input type="checkbox"/> No
Shipping Address: _____	
PI Name: _____	Phone: _____ Fax: _____
Department: _____	Email: _____
Shipping Contact: _____	Veterinarian Contact: _____
Phone: _____ Fax: _____	Phone: _____ Fax: _____
Email: _____	Email: _____

ANIMAL INFORMATION:

Species/Strain: _____	Total # to Ship: _____	Male: <input type="radio"/>	Female: <input type="radio"/>
Housing bldg./room#: _____			

For rodent imports, list the specific transgenic strain name. IACUC approval is necessary before shipment.

SHIPPING INFORMATION:

<input type="checkbox"/> Import	Preferred shipping date: _____
<input type="checkbox"/> Export	Special care needed?: _____
Other comments: _____	

ADMINISTRATIVE USE ONLY

Shipping/Other fees: _____	PROTOCOL REVIEW
Charged to: _____	# Request: _____ Strain: _____