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| NBRC_LOGO_Transparency縮小 | NBRC ® Culture Collection  2-5-8, Kazusa-kamatari, Kisarazu, Chiba 292-0818, Japan  TEL: +81-438-20-5763, FAX: +81-438-52-2329  E-mail: nbrc-order@nite.go.jp | NBRC® Culture Collection use only: |
| NBRC Accession No.:  Date accepted: |

**Accession Form for Deposit (Microorganism)** \*Mandatory fields

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **1. Designation / Scientific name of strain** | | | | | | | | | | | | | | | | | |
| Scientific name of the strain\*: | | | | | | | | | | | | | | | | | |
|  | Phylum/Division: | | | | | | | Class: | | | | Order: | | | | Family: | |
| Depositor’s strain No. (strain label)\*: | | | | | | | | | | | | | | | | | |
| Other collection accession No.: | | | | | | | | | | | | | | | | | |
| Scientific name and strain no. of the host (for bacteriophages)\*： | | | | | | | | | | | | | | | | | |
| Herbarium specimen's no. and location (for Eukarya): | | | | | | | | | | | | | | | | | |
| Is the strain taxonomic type (or ex type)?\*:  Yes ( Holotype,  Neotype,  Isotype,  Paratype,  Other),  No | | | | | | | | | | | | | | | | | |
| **2. History since original isolation** | | | | | | | | | | | | | | | | | |
| NBRC <- Depositor | | | | | | | | | | | | | | | | | |
|  | <- From: | | | | | | | | | | Strain No.: | | | | | | Date: |
|  | <- From: | | | | | | | | | | Strain No.: | | | | | | Date: |
|  | <- From: | | | | | | | | | | Strain No.: | | | | | | Date: |
| **3. Origin of the strain** | | | | | | | | | | | | | | | | | |
| Source of isolation\*:  Scientific name of the source: | | | | | | | | | | | | | | | | | |
| Locality of the source:  Address:  Country\*:  Latitude / Longitude, if available:  Altitude(m) / Depth(m), if available: | | | | | | | | | | | | | | | | | |
| The strain deposited by\* | | | | | Name:  Organization:  Address:  E-mail: | | | | | | | | | Tel: | | | |
| The source  collected by | | | | | Name:  Organization:  Address:  E-mail: | | | | | | | | | Date of collecting:  Tel: | | | |
| The strain isolated by | | | | | Name:  Organization:  Address:  E-mail: | | | | | | | | | Date of isolation:  Tel: | | | |
| The strain identified by | | | | | Name:  Organization:  Address:  E-mail: | | | | | | | | | Date of identification:  Tel: | | | |
| **4. Conditions stipulated in the article 2.4 of MTA-deposit for utilization of the strain (choose one from 1 to 5)**\* | | | | | | | | | | | | | | | | | |
| (1) | | | The USER may conduct both NON-COMMERCIAL USE and COMMERCIAL USE on the RESOURCES. | | | | | | | | | | | | | | |
| (2) | | | The USER may conduct NON-COMMERCIAL USE on the RESOURCES. When the USER wishes to make COMMERCIAL USE of the RESOURCES, including the applications for intellectual property rights, the USER shall notify the DEPOSITOR in advance. The DEPOSITOR shall not place any restriction on the COMMERCIAL USE. The USER includes an organization or individual that engages in business activities for the purpose of making a financial profit, such as a company or enterprise. | | | | | | | | | | | | | | |
| (3) | | | The USER may conduct NON-COMMERCIAL USE on the RESOURCES. When the USER wishes to make COMMERCIAL USE of the RESOURCES, including the applications for intellectual property rights, the USER shall reach an agreement with the DEPOSITOR before the COMMERCIAL USE takes place. The USER includes an organization or individual that engages in business activities for the purpose of making a financial profit, such as a company or enterprise. | | | | | | | | | | | | | | |
| (4) | | | The USER may only conduct NON-COMMERCIAL USE on the RESOURCES. Applications for intellectual property rights may not be filed. The DEPOSITOR may choose this condition only when COMMERCIAL USE of the BIOLOGICAL MATERIAL to be deposited is prohibited by the laws of the COUNTRY OF ORIGIN, etc. The USER includes an organization or individual that engages in business activities for the purpose of making a financial profit, such as a company or enterprise. | | | | | | | | | | | | | | |
| (5) | | | The USER shall abide by the conditions for utilization specified below by the DEPOSITOR. | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |
| **5. Information related to the Nagoya Protocol** | | | | | | | | | | | | | | | | | |
| Do you have the IRCC No. related to the strain? (as of the date this form is filled out) \*:  Yes IRCC No. 　　　　　　　　　　　　　　　  No | | | | | | | | | | | | | | | | | |
| **6. Recommended conditions for growth and maintenance** | | | | | | | | | | | | | | | | | |
| Medium (attach the formula) \*: | | | | | | | | | | | | | | | | | |
| pH: | | | | | | Temperature: °C - °C | | | | | | | | | | | |
| Interval of transfer: h/d/w | | | | | | | | | Incubation time: h/d/w | | | | | | | | |
| Oxygen relationship:  Aerobic  Microaerobic  Facultative anaerobic  Obligatory anaerobic | | | | | | | | | | | | | | | | | |
| Special requirements (e.g. light, gas phases, etc.) : | | | | | | | | | | | | | | | | | |
| Recommended method for  long-term preservation: | | | | | | | Liquid-drying  Freeze-drying  Freezing ( -80 °C  Liquid N2)  Serial Transfer  Mineral Oil  Other ( ) | | | | | | | | | | |
| Method for propagation  (for Bacteriophages): | | | | | | | Broth  Agar overlay  Other ( ) | | | | | | | | | | |
| **7. Pathogeny**\* | | | | | | | | | | | | | | | | | |
| Is the strain known to be or likely to be pathogenic?:  Yes ( Human  Animal  Plant)  No  Unknown  If **YES**, specify the host organism(s):  Level of biological containment of the strain:  L1  L2 | | | | | | | | | | | | | | | | | |
| **8. Genetic modification** | | | | | | | | | | | | | | | | | |
| Is the strain genetically modified? :  Yes  No  If **YES**, provide the information on the inserted gene(s) and their origin below or in separate sheet    Level of physical containment of the strain:  P1  P2 | | | | | | | | | | | | | | | | | |
| **9. Properties and applications (production, assay, biological indicator, etc.)** | | | | | | | | | | | | | | | | | |
| Special properties and applications of the strain: | | | | | | | | | | | | | | | | | |
| DDBJ/EMBL/GenBank acc. number of genome sequence: | | | | | | | | | | | | | | | | | |
| DDBJ/EMBL/GenBank acc. number of gene sequence:  Name of gene: | | | | | | | | | | | | | | | | | |
| Biosample ID: | | | | | | | | | | Bioproject ID: | | | | | | | |
| Specify the mating type if you know (for Eukarya):  Homothallic  Heterothallic ( ) | | | | | | | | | | | | | | | | | |
| **10. Literatures of the strain** (Attach each reprint, if available) | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | PubMed ID  CiNii ID： | | |
| **11. Patent information** | | | | | | | | | | | | | | | | | |
| The strain has been mentioned in patents: | | | | Yes \*list the countries where the patent was filed.  ( )  No | | | | | | | | | | | | | |
| Patent application number:  Patent publication number:  Patent number: | | | | | | | | | Date of application:  Date of publication:  Date of registration:  Date of issue: | | | | |
| **12. Other information** | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| **13. Time of publication of the strain in the NBRC online catalogue**\*(Choose one) | | | | | | | | | | | | | | | | | |
|  | | Soon after NBRC completes preservation of the strain. | | | | | | | | | | | | | | | |
|  | | When the NBRC number of deposited strain is publicly known. NBRC keeps the information on the strain deposited along with the NBRC number confidential for three (3) years at the most from the date NBRC issues the certificate of deposit. Notwithstanding the foregoing sentence, after confirming that the NBRC number has been publicly known, NBRC publishes the information on the strain along with the NBRC number and makes the strain available for distribution. | | | | | | | | | | | | | | | |
| **14. Reason for this deposit** | | | | | | | | | | | | | | | | | |
| To propose a new taxon  To submit a paper ( )  Others (specify ) | | | | | | | | | | | | | | | | | |
| **15. Contact** (State below if different from the DEPOSITOR) | | | | | | | | | | | | | | | | | |
| Name:  Organization:  Address:  E-mail:  Telephone: | | | | | | | | | | | | | | | | | |
| 日本語でご記入下さい（Residents in Japan only）  氏名:  所属機関:  法人番号:  住所: 〒 | | | | | | | | | | | | | | | | | |
| NBRC® Culture Collection Use Only: | | | | | | | | | | | | | | | | | |
| Keeper: 　　　　　　　　　　 　 Receipt date: 　　　　　　　 Species code:  Medium No.: 　　　　　　　 Temperature: °C - °C Herb. No.:  Restriction code:  Plant quarantine No.: 　　　　　　　　　　 Animal quarantine No.:  List:  Open  Close (until 　　　　　　　　　　　　　　　　　　　　)  Comment: | | | | | | | | | | | | | | | | | |