

VM:CLAS ANIMAL TRANSFER REQUEST SHEET

Use this form to request the Center for Laboratory Animal Science (CLAS) to transfer animals. After completing the form, you may fax it to 754-5667 or phone the order in to 752-1390 during normal business hours*. Before a transfer request can be completed, the request must be approved by the Health Monitoring Coordinator (2-7244 or nmcorley@ucdavis.edu). Please submit request at least 24 hours in advance.

Recharge # _____ Protocol # _____ Protocol Exp. Date _____
(4 character Billing ID or DaFis account/subaccount/project)

Today's Date _____ Infectious? Yes No Protocol Investigator: _____
(If different than Investigator below)

Investigator(s): _____ School and Dept.: _____

Requested by: _____ Email: _____ Phone: _____ Fax: _____

Animal(s) ID or Cage Number: _____ Quantity: _____

Current housing location: _____
(building/area) (room)

Transfer animal(s) to: _____
(building/area) (room)

Date to be transferred: _____ Time animals must arrive by: _____

Terminal Short Term Housing Long Term Housing
(less than 2 months) (more than 2 months)

Please mark on the cage card to identify which animals are to be transferred.

Notes or Special Requirements:
