

InSEAS & The Zoology Aquatic Facility

Change in Aquatic Facility Use Form

Please fill out this form and give it to the *InSEAS* manager (Patrick) if you are requesting new space, changing the amount allocated to you, release space from use, or bringing in new animals to the *InSEAS* facility. This information will be used to assign space, track its use, and ensure animal numbers comply with approved AUPs.

Part A: Investigator Information

Date: _____

Name: _____

Principle Investigator (if different): _____

AUP No.: _____

Email: _____

Phone: _____

You are (please check all appropriate boxes):

- Requesting new space (go to part B)
- Making a change to space allocation (go to part C)
- Changing animal numbers (go to part D)

Part B. Requesting Access to New Aquatic Research Space

Fill in this part if you are request aquatic research space. It is strongly advised that you make your request at least **three months in advance**, but if that is not possible we will do our best to accommodate your request. Fill in as many fields as possible.

Preferred Start Date: _____ Anticipated End Date: _____

What type of space are you requesting (please check the appropriate box)?

- Environment chamber
- Recirculating holding system
- Space to set up static aquaria at room temperature or above
- Other (please describe in the space provided)

If appropriate, are you willing to share this space with other researchers working under similar conditions? Yes No

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The requested space will be used for (please check the appropriate box):

- Animal holding
- Experimentation

If you have selected animal holding and you are requesting a recirculating holding system, please fill in the following environmental conditions. *InSEAS* staff will set up the recirculating system to maintain these conditions.

Salinity (ppt): _____

Temperature (°C): _____

Photoperiod (hr light: hr dark): _____

Other holding conditions? If yes, please specify in the space below.

If you have selected experimentation, or if you are holding animals in isolated aquaria, it is your responsibility to set up the infrastructure, but please discuss your set up with the Facility Manager before starting.

Please provide us with a very brief description of your experiments:

These experiments will use/require (check all that apply):

- Compressed gases
- Sharps
- More than 10 electrical outlets
- Hazardous materials (please specify)

Please outline any other details you think are important for *InSEAS* staff to be aware of:

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Part C. Making a change to space allocation

What is the nature of your change to space allocation (check all that apply)

- Request extension. Give new anticipated completion date: _____
- Terminate use early. Give new completion date: _____
- Modification to holding conditions. Please outline requested changes below.

- Other. Please specify below:

Part D. Change in animal numbers.

If you are bringing new animals into *InSEAS* please provide us with the following information:

Species: _____

Source: _____

Size: _____

Destination in *InSEAS* (room #, tank # etc): _____

Number of individuals: _____

Is the number of animals authorized by your AUP? Yes No

If no, submit an amendment to your AUP before acquiring the animals.

Is any special containment required? Yes No

If yes, please specify.

For Internal Use Only

Space allocated: _____

Notes:

InSEAS Change in Aquatic Facility Use Form – Draft 1

Author: Jeffrey Richards

Approved by:

Date: June 6th, 2013

Approval Date: