FORM FOR PATENT DEPOSIT PURPOSES ONLY!





BUDAPEST TREATY ON THE INTERNATIONAL RECOGNITION OF THE DEPOSIT OF MICROORGANISMS FOR THE PURPOSES OF PATENT PROCEDURE STATEMENT IN THE CASE OF AN ORIGINAL DEPOSIT

pursuant to Rule 6.1

National Centre for Microbial Resource,
National Centre for Cell Science,
Hktu/hqqt.'EgpvtcnVqy gt.'UckVtlpk{''
Dwkf lpi .'I cty ctg'Ekterg.'''Uwcty cf k'Rcuj cp.''
Rwpg.'O cj ctcuj vtc'633243.'Kpf kc''

To be filled in by the Depositary Authority	
NCMR-Accession Number:	
Date culture received:	

BACTERIA / FUNGI1

THE UNDERSIGNED HEREBY DEPOSITS UNDER THE BUDAPEST TREATY THE MICROORGANISM IDENTIFIED HEREUNDER AND UNDERTAKES NOT TO WITHDRAW THE DEPOSIT FOR THE PERIOD SPECIFIED IN RULE 9.1^2

I. IDENTIFICATION OF THE MICROORGANISM	
Identification reference ³	The culture to be deposited is :
	() a pure culture
Taxonomic designation ⁴	() a mixture of microorganisms
II. CONDITIONS FOR CULTIVATION	<u>5</u>
Medium (composition)	pH before sterilisation Sterilisation min at °C pH after sterilisation: The microorganism is: () aerobic () microaerophilic () obligate anaerobic
	Specific requirements (if any): Incubation temperature : °C Incubation time: Short term storage at : °C Interval of transfer:

- The NCMR only accepts for deposit microorganisms which belong to Hazard group 1 and 2.
- This form may also be used if the undersigned converts into a deposit under the Budapest Treaty the deposit of a microorganism that he or his predecessor in title has already deposited, outside the Budapest Treaty, with the same depositary institution either before (Rule 6.4(d) or after the acquisition by that institution of the status of international depositary authority.
- Number, symbols *etc.*, given to the microorganism by the depositor
- It is strongly recommended to indicate the taxonomic designation and/or scientific description (see under VIII) of the microorganism.
- 5. Mark with a cross if additional information is given on an attached sheet.

III. CONDITIONS FOR LONG TERM STORAGE	∟5			
IV. CONDITIONS FOR TESTING VIABILITY	() ⁵			
IV. CONDITIONS FOR TESTING VIABILITY				
V. COMPONENTS OF MIXED CULTURES (WHEN APPLICABLE)) (_) ⁵			
Description of components:				
Method(s) for checking presence of components:				
VI. PROPERTIES DANGEROUS TO HEALTH OR ENVIRONMEN	т (_) ⁵			
() ⁶ The microorganism identified under I above has the following propert	ies which are or may be dangerous to health or the environment:			
THE STRAIN HAS TO BE HANDLED UNDER THE FOLLOWING LABORATORY CONTAINMENT LEVEL:				
()L1 () L2				
IS THIS STRAIN DANGEROUS TO HEALTH OR THE ENVIRONEMN	T? () YES () NO			
If yes, please specify:				
() ⁶ the undersigned is not aware of such properties				
1. The NCMR only accepts for deposit microorganisms which belong to 5. Mark with a cross if additional information is given on an attached she 6 Mark with a cross the applicable box				

Form MCC BP/1 (first page)

† Form MCC BP/1 (second page)

VII. IF THE MICROORGANISM IS GENETICALLY MANIPULATED				
DATA CONCERNING THE HOST ORGANISM Name and strain designation:				
Hazard group () Haz. Gr. 1 () Haz. Gr. 2				
Genetic markers				
2. DATA CONCERNING THE DONOR ORGANISM				
Name and strain designation:				
Hazard group () Haz. Gr. 1 () Haz. Gr. 2 () Haz. Gr. 3				
description of the cloned fragment:				
cloned information:				
size of the cloned DNA: () complete genome () cDNA (in bp) () subgenomic () synthet	ic			
(iii op) () subgenome () symmet () subgenic () subgenic () subgenic				
(_) pathogenic (_) tumori; (_) toxigenic (_) allerge				
() no potential risk	inc			
3. DATA CONCERNING THE VECTOR				
Designation :				
Derivative of :				
Host specificity:				
Resistance marker(s):				
plasmid size (in bp): without insert with insert				
promoter(s):				
mobilisable plasmid: (_) yes (_) no				
own transfer system () yes () no transfer by endogenous helper viruses: () yes () no				
DATA CONCERNING THE GENETICALLY MANIPULATED ORGANISM				
Special properties				
foreign DNA: ()chromosomally integrated ()	enisomal			
	umorigenic			
	allergenic			
please indicate why:				
A certificate from Institutional Biological Safety Committee to carry out the work needs to accompany the deposit.				
Mark with a cross if additional information is given on an attached sheet				

[‡] Form MCC BP/1 (third page)

VIII. SCIENTIFIC DESCRIPTION AN/OR PRO	POSED TAXONOMIC DESIGNATION ⁷	(_) ⁵
Scientific description		
Proposed taxonomic designation		
IV ADDITIONAL DATAS	()9	
IX. ADDITIONAL DATA ⁸	(_)°	
X. FATE OF THE CULTURE AFTER THE PRE	SCRIBED DURATION OF STORAGE 10	
a) The culture is to be transferred into the publicly av	railable collection of the NCMR () yes	() no
b) The culture is to be handed back to the depositor a	gainst a fee () yes	() no
c) the culture is to be destroyed by the NCMR	() yes	() no
XI. DEPOSITOR ¹¹		
Name"qh'\j g'uki pkpi 'r gtuqp:	Signatu	re:
	Vj g'uki pkpi 'r gtu	

·	""+"Qp"dgj cıfı'qh	ˈrgi cnˈgpvkv{
Address:	""""""""""""""""""""""""""""""""""""""	gr qukqt*u+"***********************************
	-	
Phone:	Date:	
Fax:	_	
e-mail:	_	

- Mark with a cross if additional information is given on an attached sheet It is strongly recommended that the scientific description and/or proposed taxonomic designation of the microorganism be indicated.

If desired name and address of the inventor(s) might be recorded here.

- Mark with a cross if additional information (other than the information referred to in footnote 5 is given on an attached sheet, such as the source of the microorganism, the name(s) and the address(es) of any other depositary institution(s) with which the microorganism has been deposited, or the criterion used when drafting the proposed taxonomic designation (The supplying of such information is
- The culture is to be stored for a period of at least five years after the most recent request for the furnishing of a sample of the deposited organism and, in any case, for at least 30 years after the date of deposit (Rule 9.1). The above regulation is valid till there will be binding jurisdiction.
- Where the signature is required on behalf of a legal entity, the typewritten name(s) of the natural person(s) signing on behalf of the legal entity should accompany the signature(s).

Form MCC BP/1 (fourth and last page)