

BBM reserved area

## STORAGE REQUEST FORM

### SECTION A – Reserved to customers

#### CUSTOMERS DETAILS

COMPANY/ORGANIZATION \_\_\_\_\_

DEPARTMENT / AREA / LABORATORY / REFERENCE CENTER \_\_\_\_\_

Surname \_\_\_\_\_ Name \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

#### BIOLOGICAL RESOURCE ORIGIN

Identification number \_\_\_\_\_ Business Code \_\_\_\_\_ Years \_\_\_\_\_

Country \_\_\_\_\_ State \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_

Routine activities  NOTE \_\_\_\_\_

Public/Private Sectors  NOTE \_\_\_\_\_

Corporate  NOTE \_\_\_\_\_

#### BIOLOGICAL RESOURCE IDENTIFICATION

BIOLOGICAL RESOURCE TYPE \_\_\_\_\_ BIOHAZARD 

N/A	1	2	3
-----	---	---	---

Taxonomy: Order \_\_\_\_\_

Family \_\_\_\_\_ Subfamily/Genus \_\_\_\_\_

Species \_\_\_\_\_ Strain \_\_\_\_\_

Taxonomy origin species /biological resource host \_\_\_\_\_

Sample \_\_\_\_\_

Identification method \_\_\_\_\_ Date \_\_\_\_\_

#### BIOLOGICAL RESOURCE STORAGE REQUEST

Quality control performed \_\_\_\_\_

Date \_\_\_\_\_

Frequency Stability control \_\_\_\_\_ Date \_\_\_\_\_ Storage time \_\_\_\_\_

Vials number: \_\_\_\_\_ (Master: original vials not transferable) Vials number: \_\_\_\_\_ (Working: vials derived from the original and transferable)

Batch number \_\_\_\_\_ Quantity/Vial \_\_\_\_\_ µl Concentration/Titre \_\_\_\_\_

Date \_\_\_\_\_ Transport Temperature \_\_\_\_\_ °C

Storage request temperature 4°C ± 2  ; -20°C ± 3  ; -80°C ± 5  ; -196°C ± 5

Attachment:

1. Safety Data Sheet
2. Recovery Sheet
3. Certificate of Analysis containing product identification, qualitative and quantitative traits, analytical method used
4. Dangerous Goods Declaration

\_\_\_\_\_  
Date

\_\_\_\_\_  
Customer

I hereby authorize the use of my personal data in accordance to the GDPR 679/16 - "European regulation on the protection of personal data".

\_\_\_\_\_  
Date

\_\_\_\_\_  
Customer

---

**SECTION B – Reserved to BBM**

We agree to the storage request  
You will receive nr. \_\_\_\_ labels

We do not agree to the storage request  
Denial reasons \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
RBBM Signature

Delivery temperature of biological resource \_\_\_\_\_°C Thermocouple N. Rg. A

\_\_\_\_\_  
Date

\_\_\_\_\_  
BBM staff Signature