



Agharkar Research Institute, Pune, INDIA MACS Collection of Microorganisms (MCM), WDCM 561

A Distinguished Repository of Anaerobes & Extremophiles

Form for Identification of Archaea, Bacteria or Anaerobic Fungi by rRNA gene Sequencing

| 1. | 1. User's Information | | | | | | | | |
|---|--------------------------------------|-----------------------------|----------------|--------------------------|--------------------|--|--|--|--|
| а | a. Name & Designation of User | | | | | | | | |
| b | b. Department / Division | | | | | | | | |
| C | c. Name of Organization | | | | | | | | |
| d | d. Is it Academic or Non-academic? | | | | | | | | |
| е | e. Official Postal Address (with PIN | | | | | | | | |
| | Code) | | | | | | | | |
| | | | | | | | | | |
| f. Email Address for Communication | | | | | | | | | |
| g | g. Contact Phone Number | | | | | | | | |
| 2. | Details of Material Se | nt | | | | | | | |
| Sr. | Strain No. | Type of Organism (Archaea / | | Sequencing Service Type* | SRN | | | | |
| No. | | Bacteria/ Ana | aerobic Fungi) | Sequencing Service Type | (For MCM Use Only) | | | | |
| 1. | | | | | | | | | |
| 2. | | | | | | | | | |
| 3. | | | | | | | | | |
| 4. | | | | | | | | | |
| 5. | | | | | | | | | |
| 6. | | | | | | | | | |
| 7. | | | | | | | | | |
| 8. | | | | | | | | | |
| 9. | | | | | | | | | |
| 10. | | | | | | | | | |
| *Check the usability of partial sequencing (ARI Service no. 2.22) and full-length sequencing (ARI Service no. 2.31) for your purpose. | | | | | | | | | |
| No requests for a change of service type will be considered. For Phylogenetic analysis (ARI Service No. 2.33), user can club taxa with | | | | | | | | | |
| same genus designation into a single tree. Each phylogenetic tree will be considered a separate service and charged accordingly. 3. Payment Information | | | | | | | | | |
| э. а | | | | | | | | | |
| b | - | | | | | | | | |
| с. | | for Payment | | | | | | | |
| C. | | | | | | | | | |





| 4. Billing Information | | | | |
|-----------------------------------|--|--|--|--|
| a. Name & Designation | | | | |
| b. Address (with PIN Code) | | | | |
| c. GST Number | | | | |

Declaration by the User

(Mandatory) I acknowledge and agree that the material sent for the analysis is non-pathogenic and the microorganisms belong to biosafety level 1 or 2 category only. I further acknowledge and agree that the requested analysis is purely for research and non-commercial activity, and the results reported by MCM for these analyses will be used for such purposes only.

Organization Seal

Date & Signature of the User/ Authorized Signatory

| For MCM Use Only | | | | | |
|--------------------|--------------------|--|--|--|--|
| Processing Details | | | | | |
| Date Received on | Ack. Sent on | | | | |
| Processed on | Processed by | | | | |
| Sent for Seq. on | Sequences Revd. On | | | | |
| Report sent on | Dispatched by | | | | |
| Remarks, if any: | | | | | |
| | | | | | |
| | | | | | |