

**At least three weeks before the planned import:** [caf.eac@unibe.ch](mailto:caf.eac@unibe.ch)

|  |                        |  |     |  |                          |               |  |                          |                             |  |                      |  |                          |    |  |                          |
|--|------------------------|--|-----|--|--------------------------|---------------|--|--------------------------|-----------------------------|--|----------------------|--|--------------------------|----|--|--------------------------|
|  | Owner:                 |  |     |  |                          |               |  |                          |                             |  |                      |  |                          |    |  |                          |
|  | Name, First Name:      |  |     |  |                          | User-No.      |  |                          |                             |  |                      |  |                          |    |  |                          |
|  | Responsible            |  |     |  |                          |               |  |                          |                             |  |                      |  |                          |    |  |                          |
|  | Name, First Name:      |  |     |  |                          |               |  |                          |                             |  |                      |  |                          |    |  |                          |
|  | E-Mail                 |  |     |  |                          | Tel.          |  |                          |                             |  |                      |  |                          |    |  |                          |
|  | Animal license number: |  |     |  |                          | Bsp. BE 40/13 |  |                          |                             |  | License valid until: |  |                          |    |  |                          |
|  | BSL-2                  |  | Yes |  | <input type="checkbox"/> | No            |  | <input type="checkbox"/> | Use of radioactive nuclides |  | Yes                  |  | <input type="checkbox"/> | No |  | <input type="checkbox"/> |

|  |                                                     |                   |                                               |
|--|-----------------------------------------------------|-------------------|-----------------------------------------------|
|  | Origin information, destination and date of arrival |                   |                                               |
|  | Origin                                              |                   |                                               |
|  | Address breeder                                     |                   |                                               |
|  | Destination                                         | Building and room | <div>Date arrival</div> <div>Stay until</div> |

[illegible]

Health reports for the past 18 months

Description of the facility (type of housing, import regulations, senility system etc.) in the case of non-commercial housing

## Datasheet for GMOs

1111

Remarks