**deposit FORM FOR the public collection**

|  |  |
| --- | --- |
| *Depositors of strains are requested to contact the BCCMTM/ULC collection before sending a strain. BCCMTM/ULC accepts cyanobacterial cultures. A printed and signed version of this form must be sent together with the strain.* | **BCCMTM/ULC use:**ULC number:      Date received:       |

**1. Strain designations**

Scientific name of organism:

(Proposed) type strain: [ ]  Yes [ ]  No Depositor's strain label:

Location and reference of herbarium specimen (herbarium acronym and number):

Materiel supplied: [ ]  Living culture [ ]  Other, please specify:

Is the strain: [ ]  Axenic [ ]  Unicyanobacterial [ ]  Crude material

Treatments applied during isolation/purification (antibiotics, UV irradiation, etc.):

Accession number in other collections:

GENBANK/EMBL accession number:

**2. Origin of the strain**

Geographical area of sampling: Country:

 Locality (GPS):

Source of isolation:

Collected by:       Date of collecting:

Isolated by:       Date of isolation:

Identified by:

Identification based on: [ ]  Morphology [ ]  Ecology/Physiology [ ]  DNA sequencing

*If you did not isolate this strain, please indicate from whom you received the strain, as well as its former history:*

🡐 *from:* *date:*

🡐 *from:* *date:*

**3. Information related to the application of the Nagoya Protocol (NP) under the Convention on Biological Diversity (CBD):** <https://www.cbd.int/abs/>**. This protocol implements the Access and Benefit Sharing (ABS) principle and requires recording some basic information listed below.**

1. Is the material obtained in compliance with the national regulations of the country of origin? [ ]  Yes [ ]  No
2. Was a sampling agreement, Prior informed consent (PIC) or International Recognized Certificate of Compliance (IRCC), or Mutually Agreed Terms on the use of the samples (MAT) issued by the national competent authority: [ ]  Yes [ ]  No

If YES

Name and address of the person or organization who issued the sampling permit / PIC / IRCC / MAT:

Please attach a copy of the sampling permit / PIC / IRCC / MAT

If NO

[ ]  country of origin does not require a PIC or sampling agreement

**[ ]**  information regarding the country of origin’s regulation or contact point not available on ABS Clearing House <https://absch.cbd.int/countries>

[ ]  samples collected in the context of an emergency situation; regulation in process or programmed

[ ]  samples collected outside national jurisdiction (deep sea, international waters, Antarctica…)

[ ]  other reason, please specify:

**4. Recommended conditions for growth and maintenance**

Medium *(provide composition or reference)*:

Temperature °C:       Light conditions (intensity, light/dark cycle):

Special requirements:

**5. Preservation methods applicable**

Periodic subculturing: [ ]  Yes [ ]  No [ ]  Unknown

Cryopreservation in liquid nitrogen [ ]  Yes [ ]  No [ ]  Unknown

Cryopreservation -80°C: [ ]  Yes [ ]  No [ ]  Unknown

Other, please specify:

Recommended conditions (cryoprotectant and concentration):

**6. Strain properties**

Cell dimensions:

Motility:

Complementary chromatic adaptation:

Heterotrophy (chemo-, photo-):

N2-fixation (aerobic), anaerobic):

Salt tolerance:

GC content:

Other information:

**7. Toxin production**

Neurotoxin: [ ]  Yes\* [ ]  No [ ]  Unknown

Hepatotoxin: [ ]  Yes\* [ ]  No [ ]  Unknown

Other toxins:

\* If yes, please give details or references:

**8. Mutant or GMO status**

Name and strain number of parent:       Author and date:

Other information:

**9. The strain has been patented**

[ ]  No [ ]  Yes, patent reference:

**10. Special features and applications**

**11. Agreement for deposit in the public collection**

First name:       Family name:

Institute/Company:

Department:

Address:

Postal Code:       City:       Country:

Tel.:       Email:

***I agree to deposit this biological material in the public BCCM™/ULC Cyanobacteria Collection following the conditions from the BCCM™ Material Deposit Agreement (MDA:*** <http://bccm.belspo.be/services/mda>***).***

***I confirm that all information is correct and trustworthy.***

***I authorize BCCM to catalogue all data in this Deposit Form online and to distribute samples to third parties under the general conditions of the BCCM Material Transfer Agreement (MTA:*** <http://bccm.belspo.be/services/mta>***) and any other conditions if applicable.***

***I agree that my personal data processed in the framework of this deposit will be handled in conformity with the personal data protection statement of the BCCM-consortium (***<http://bccm.belspo.be/legal/disclaimer>***).***

[ ]  ***I ask a delayed publication in the online catalogue to enable acceptance of a manuscript or redaction of thesis and will inform BCCMTM/ULC when this is done. Alternatively, if BCCMTM/ULC does not get any further information, the strain will become publically available 1 year after the last contact.***

Date:       Signature of depositor: