|  |  |  |  |
| --- | --- | --- | --- |
| For Wageningen Bioveterinary Research use only | | | |
| Unpack | Registration | Control registration | Requestnumber |
|  |  |  |  |

**Order form other species**

Please fill in the form as complete as possible.

**Contractor:**

|  |  |
| --- | --- |
| Client number1 |  |
| Name\* |  |
| Address\* |  |
| Postal code\* |  |
| City\* |  |
| Country\* |  |
| VAT number |  |
| E-mail address |  |

**Owner:**

|  |  |
| --- | --- |
| Name\* |  |
| Address\* |  |
| Postal code\* |  |
| City\* |  |
| Country\* |  |
| E-mail address |  |
| Client number |  |

|  |
| --- |
|  |

**Species\*:**      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_     \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
**Your reference:**Your reference will be listed at the report and the invoice

**Reason for submission\*:** Export/import  
ScreeningBreedingEarly warningOther, i.e.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Report to:** | |  |
|  | Contractor (always) | |  |
|  | Extra report to: | |  |
|  | Client number1 |  |  |
|  | Name |  |  |
|  | Address |  |  |
|  | Postal code |  |  |
|  | City |  |  |
|  | E-mail address |  |  |
|  | **Report in English instead of Dutch** | |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Invoice to:** (Unless indicated below the contractor will receive the invoice and therefore the contractor is responsible for the correct billing) | | |  |
|  | **Contractor** | | |  |
|  | **Owner** | Agreed by owner |  |  |
|  | Client number1 |  | |  |
|  | VAT number: |  | |  |
|  | Date: |  | |  |
|  | Signature owner: |  | |  |
|  | **Other**: | | |  |
|  | Client number1,2 |  | |  |
|  | Name2 |  | |  |
|  | Address2 |  | |  |
|  | Postal code2 |  | |  |
|  | City2 |  | |  |
|  | E-mail address2 |  | |  |
|  | Date2: |  | |  |
|  | Signature2: |  | |  |
|  |  | | |  |

**Remark:**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Export country** |  | | | | | | | |
|  |  |  |  |  |  | | | |
| **Export date** |  | - |  | - |  | | | |
|  | dd |  | mm |  | yyyy | | | |
| Sampling date |  | - |  | - |  | | | |
|  | dd |  | mm |  | yyyy | | | |
| Sampling time |  | : |  |  |  |  |  |  |
|  | hr |  | min |  |  |  |  |  |

**Contractor**(By signing this submission form you agree with [The Conditions of Acceptance of Wageningen Bioveterinary Research and The General Conditions of Wageningen University & Research](http://www.wur.nl/nl/show/Acceptatiebeleid-WBVR-en-Alg-voorwaarden-WUR-.htm))

|  |  |
| --- | --- |
| Name: |  |
| Date: |  |
| Signature: |  |

**Sample submission form**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Please select one or more sample types by ticking the boxes\*: | | | | | | | |
|  | Blood (serum) |  | Blood (heparine/EDTA) |  | Organ |  | Swab       (number) pieces |
|  | Faeces |  | Sperm |  | Other, i.e.: |  | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Art. no. | Description of test |  | Art. no. | Description of test |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
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|  |  |  |  |  |  |
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**Pleas fill in requested serology test:***Please refer to WBVR price list on the website*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Sample identification |  | Sample identification |  | Sample identification |
| 1 |  | 6 |  | 11 |  |
| 2 |  | 7 |  | 12 |  |
| 3 |  | 8 |  | 13 |  |
| 4 |  | 9 |  | 14 |  |
| 5 |  | 10 |  | 15 |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Art. no. | Description of test |  | Art. no. | Description of test |
|  |  |  |  |  |  |
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**Pleas fill in requested non-serology test:***Please refer to WBVR price list on the website*

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Sample identification | |  | Sample identification | |  | Sample identification |
| 1 |  | | 6 |  | | 11 |  |
| 2 |  | | 7 |  | | 12 |  |
| 3 |  | | 8 |  | | 13 |  |
| 4 |  | | 9 |  | | 14 |  |
| 5 |  | | 10 |  | | 15 |  |
| Date \* | |  | | | Signature \*: |  | |