



**IDENTIFICATION OF BACTERIA, ARCHAEA,
FUNGI, and YEASTS**

more details on our [website](#)

**PLEASE NOTE: THE DSMZ ONLY ACCEPTS ORGANISMS UP TO RISK GROUP
2 (German National Regulations)**

To be completed by the DSMZ:

Strain 1	Id no.
Strain 2	Id no.
Strain 3	Id no.
Strain 4	Id no.

CUSTOMER SPECIFIC INFORMATION

SENDER OF THE CULTURE

Name/Company/Organization: _____

Phone: _____

Address: _____

Fax: _____

E-Mail: _____

INVOICE ADDRESS

Name/Company/Organization: _____

VAT No.: _____

Address: _____

STRAIN DATA

No.	DESIGNATION OF THE ISOLATE:	SOURCE OF THE ISOLATE:
Strain 1	_____	_____
Strain 2	_____	_____
Strain 3	_____	_____
Strain 4	_____	_____

Cultures will be retained for a reasonable length of time after which they will be destroyed*

CULTIVATION OF THE STRAIN(S)

	Strain 1	Strain 2	Strain 3	Strain 4
Medium	_____	_____	_____	_____
Incubation temperature	_____ °C	_____ °C	_____ °C	_____ °C
Incubation time	_____	_____	_____	_____
Oxygen relationships	<input type="checkbox"/> aerobic <input type="checkbox"/> microaerophilic <input type="checkbox"/> obligate anaerobic	<input type="checkbox"/> aerobic <input type="checkbox"/> microaerophilic <input type="checkbox"/> obligate anaerobic	<input type="checkbox"/> aerobic <input type="checkbox"/> microaerophilic <input type="checkbox"/> obligate anaerobic	<input type="checkbox"/> aerobic <input type="checkbox"/> microaerophilic <input type="checkbox"/> obligate anaerobic
Risk Group of the strain known? If yes	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> RG 1 <input type="checkbox"/> RG2	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> RG 1 <input type="checkbox"/> RG2	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> RG 1 <input type="checkbox"/> RG2	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> RG 1 <input type="checkbox"/> RG2

* The appropriate forms, information and prices for Safe Deposit, Patent Deposit and Deposit in publicly accessible collection may be obtained from the DSMZ website <http://www.dsmz.de>

FORM FOR IDENTIFICATION



SPECIAL IDENTIFICATION PROCEDURES (please select)

Services and techniques for Bacteria and Archaea ([price list](#))

	Strain 1	Strain 2	Strain 3	Strain 4
General identification of bacteria	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Phenotypic characterization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Production of biomass for the special procedures (**)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Analysis of the cellular fatty acid composition *	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Analysis of respiratory quinones (*/**)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Analysis of polar lipids (*/**)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Analysis of mycolic acids *	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Analysis of DAP (2,6-diaminopimelic acid)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Analysis of peptidoglycan structure (*/**)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Analysis of cell wall sugars	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DNA base composition by HPLC (**)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DNA - DNA hybridization (see table underneath / **)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ribotyping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MALDI-TOF	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Partial 16S rDNA sequence analysis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Complete 16S rDNA sequence analysis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Full phylogenetic study by complete 16s rDNA sequence analysis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Antibiotic susceptibility testing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Services for Fungi and Yeasts

Identification using partial rDNA sequencing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Identification of fungi using morphological characters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Identification of yeasts using morphological characters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Identification and complete phylogenetic analysis of yeasts and related fungi	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please specify pairings for DNA - DNA hybridization:

	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

* see page 3

** either provide the required amount of biomass or order "production of biomass" from the list above.



Additional information

Due to the complexity of the chemical composition of prokaryotes it is essential that you provide us with additional information on the taxonomic position of your strain(s). The nearest cultivated BLAST neighbour or taxonomic group based on the 16S rRNA gene sequence is (please give the name, the percent similarity and number of base pairs used).

Where work has been carried out on cell material or strains supplied by the customer, DSMZ makes no guarantee concerning the authenticity of the material/strain supplied.

Additional information:

Date

Signature:

Please fill out the details on the screen, print it out, sign it, and send to the DSMZ.
