

**FOR PATENT DEPOSIT PURPOSES ONLY!**  
**Not for safe deposit or public deposit!**

**BUDAPEST TREATY ON THE INTERNATIONAL RECOGNITION  
OF THE DEPOSIT OF MICROORGANISMS  
FOR THE PURPOSES OF PATENT PROCEDURE**



STATEMENT IN THE CASE OF AN ORIGINAL DEPOSIT  
pursuant to Rule 6.1

To  
LEIBNIZ-INSTITUT DSMZ-DEUTSCHE SAMMLUNG  
VON MIKROORGANISMEN UND ZELLKULTUREN GmbH  
Inhoffenstr. 7 B  
D-38124 Braunschweig  
GERMANY

*To be filled in by the Depositary Authority:*  
DSMZ-Accession Number:  
Date culture received:

**ANIMAL AND HUMAN CELL CULTURES<sup>1</sup>**

THE UNDERSIGNED HEREBY DEPOSITS UNDER THE [BUDAPEST TREATY](#) THE CELL CULTURE IDENTIFIED HEREUNDER AND UNDERTAKES NOT TO WITHDRAW THE DEPOSIT FOR THE PERIOD SPECIFIED IN RULE 9.1. THE DSMZ DOES NOT PROPAGATE CELL CULTURES.

I. IDENTIFICATION OF THE CELL CULTURE	
Identification reference <sup>3</sup> , name of cell line:	
Species of origin:	
Hybridoma:	
II. CONDITIONS FOR CULTIVATION ( ) <sup>4</sup>	
Please indicate all necessary conditions including type and % of serum, temperature, gaseous phase, optimal split ratio, etc.:	
Have, until now, any additional supplements (including antibiotics) been used? If so, give concentrations:	

<sup>1</sup> The DSMZ only accepts for deposit microorganisms which belong to risk group 1 or 2 according to [EU Council Directive 2000/54](#) on the protection of workers from risks related to exposure to biological agents at work and can be classified as S1 or S2 organisms according to the [German Law Regulating Genetic Engineering](#) or Class 1 or 2 according to [Directive 2009/41/EC](#) of the European Parliament and of the council on the contained use of genetically modified microorganisms respectively.

<sup>2</sup> This form may also be used if the undersigned converts into a deposit under the [BUDAPEST TREATY](#) the deposit of an organism that he or his predecessor in title has already deposited, outside the Budapest Treaty, with the same depositary institution either before (Rule 6.4(d)) or after the acquisition by that institution of the status of *International Depositary Authority*.

<sup>3</sup> Number, symbols etc., given to the organism by the depositor.

<sup>4</sup> Mark with a cross if additional information is given on an attached sheet.

<b>III. CONDITIONS FOR LONG TERM STORAGE</b>				( ) <sup>4</sup>
<p>Composition of medium:</p>   <p>Cell concentration:</p> <p>Other recommendations:</p>				
<b>IV. KNOWN CONTAMINATION AND PATHOGENICITY</b>				( ) <sup>4</sup>
Mycoplasma:	Yes ( )	No ( )	Unknown ( )	
Viruses:	Herpes	Yes ( )	No ( )	Unknown ( )
	Hepatitis B	Yes ( )	No ( )	Unknown ( )
	Hepatitis C	Yes ( )	No ( )	Unknown ( )
	HIV	Yes ( )	No ( )	Unknown ( )
Other contaminants:	Yes ( )	No ( )	Unknown ( )	
If yes, please specify:				
Is the material pathogenic to man or animals:	Yes ( )	No ( )	Unknown ( )	
If yes, please specify:				
	( ) pathogenic		( ) allergenic	
	( ) toxigenic		( ) tumorigenic	
RISK GROUP of the culture <sup>5</sup> :		( ) risk group 1	( ) risk group 2	
CLASSIFICATION in case the culture is genetically engineered <sup>5</sup> :		( ) Class 1/S1	( ) Class 2/S2	
THE CELL LINE HAS TO BE HANDLED UNDER LABORATORY CONTAINMENT LEVEL <sup>5</sup> :				
	( ) L1	( ) L2		

<sup>4</sup> Mark with a cross if additional information is given on an attached sheet.

<sup>5</sup> see 1

<b>V. IF THE CELL CULTURE IS GENETICALLY MANIPULATED</b>	( ) <sup>4</sup>
Complete answers to be given!	
<b>1. DATA CONCERNING THE HOST ORGANISM</b>	
designation:	
risk group <sup>5</sup> :	<input type="checkbox"/> risk group 1 <input type="checkbox"/> risk group 2
sensitivities: resistances:	
special properties:	
<b>2. DATA CONCERNING THE DONOR ORGANISM</b>	
designation:	
risk group <sup>5</sup> :	<input type="checkbox"/> risk group 1 <input type="checkbox"/> risk group 2 <input type="checkbox"/> risk group 3
description of the <b>cloned DNA fragment</b> : cloned information:	
size of the cloned DNA (in bp):	
<input type="checkbox"/> complete genome <input type="checkbox"/> cDNA <input type="checkbox"/> subgenomic <input type="checkbox"/> synthetic <input type="checkbox"/> subgenic	
potential risk of the DNA:	
<input type="checkbox"/> no potential risk	<input type="checkbox"/> pathogenic <input type="checkbox"/> tumorigenic <input type="checkbox"/> toxigenic <input type="checkbox"/> allergenic
<b>3. DATA CONCERNING THE VECTOR</b>	
designation:	
derivative of:	
host specificity:	
resistances:	
plasmid/virus size (incl. insert):	
promoters:	
additional reading frames:	
own infectiosity: <input type="checkbox"/> yes <input type="checkbox"/> no mobilisable plasmid: <input type="checkbox"/> yes <input type="checkbox"/> no own transfer system: <input type="checkbox"/> yes <input type="checkbox"/> no transfer by endogenous helper viruses: <input type="checkbox"/> yes <input type="checkbox"/> no	
<b>4. DATA CONCERNING THE GENETICALLY MANIPULATED ORGANISM<sup>5</sup></b>	
special properties: (e.g. production of ...; use as ...-vector etc.)	
foreign DNA:	<input type="checkbox"/> episomal <input type="checkbox"/> chromosomally integrated
potential risk:	<input type="checkbox"/> pathogenic <input type="checkbox"/> tumorigenic <input type="checkbox"/> toxigenic <input type="checkbox"/> allergenic
<input type="checkbox"/> no potential risk <b>please indicate why:</b>	
<b>According to the regulations of the <a href="#">German Law Regulating Genetic Engineering</a> the DSMZ can only accept genetically manipulated, potentially pathogenic organisms for deposition when a copy of the permit issued by the competent authority (or by an equivalent national biological safety commission) for work on the organisms accompanies the deposition form.</b>	

<sup>4</sup> Mark with a cross if additional information is given on an attached sheet.

<sup>5</sup> see 1

VI. SCIENTIFIC DESCRIPTION <sup>6</sup>	( ) <sup>4</sup>
VII. ADDITIONAL DATA <sup>7</sup>	( ) <sup>8</sup>
VIII. FATE OF THE CULTURE AFTER THE PRESCRIBED DURATION OF STORAGE <sup>9</sup>	
a) The culture is to be transferred into the publicly available collection of the DSMZ	( ) yes                      ( ) no
b) The culture is to be handed back to the depositor against a fee	( ) yes                      ( ) no
c) The culture is to be destroyed by the DSMZ	( ) yes                      ( ) no
IX. DEPOSITOR <sup>10</sup>	
Institution/ legal entity:	
Name of signing person(s) (typewritten):	
The signing person(s) deposit(s):	( ) on behalf of the legal entity ( ) as private depositor(s)
Address:	<b>Signature(s):</b>
Phone:	
Fax:	
E-Mail:	Date:

<sup>4</sup> Mark with a cross if additional information is given on an attached sheet.

<sup>6</sup> It is strongly recommended to indicate the scientific description (and/or proposed taxonomic designation) (see 1.) of the organism.

<sup>7</sup> If desired name and address of the inventor(s) might be recorded here.

<sup>8</sup> Mark with a cross if additional information is given on an attached sheet, such as the source of the organism, the name(s) and the address(es) of any other depositary institution(s) with which the organism has been deposited. (The supplying of such information is optional).

<sup>9</sup> The culture is to be stored for a period of at least five years after the most recent request for the furnishing of a sample of the deposited organism and, in any case, for at least 30 years after the date of deposit (Rule 9.1 of the [BUDAPEST TREATY](#)). The above regulation is valid till there will be binding jurisdiction.

<sup>10</sup> This Deposition Form is the contract between the depositary and the depositor. Therefore it must be signed by the depositor. In case of a legal entity the signatures of two representatives, officially nominated by this entity, is recommended. Unless otherwise agreed, the undersigned is the correspondent of the DSMZ. Indication of the e-mail address helps to accelerate communication.