

**MICROBIOLOGICAL, BIOCHEMICAL AND  
 BIOINFORMATIC ANALYSES**

more details on our [website](#)

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

**CUSTOMER SPECIFIC INFORMATION**

**SENDER OF THE CULTURE**

Name/Company/Organization:

Phone:

Address:

Fax:

E-Mail:

**INVOICE ADDRESS**

Name/Company/Organization: Address:

VAT No.:

**STRAIN DATA**

No.	DESIGNATION OF THE ISOLATE:	SOURCE OF THE ISOLATE	ID number (to be completed by the DSMZ)
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
<b>Medium</b>				
<b>Incubation temperature</b>	°C	°C	°C	°C
<b>Incubation time</b>				
<b>Oxygen relationships</b>	aerobic microaerophilic obligate anaerobic	aerobic microaerophilic obligate anaerobic	aerobic microaerophilic obligate anaerobic	aerobic microaerophilic obligate anaerobic
<b>Risk Group of the strain known? If yes</b>	No Yes RG 1 RG 2 Pest of Plants (EU) 2021/2285	No Yes RG 1 RG 2 Pest of Plants (EU) 2021/2285	No Yes RG 1 RG 2 Pest of Plants (EU) 2021/2285	No Yes RG 1 RG 2 Pest of Plants (EU) 2021/2285
<b>GMO</b>	No Yes	No Yes	No Yes	No Yes

\* 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>



Leibniz-Institut DSMZ-Deutsche Sammlung von Mikroorganismen und Zellkulturen GmbH Services  
 Inhoffenstraße 7 B  
 38124 Braunschweig GERMANY  
 E-mail: [identification@dsmz.de](mailto:identification@dsmz.de)

**SPECIAL IDENTIFICATION PROCEDURES** (please select)

Services and techniques for Bacteria and Archaea Please see page 3 for additional information requested	Strain 1	Strain 2	Strain 3	Strain 4
<a href="#">Production of biomass for special procedures/Quantified aliquots of strains</a> (*)				
<a href="#">Phenotypic characterization of bacteria</a> (*)				
<a href="#">Analysis of the cellular fatty acids (MIDI/GC-MS)</a> (**)				
<a href="#">Fatty acid fingerprint (MIDI)</a> (**)				
<a href="#">Analysis of respiratory quinones</a> (**)				
<a href="#">Analysis of polar lipids</a> (**)				
<a href="#">Analysis of mycolic acids</a> (**)				
<a href="#">Analysis of whole-cell sugars</a> (**)				
<a href="#">Analysis of peptidoglycan structure</a> (*/**)				
<a href="#">Analysis of Dpm isomers</a> (**)				
<a href="#">Analysis of metabolic activities</a>				
<a href="#">MALDI-TOF</a>				
<a href="#">Antibiotic susceptibility testing</a>				
<a href="#">Mock Communities</a> (*)				
<a href="#">Partial 16S rDNA sequence analysis</a> (**)				
<a href="#">Complete 16S rDNA sequence analysis</a> (**)				
<a href="#">Full phylogenetic study by complete 16s rDNA sequence analysis</a> (**)				
<a href="#">Bacterial phylogenomic study including whole genome sequencing</a> (*)				
<a href="#">Molecular Identity Check</a> (*)				
<a href="#">Microbial diversity analysis</a> (*)				
Other analyses (*)				

Services for Fungi and Yeasts

<a href="#">Identification using partial rRNA sequencing</a>				
<a href="#">Full phylogenetic analysis of fungi and yeasts</a> (*)				
<a href="#">Phenotypic characterization of yeasts</a> (*)				

\* please contact us before ordering customized services for individual pricing

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

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### 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:

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**Date:**

Please fill out the details on the screen, print it out, sign it, and send to the DSMZ. Please send an electronic copy to [identification@dsmz.de](mailto:identification@dsmz.de)

**Signature:**