

DISEASE FREE SMALL ANIMAL HOUSE COLLEGE OF VETERINARY SCIENCES,

LALA LAJPAT RAI UNIVERSTIY OF VETERINARY AND **ANIMAL SCIENCIES, HISAR 125004**



Animal Requisition Form Phone: 01662- 256116 e mail: dfsah@luvas.edu.in

1.	Name of the Investigator	:
2.	Designation	:
3.	Department	:
4.	Institution/Company Name	:
5.	Phone/Mobile	:
6.	Email ID	:
7.	CPCSEA Registration No.	:
8.	Name of Person Who is	:
	Authorized to pick animals	

& Vehicle No.

Sr.	Species	Strain	No. of Animals		Weight/Age	Date	IAEC Protocol
No.			Required			Required	No.
			Male	Female			(Mandatory)
1.	Mice	Swiss					
		Albino					
2.	Rats	Wistar					
3.	Guinea	Duncan					
	Pigs	Hartley					
4.	Rabbits	New					
		Zealand					
		White					
5.	Hamsters	Golden					
		Syrian					

Syrian **Payment Details:** DD/Cheque No._____dated_____for Rupees_____ ____or Cash for Rupess_____ Bank Signature of Investigator Signature of HOD/Institution with official Seal Date: Date: Place: Place: Note: 1. With this requisition letter carry a copy of IAEC Minutes of Meetings which is not older than one year at the time of purchasing animals. This Copy is for our office record. 2. The Buyers have to make their own arrangements for collection and transportation of animals as per CPCSEA guidelines. 3. DFSAH will not be responsible for any kind of mortality, injury or escape of supplied animals once they leave our facility.

For Office Use Only								
Receipt/Bill No	For Rs	Dated						
Signature of authorized person	on who pick animals with satisfac	ctory report:						