AFIRMATION OF THE HEAD OF THE MUI ANIMAL FACILITIES

*Project title:*

*Applicant’s name:*

*Department/Division:*

If work with laboratory animals is planned, the signature of the head of the MUI animal facilities is compulsory. Please fill out the following table:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Description of the animals (Line) | In which house will the animals be kept? | If appropriate, safety classification according to GTG, BGBl. Nr. 510/1994 ITGF | Max. number of animals 1st year | Max. number of animals 2nd year |
|  |  |  |  |  |

The housing of the animals in one of the animal houses of the MUI is authorized:

Date / Signature of Head of the MUI animal facilities