



Agharkar Research Institute, Pune, INDIA

## MACS Collection of Microorganisms (MCM), WDCM 561

A Distinguished Repository of Anaerobes & Extremophiles

### Form for Deposit of Bacteria, Archaea or Anaerobic Fungi

For MCM use only	
SRN:	
MCM No:	

<b>1. Type of Deposit</b> (General/ Safe Deposit)	
<b>2. Type of Organism</b> (Bacteria/ Archaea/ Fungi/ Methanogen/ any other)	
<b>3. Taxonomic designation</b>	Genus: _____ Species: _____
<b>4. Strain No</b>	
<b>5. Isolation Details</b>	
<b>a. Source of isolation</b> (Brief description of the <b>source</b> , such as soil/ water/ sediment/ leaf/ any other)	
<b>b. Isolated by</b> (Name of person(s))	
<b>c. Location</b> (Village, City, State, Country & GPS Coordinates)	
<b>6. Safety Details</b>	
<b>a. Is this strain pathogenic</b> (Yes/ No/ Do Not know)	
<b>b. If yes, is it pathogenic to</b> (Humans/ Plants/ Animals)	
<b>c. Biohazard Group</b> (BSL-1/ BSL-2/ Do Not Know)	
<b>7. Availability Details</b>	
<b>a. Did you receive this strain from other investigator/ organization</b> (Yes/ No)	
<b>b. If yes, mention name of investigator &amp; their organization</b>	
<b>c. Is this strain available in any other culture collection</b> (Yes/ No/ Do Not Know). If yes, mention the accession nos.	



<b>8. CBD Related Information</b> (see <a href="http://www.cbd.int">www.cbd.int</a> for more information)		
<b>a. Prior Informed Consent (PIC) Taken</b> (Yes/ No/ Not applicable)		
<b>b. If yes, name of Authority/ Organization who issued PIC</b>		
<b>9. Growth Related Details</b>		
<b>a. Growth medium</b> (Please mention the exact composition in case of customized medium, else mention Manufacturer & Catalog No.):		
<b>b. pH</b>	Range	
	Optimum	
<b>c. Temperature</b>	Range	
	Optimum	
<b>d. Salt concentration</b>	Range	
	Optimum	
<b>e. Aerobic/ Anaerobic/ Microaerophilic</b>		
<b>f. Any special growth requirement</b>		
<b>g. Recommendation for long term storage</b> (other than liquid N <sub>2</sub> , -80 °C or by lyophilization)		
<b>10. Identification Data</b> (Please attach separate sheet for morphological, biochemical or any other characters)		
<b>a. 16S rRNA/ ITS/ LSU</b> (any other)		
<b>b. If yes, Accession Number of Deposited Sequence</b>		
<b>c. MALDI Analysis</b> (Similarity Index)		
<b>d. BIOLOG Analysis</b> (Similarity Index)		
<b>e. FAME Analysis</b> (Similarity Index)		
<b>f. API Analysis</b> (Similarity Index)		
<b>11. Supplemental Information</b>		
<b>a. Special usage/ Application/ Feature</b>		
<b>b. Reference(s)</b> [e.g.: (1) J Abbr, Year, Vol:PageNo (DOI); (2) J Abbr, Year, Vol:PageNo (DOI); & so on...]		

12. Depositor's Information	
a. Name of Depositor	
b. Postal Address (with PIN Code)	
c. Email Address for Communication	
d. Contact Phone Number	
e. Date of Dispatch	
13. Payment Information	
a. Date & Mode of Payment	
b. Amount Paid	
c. UTR/Transaction ID for Payment	

(Mandatory) I authorize MCM to accession the strain and deposit it in the category selected above (Sr. No. 1).

Accordingly, the strain may be made available to public for General Deposit Category. I read and agree to the terms and conditions mentioned in the Material Accession Agreement (MAA) sent to me separately.

Organization Seal

Date & Signature of the Depositor/ Authorized Signatory

For MCM Use Only			
Processing Details			
Date Received on		Ack. Sent on	
Sub-cultured on		Sub-cultured by	
Viable/ Non-viable		Pure/ Mixed	
Sent for Seq/MALDI		Results Received on	
Identity		Checked by	
Preservation Details			
For -80 °C Storage		For liquid N <sub>2</sub> Storage	
Preserved on		Preserved on	
Storage ID		Storage ID	
Well No.		Well No.	
Accession Details			
MCM Accession No.		Accessioned on	
Sent for Depositor's Check on		Depositor's Check Received on	
<b>Remarks, if any:</b>			