**HKSTP IACUC Application Form  
for Use of Live Animals in Research & Development**

*[This form is modified from the original created for public use by the NIH Office of Laboratory Animal Welfare]*

## This part will be completed by HKSTP IACUC:

Proposal #:

Date received:

Approval date:

Expiration date:

PROPOSAL #:

APPROVAL DATE:

EXPIRATION DATE:

P POSAL #:

ROPOSAL #:

PROPOSAL #:

APPROVAL DATE:

EXPIRATION DATE:

**Important:** This form shall be completed by the **principal investigator or staff in-charge** of the proposed project. Before completing this form, please read the **“HKSTP IACUC Handbook” (“Handbook”)** in the IACUC webpage which can be accessed through the following link <https://www.hkstp.org/what-we-offer/institute-for-translational-research/hkstp-institutional-animal-care-and-use-committee-iacuc/>

Before a company is to start using (including housing or breeding) **any type of** **live animals** for any of its new/revised/extended R&D activities, the company is responsible for obtaining ethics clearancefor such proposed activities, to ensure appropriate ethical standards will be upheld for animal care and use. The **ethics standards and guidelines** listed in the Handbook must be complied with at all times.

Please complete all sections in wordings that are understandable to a lay person. Expand the text boxes as you type. Mark all applicable boxes. Enter “N/A” if a section is not relevant, instead of leaving it blank.

Submit (1) this form, (2) Application Checklist and (3) relevant attachments to the IACUC Secretariat at [iacuc@hkstp.org](mailto:iacuc@hkstp.org)

……………………………………………………………………………………………………………

|  |  |
| --- | --- |
| **Project title:** |  |

New submission

Extension of \_\_\_\_ years \_\_\_\_ months for approved project (HKSTP IACUC ref. no.: \_\_\_\_\_\_\_\_\_\_\_\_)

Amendments in Section(s):  Project title  A  B  C  D  E  F  G  H

I  J  K  L  M  N  O  P  Q

[ Notes:Pleasehighlight amendments in subsequent sections in yellow. ]

Is this a sponsored trials/ study?

Yes (name of sponsor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

No

#### COMPANY & PERSONNEL INFORMATION

|  |  |
| --- | --- |
| 1. Company name: |  |
| Affiliated technology cluster  or program in HKSTP: | ☐ Biomedical Technology ☐ Electronics ☐ Green Technology  ☐ Information & Communications Technology ☐ Material & Precision Engineering  ☐ Incu-Bio ☐ Incu-Tech ☐ Incu-App ☐ Other program: \_\_\_\_ |
|  | ☐ Health@InnoHK ☐ AIR@InnoHK |
| Location(s) in HKSTP premises: (Building # & unit #) |  |

1. Principal investigator or staff in-charge of this project:

|  |  |  |  |
| --- | --- | --- | --- |
| **Name**  (Please underline the surname) | **Position & department in the company** | **Direct phone number** | **Email address** |
|  |  |  |  |

1. All other personnel (including co-investigators, interns) that are authorized to conduct procedures involving live animals in this proposal:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name**  (Please underline the surname) | **Role in this project** | **Position & department in the company** | **Direct phone number** | **Email address** |
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**Important:**

All personnel listed in (2) & (3) above shall:

(i) Complete the training on 3R principles listed on the **Application Checklist** (or equivalent training).

(ii) Provide a copy of the **valid license/permit/endorsement** under *Animals (Control of Experiments) Ordinance* (Cap. 340)  
to HKSTP IACUC, if this project will involve live non-human vertebrate animals. Refer to the HKSARG Department of Health website for license application form and reporting guide: <https://www.dh.gov.hk/english/useful/useful_alo/useful_alo.html>

(iii) Apart from complying with the **research standards & guidelines** listed in the Ethics Guide, you should also refer to the **AAALAC “Guide for the Care and Use of Laboratory Animals”** ([8th ed.](https://www.aaalac.org/the-guide/)) for general principles and ethical considerations.

1. Brief description of experience in animal experimentation (including types/duration of training attended) of **all the personnel named in (2) and (3) above**.

#### ANIMAL REQUIREMENTS

**Ref: For this and subsequent sections, please also refer to the following references whenever necessary:**

* 1. AAALAC Guide for the Care and Use of Laboratory Animals (8th ed.) [(NRC, 2011)](https://www.aaalac.org/the-guide/)
  2. The Design of Animal Experiments: Reducing the Use of Animals in Research through Better Experimental Design (2nd ed.) ([SAGE, 2016](https://books.google.com.hk/books?id=dpzPjwEACAAJ))
  3. Principles of Experimental Design for the Life Sciences ([CRC Press, 1996](https://books.google.com.hk/books/about/Principles_of_Experimental_Design_for_th.html?id=rZS6kVvPV9kC))
  4. Statistics and Experimental Design for Toxicologists (4th ed.) ([CRC Press, 2005](https://books.google.com.hk/books?id=RRmx7RMtvukC))
  5. Statistics for Experimenters: Design, Innovation, and Discovery (2nd ed.) ([Wiley, 2005](https://books.google.com.hk/books?id=oYUpAQAAMAAJ))
  6. Experimental Design for Biologists ([Cold Spring Harbour Laboratory Press, 2007](https://books.google.com.hk/books?id=ksu2jWWF3k0C))

1. Animals that will be used:

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Genus**  *[eg. Mus]* | **Species***[eg. musculus]* ***/* Common name***[eg. Black6]* | **Strain/ sub-species/ breed** *[eg. C57BL/6]* | **Approx. age, weight  or size** | **Sex** | **Number of animals to be used each year:** | | | **Total number in the 3 years** |
| **Year 1** | **Year 2** | **Year 3** |
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|  |  | **Total number of animals to be used in this project =** | | | | | |  |

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| --- | --- | --- |
| 1. Bacteriological status: *[eg. germfree (axenic), defined flora (gnotobiotic), specific pathogen free (SPF), conventional]* |  | |
|  | | |
| 1. Viral status: *[eg. simian immunodeficency virus, simian retrovirus]* |  | |
|  | | |
| 1. Source(s) of animals: *[eg. name of vendor or breeder, or bred in-house]* |  | |
| **Note:** Please provide a copy of animal health certificate(s) if available. | |
|  | |
| 1. Primary animal housing location(s): *[eg. Building number & unit in HK Science Park (HKSP). If outside HKSP, include name of campus.]* |  | | |
| 1. Location(s) where manipulation and subsequent care will be carried out: |  | |
| **Note:** The PI/staff in-charge named in **Section A2** must certify in **Section Q** that the facilities/locations listed in (5) & (6) above have the resource capability to support this proposed project. | |

#### TRANSPORTATION

Transportation of live animals must conform to all international guidelines/policies and local regulations.

Please ensure animals will be secured in their well-covered containers (if applicable) during transportation within a facility, between facilities on the same campus, or on public roads to/from locations in this study.

HKSTP Facilities Management Office will provide companies with site operation procedures for animal delivery and routing in buildings. Should you require transportation of animals in and out of premises or between HKSTP facilities, please contact HKSTP Facility Management Office directly at 26398008 for the relevant guidelines.

I acknowledge the above.

#### STUDY OBJECTIVES

Briefly explain the aim of the study and why the study is important to human or animal health, the advancement of knowledge, or the good of society in language that a layperson can understand.   
Also comment on whether the study unnecessarily duplicates other studies.

#### RATIONALE FOR ANIMAL USE

Implementation of the 3R principles (i.e., replacement, reduction, refinement) and the 4th R (respect for animal welfare) shall be applied in the project.

Ref: Please visit the following websites:

* 1. Center for Alternatives to Animal Testing (Altweb) --- [*http://altweb.jhsph.edu*](http://altweb.jhsph.edu)
  2. Fund for the Replacement of Animals in Medical Experiments (FRAME) --- [*http://www.frame.org.uk*](http://www.frame.org.uk)
  3. Norwegian Reference Centre for Laboratory Animal Science and Alternatives (NORINA) --- [*http://oslovet.veths.no/NORINA*](http://oslovet.veths.no/NORINA)
  4. National Centre for the Replacement, Refinement and Reduction of Animals in Research --- [*http://www.nc3rs.org.uk*](http://www.nc3rs.org.uk)

1. Explain your rationale for animal use.   
   *[The rationale should include reasons why it is necessary to use animal models and/or breeding and housing, any alternative / non-animal method to replace animal use that has been explored, and how this project advances scientific / medical knowledge.]*
2. Justify the appropriateness of the species selected.   
   *[The species selected should be the lowest possible on the phylogenetic scale.]*
3. Justify the number of animals to be used.   
   *[The number of animals should be the minimum number required to obtain statistically valid results.]*
4. Provide G power calculation to support the proposed number of animals to be used.   
   *[The number of animals should be the minimum number required to obtain statistically valid results.]*

#### DESCRIPTION OF EXPERIMENTAL DESIGN AND ANIMAL PROCEDURES

1. Types of experiments/procedures:

Short-term: Procedures will be finished within 24 hours. There is no holding of animals after 24 hours:

Euthanasia only   
 Experiments performed wholly under anesthesia followed by termination of the animals  Experiments on conscious animals followed by termination of the animals

Long-term:  Experiments on conscious animals

Experiments on conscious animals with period(s) of anesthesia

Breeding:  Animals to be bred by the Principal Investigator and to be used for subsequent R&D

1. Intended length of this project:
2. Summary of the experimental design and all animal care and use procedures:

* Briefly explain the experimental design and specify all animal procedures. All procedures to be employed in the study must be described. This description should allow the IACUC to understand the experimental course of an animal from its entry into the experiment to the endpoint of the study.   
    
  A flowchart may be an effective presentation of the planned procedure.

🡨 Attach as separate document or show in the space below

* A best practice is to provide an acceptable range of the specific items described below to allow flexibility in the use of professional judgment and avoid non-compliance due to work conducted off protocol as a result of overly restricted parameters.

Include the following specific information, please specify if item is not applicable:

* **Animal identification methods** *[eg. ear tags, tattoos, collar, cage card, implant, etc.]*.
* **Methods of restraint** *[eg. restraint chairs, collars, vests, harnesses, slings, etc.]*.   
  Describe how animals are restrained for routine procedures like blood withdrawals. Prolonged restraint must be justified with appropriate oversight to ensure it is minimally distressing. Describe any sedation, acclimation or training to be used.
* **Experimental injections or inoculations** *[substances, eg. infectious agents, adjuvants, etc.; dose, sites, volume, route, and schedule]*.
* **Blood withdrawals** *[volume, frequency, withdrawal site, and methodology]*.
* **Radiation** *[dosage and schedule]***.**
* **Food or fluid restriction**If food, or fluid, or both food and fluid, will be restricted, describe method for assessing the health and wellbeing of the animals. *[Amount earned during testing and amount freely given must be recorded and assessed to assure proper nutrition.]*  If you are seeking a departure from the recommendations of the AAALAC *Guide*, provide a scientific justification.
* **Pharmaceutical-grade and Non-pharmaceutical-grade Compounds**Identify any drugs, biologics, or reagents that will be administered to animals. If these agents are not human or veterinary pharmaceutical-grade substances, provide a scientific justification for their use and describe methods that will be used to ensure appropriate preparation and administration.
* **Other procedures** *[eg. survival studies, tail biopsies]*.
* **Resultant effects**, if any, that the animals are expected to experience *[eg. pain or distress, ascites production, etc.]*.
* **Other potential stressors** *[eg. noxious stimuli, environmental stress]* **and procedures to monitor and minimize distress**.
* **Veterinary care**   
  Indicate the plan of action in case of animal illness *[eg. initiate treatment, call which investigator prior to initiating treatment, euthanize]*.
* **Surgical procedures**   
  *[provide details of survival and non-survival surgical procedures in* ***Section G*** *below]*.
* Explanation of the procedures producing **pain or distress** in these animals, and also the justification for not using appropriate anesthetic, analgesic or tranquilizing drugs.
* Note: Please visit the following websites:

1. HK Code of Practice for Care and Use of Animals for Experimental Purposes, AFCD --   
   [*https://www.afcd.gov.hk/english/aboutus/abt\_adv/files/Code\_of\_Practice\_Care\_and\_Use\_of\_Animals\_for\_Experimental\_Purposes\_English.pdf*](https://www.afcd.gov.hk/english/aboutus/abt_adv/files/Code_of_Practice_Care_and_Use_of_Animals_for_Experimental_Purposes_English.pdf)
2. HK guidelines for genetically modified organisms, AFCD --- [*https://www.afcd.gov.hk/english/conservation/con\_gmo/con\_gmo.html*](https://www.afcd.gov.hk/english/conservation/con_gmo/con_gmo.html)

* Ref: Please refer to the following information whenever necessary:

1. [Saphenous vein puncture for blood sampling of the mice](http://www.uib.no/vivariet/mou_blood/Blood_coll_mice_.html), The Norwegian Reference Centre for Laboratory Animal Science and Alternatives (2005)
2. The UKCCCR guidelines for the welfare of animals in experimental Neoplasia, United Kingdom Co-ordinating Committee on Cancer Research, UKCCCR (1997)
3. UK Home Office Guidance Note: Water and food restriction for scientific purposes
4. UK Home Office Guidance Note:  Antibody production - Principles for protocols of minimal severity
5. CCAC Guidelines on Antibody Production, Canadian Council on Animal Care
6. Refinement and reduction in production of genetically modified mice: Sixth report of BVAAWF/FRAME/RSPCA/UFAW Joint Working Group on Refinement, RSM Press, *Laboratory Animals*, 37(3) Supplement (2003)
7. Laboratory birds: refinements in husbandry and procedures: Fifth report of BVAAWF/FRAME/RSPCA/UFAW Joint Working Group on Refinement, RSM Press, *Laboratory Animals*, 35 (4) Supplement (2001)
8. Refining procedures for the administration of substances, Report of the BVAAWF/FRAME/RSPCA/UFAW Joint Working Group on Refinement, RSM Press, *Laboratory Animals*, 35 (1) (2001)
9. Guidelines for the care and use of mammals in neuroscience and behavioral research, Institute for Laboratory Animal Research Report (2003)
10. AAALAC Guide for the Care and Use of Laboratory Animals, NRC (2011)
11. NIH Guidelines for Research Involving Recombinant DNA Molecules
12. NIH Guidelines for Survival Rodent Surgery
13. Harmonisation of Animal Care and Use Guidelines, Science, 312, 700-701 (2006)
14. NIH Guidelines for Ascites Production in Mice
15. Sub-mandibular bleeding of mice, *Lab Animal*, 34 (9) (2005)
16. CCAC guidelines on: choosing an appropriate endpoint in experiments using animals for research, teaching and testing (1998).
17. Institute for Laboratory Animal Research Report:  Humane endpoints for animals used in biomedical research and testing (2000)
18. NIH Guidelines for Endpoints in Animal Study Proposals
19. Guidelines for the Assessment and Management of Pain in Rodents and Rabbits, ACLAM (2006)
20. Recognition and Alleviation of Distress in Laboratory Animals, NRC (2008)
21. Recognition and Alleviation of Pain in Laboratory Animals, NRC (2009)

*[Please provide your summary below. Expand this space as you type.]*

1. Specify the **experimental endpoint criteria.** List the criteria that will be used to determine when euthanasia is to be performed. Death as an endpoint must be scientifically justified. *[eg. tumor size, percentage body weight gain or loss, inability to eat or drink, behavioral abnormalities, clinical symptomatology, or signs of toxicity]*
2. Specify the **humane endpoint criteria**. How does this differ from the experimental endpoint criteria.

#### SURGERY

Will this Project involve any surgical procedures?

Yes, please complete the following

No (you may skip this section)

1. Identify and describe the surgical procedure(s) to be performed. Include pre-operative procedures   
   *[eg. fasting, analgesic loading]*, as well as monitoring and supportive care during surgery.   
   Include the aseptic methods to be used.
2. Identify the individual(s) that will perform surgery and their qualifications, training, and/or experience.
3. Identify the location where surgery will be performed. *[building(s) and room(s)]*
4. If survival surgery, describe post-operative care that will be provided, and frequency of observation.

Identify the name and contact phone number of the responsible individual(s) and the location(s) where post-operative care will be provided *[building(s) and room(s)].* Also describe detection and management of post-operative complications during work hours, after hours, weekends and holidays.

1. If non-survival surgery, describe how euthanasia will be provided and how death will be determined.
2. Are paralytic agents used during surgery? If yes, please describe how ventilation will be maintained and how pain will be assessed.
   1. Has major or minor survival surgery been performed on any animal prior to being placed on this study? *[Major survival surgery penetrates and exposes a body cavity or produces substantial impairment of physical or physiologic functions or involves extensive tissue dissection or transection (such as laparotomy, thoracotomy, craniotomy, joint replacement or limb amputation)]*.If yes, please explain.
   2. Will more than one survival surgery be performed on an animal while on this study?

If yes, please justify.

#### ANESTHESIA, ANALGESIA, TRANQUILIZATION, OTHER AGENTS

Include the name of the agent(s), the dosage range, route(s) and schedule of administration. If information is provided in another section, please cross-reference. Describe tracking and security of controlled drugs.

Ref: Please refer to the following information whenever necessary:

1. Pain and distress in laboratory rodents and lagomorphs, *Laboratory Animals* 28, 97-112 (1994)
2. Handbook of laboratory animal management and welfare, S. Wolfensohn et al (2003)
3. Formulary for laboratory animals, C.T. Hawk et al (2005)
4. Laboratory animal anaesthesia, P. Flecknell (2009)
5. Anaesthesia and analgesia in laboratory animals, D.F. Kohn et al (2008)
6. Guidelines for animal surgery in research and teaching, *Am J Vet Res*, 54, 1544-1559 (1993)
7. Pain management in animals. P. Flecknell & A. Waterman-Pearson (2000)
8. The assessment and alleviation of pain and distress in research animals, NHMRC (2007)

#### METHOD OF EUTHANASIA AND DISPOSITION OF ANIMALS AT END OF STUDY

Indicate the proposed method of euthanasia. If a chemical agent is used, specify the dosage range and route of administration.

If the method of euthanasia is not consistent with the “**AVMA Guidelines for the Euthanasia of Animals**”, provide scientific justification as to why such method must be used.

Ref: Please refer to the following information whenever necessary:

1. AVMA Guidelines on Euthanasia of Animals
2. NIH Guidelines for the Euthanasia of Rodent Feti and Neonates
3. NIH Guidelines for Euthanasia of Rodents Using Carbon Dioxide

Indicate the method and procedures for carcass disposal.

#### BIOLOGICAL MATERIAL/ANIMAL PRODUCTS FOR USE IN ANIMALS

*[eg. cell lines, antiserum, etc.]*

1. Please complete the following table:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Specify each biological material/animal product** | | | **Source** | **Material Sterile or Attenuated** | | **Has the material been tested for pathogens?**  (eg. *MAP - Mouse Antibody Production;  RAP - Rat Antibody Production; HAP - Hamster Antibody Production, PCR test)* | |
| **No** | **Yes** | **No** | **Yes**  *[Attach copy of test results]* |
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| 1. I certify that the tested materials to be used have not passed through rodent species outside of the animal facility in question and/or the material is derived from the original tested sample. To the best of my knowledge the material remains uncontaminated with rodent pathogens. | | | | | | | | | |
|  | |  | **Initials of Principal Investigator** | | | | | | |

#### HAZARDOUS AGENTS

Ref: Please refer to the following:

1. HKSTP Safety, Health, and Environment (SHE) Handbook
2. Occupational health and safety in the care and use of research animals, NRC, USA (1997)
3. Biosafety in microbiological and biomedical laboratories, CDC (2009)
4. The study will be conducted at Animal Biosafety Level (ABSL):  1  2  3  4

*Currently not allowed**at Hong Kong Science Park*

1. Please complete the following table:

|  |  |  |  |
| --- | --- | --- | --- |
| **Hazardous Agent** | **No** | **Yes** | **If yes, specify the agent.**  **Also state the ref. no. of any past HKSTP IACUC application  that has the agent approved**  (Mark “N/A” if not applicable) |
| *Example:*  *Hazardous chemicals or drugs* |  |  | 1. *5-bromo-2'-deoxyuridine* 2. *Tamoxifen (HKSTP-IACUC-2020-XXXX)* |
| Hazardous chemicals or drugs |  |  |  |
| Biological agents |  |  |  |
| Recombinant DNA |  |  |  |
| Radionuclides |  |  |  |
| Others |  |  |  |

1. Describe the practices and procedures required for the safe handling and disposal of contaminated animals and material associated with this study. Also describe methods for removal of radioactive waste and, if applicable, the monitoring of radioactivity.
2. Additional safety considerations:

#### GENETICALLY ENGINEERED ANIMALS

Describe any anticipated phenotypic consequences of the genetic manipulations to the animals (including anatomatical and behavioral characteristics, etc.).

Describe any special husbandary care or health monitoring that the animals will require.

#### FIELD STUDIES

If animals in the wild will be used, describe how they will be observed, any interactions with the animals, whether the animals will be disturbed or affected, and any special procedures anticipated. Indicate if local permits are required and whether they have been obtained.

#### SPECIAL CONCERNS OR REQUIREMENTS OF THE STUDY

List any special housing, equipment, animal care or any departures from the **AAALAC “Guide for the Care and Use of Laboratory Animals”** *[eg. special caging, water, feed, waste disposal, environmental enrichment, etc.]*. Also list any other info considered important.

#### CONSENT FOR SITE SURVEY BY HKSTP

By signing and submitting this HKSTP IACUC Application Form for Use of Live Animals in Research & Development, the Company hereby consents, acknowledges and agrees to a site survey conducted by HKSTP IACUC Committee Members for the purpose to ascertain, without limitation, the facilities and environment within the Company’s premises to be suitable for conducting animal research as set out in the application submitted. HKSTP IACUC Committee Members will contact the research personnel or facility supervisor of the application to discuss the arrangements of the site survey. HKSTP IACUC Committee will only consider your application once the site survey is completed to our satisfaction.

#### CERTIFICATIONS BY PRINCIPAL INVESTIGATOR / STAFF IN-CHARGE

I, the undersigned, who has authority to make this declaration on behalf of my company and to bind the company to the matters stated in this form, hereby certify as follows:

1. All the information stated in this form are true, complete and accurate.
2. I have determined the proposed project is not unnecessarily duplicative of previously reported research.
3. I shall take reasonable care to ensure that the proposed work/experiment(s) is conducted in accordance with the best modern practice and in such a way so as to safeguard the welfare of and minimise the pain suffered by the animals involved. I assure that measures to be taken to minimise animal suffering/injury are the most humane and compatible with the objectives of the work/experiment.
4. I have completed the requisite training course or any equivalent courses (please refer to the **Application Checklist**) and all other necessary investigator training courses required by my company.
5. The individuals listed in **Section A** that will conduct procedures involving animals in this proposal have completed the requisite training course (see **Application Checklist**), and have received training in:

* the biology, handling and care of the species to be used in this proposal;
* applying aseptic surgical methods and techniques (if necessary);
* the concept, availability and use of research or testing methods that limit the use of animals or minimize distress;
* the proper use of anesthetics, analgesics and tranquilizers (if necessary); and
* the procedures for reporting animal welfare concerns.

1. I will ensure that facilities, safety equipment and procedures are in place to enable this proposed work to be carried out safely.
2. I will obtain approval from the HKSTP IACUC before initiating any changes in this project.
3. I will notify the HKSTP IACUC regarding any unexpected study results that impact the animals. In addition, any unexpected incidents, as well as unanticipated pain or distress, morbidity or mortality will be documented and reported to the attending veterinarian for this project and also the HKSTP IACUC.
4. I am familiar with and will comply with the **“HKSTP Ethics Guide for Animal Research”**, including the research ethics standards and guidelines that are referred at **point 2** of the guide, as well as all pertinent rules, policies and regulations of HKSTP as the same may be updated from time to time.
5. I am familiar with and will comply with all applicable guidelines and regulatory and statutory requirements of the Hong Kong Special Administrative Region.
6. HKSTP IACUC has a right to conduct inspections (during the term on a semi-annual basis) at the Company’s location(s) stated in **Section A** of this application for the purposes of ascertaining, without limitation, the facilities, environment and activities within the said location(s) involving animal research are in consistent with the description provided in the submitted protocol and comply with applicable laws, regulations and policies. I agree to allow and make the necessary arrangements for HKSTP IACUC to enter into the said location(s) for the purpose of carring out the said inspections to HKSTP IACUC’s satisfaction and in accordance with ARENA/OLAW IACUC Guidebook. For the avoidance of doubt, HKSTP IACUC shall have the right to immediately suspend/terminate any activities inside the said location(s) if it determines, at its absolute discretion, that any such activities is not being conducted in accordance with the submitted protocol that is approved by HKSTP IACUC.
7. I further understand that if any information provided in this application is false or if I or my team fail to adhere to any of the ethics guide and requirements referred at **(9) and (10)** **above** (“Requirements”), HKSTP reserves the right to demand that part/all of the activities in this project be ceased without any liability whatsoever towards my company. In the event of any serious violation of the Requirements, HKSTP may, at its absolute discretion, terminate my company’s lease with HKSTP.

**Principal Investigator / Staff in-charge:**

[The name below should match that in **Section A2**. Electronic signature is acceptable.]

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name: |  | Signature: |  | Date: | Click or tap to enter a date. |

#### CONCURRENCES

Concurrence of resource capability in the indicated facility/location to support the proposed study:

I/We hereby endorse this application and confirm that the principal investigator / staff in-charge named in **Section A2** is appropriately experienced in the work proposed and that the company has adequate facilities (listed in **Section B5 – B6**) for the experiment(s)/procedures to be conducted safely and in such a way as to safeguard the welfare of and minimise the pain suffered by the animals involved.

*Supervisor/person in-charge of managing the facility/location to be used in this project:*

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Name: |  | Role: |  | Signature: |  | Date: | Click or tap to enter a date. |

*Supervisor/person in-charge of managing the facility/location to be used in this project:*

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Name: |  | Role: |  | Signature: |  | Date: | Click or tap to enter a date. |

#### FINAL APPROVAL

*(This part will be completed by HKSTP IACUC)*

Certification of review and approval by the HKSTP Institutional Animal Care and Use Committee (IACUC):

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Name: |  | Role: |  | Signature: |  | Date: | Click or tap to enter a date. |