**Amendment to Biosafety Permit Form**

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| --- |
| **Contact Information** |
| Biosafety Permit Number: |  |
| Permit holder Name: |  |
| Department: |  |
| Office Telephone Number: |  |
| Laboratory Telephone Number: |  |
| Email Address: |  |
|  |
| Animal Welfare Protocol # (if working with animals) |  |
|  |
| **Type of Permit Amendment\*\*** | **Check**  |
| Addition of new research protocol |  |
| Change of existing research protocol |  |
| Additions/Changes to the organism, biological material or biohazardous material |  |
| Changes to quantities or organism, biological material or biohazardous material |  |
| Amendment to authorized workers list |  |
| Amendment to permit contact information |  |
| Amendment to work and/or storage locations |  |
| **Permit Amendment Details**  |
| (*ensure the Dual Use Potential has been reviewed, refer back to Biosafety Plan*) |
| The information provided in this application and supporting documentation is complete and accurate to the best of my Knowledge:Signature of Permit Holder: Date:  |
| The new biosafety permit application has been received with required supporting information.Signature of the Biosafety Officer: Date: |

\*\*Biosafety permit amendments will not be approved without the required supporting documentation.