

**Request for animal housing in the Division of Laboratory Animal Resources (DLAR)**

Animal space is assigned by the DLAR based on recommendations of the DLAR Advisory Committee. All requests are considered by the Advisory Committee at its next scheduled meeting.

Please forward this completed form to Peg Hogan, Sr. Operations Manager, by saving the document and attaching it in an email to [hogan012@mc.duke.edu](mailto:hogan012@mc.duke.edu). Alternately you may print and fax to 684-8610.

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**Principal Investigator**

Name: \_\_\_\_\_  
Department: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Box #: \_\_\_\_\_  
Lab Contact Person: \_\_\_\_\_

**Request**

Species: \_\_\_\_\_  
Number of Cages: \_\_\_\_\_                      Number of Animals: \_\_\_\_\_  
    Immediate (0-3 months) \_\_\_\_\_                      Immediate (0-3 months) \_\_\_\_\_  
    Long Term (3-12 months) \_\_\_\_\_                      Long Term (3-12 months) \_\_\_\_\_  
Average Daily Census: \_\_\_\_\_

**Circle Preferred Location or notate Other:** Annex Bldg., Brian Res., CR II, Eye Ctr., Farm, GSRB II, LSRC, MSRB, Nan. Duke, Sands, Vivarium; Other: \_\_\_\_\_

**Circle Type of Housing or notate Other:** Conventional, Ventilated; Other: \_\_\_\_\_

If GSRB II, please describe the research program to justify assignment in this building, which is assigned programmatically.

Please provide any special conditions or requirement for these animals including caging (single or group-housed), feed (special diet required?), bedding material, room conditions (temperature, humidity, light cycles, etc.), water (RO/tap/antibiotic, etc.), specific treatments or observations, whether procedural space is required and any other relevant information:

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Principal Investigator Signature

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Date