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| Submission Form |

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| Details of Submitter |  | Owner of the animal(s) |
|  |  |  |  |  |
| Name |  |  | Name |  |
| Address |  |  | Address |  |
|  |  |  |  |  |
| Country |  |  | Country |  |
| Tel |  |  | Tel |  |
| E-mail |  |  | E-mail |  |
| Signature |  |  |  |  |

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| Address for Return of Results if different from submitter*Please also use this box if results need to go to a third party* |
|  |  |
| Name |  |
| Address |  |
|  |  |
| Country |  |
| Tel |  |
| E-mail |  |

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| Samples tested for (please tick the box) |  | For export or import *only*  |
|  |  |  |  |  |
| Foot and Mouth Disease (FMD) |[ ]   | Export [ ]  | Destination |  |
| Seneca Valley Virus (SVV) |[ ]   | Import [ ]  | Origin |  |
| Swine Vesicular Disease (SVD) |[ ]   | Date of Sampling |  |
| Vesicular Stomatitis (VS) |[ ]   | Date of Export/Import |  |
|  |  |  | Date of Submission |  |

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| **Serological Test Required** |
|  |
| Foot and Mouth Disease |
| Virus Neutralisation Test  |[ ]
| Liquid Phase Blocking ELISA – titration |[ ]
| Liquid Phase Blocking ELISA – spot test |[ ]
| Solid Phase Blocking ELISA – spot test |[ ]
| PrioCHECK Serotype O ELISA |[ ]
| Non-Structural Protein ELISA |[ ]
| Seneca Valley Virus (SVV) |
| Virus Neutralisation Test |[ ]
| ELISA |[ ]
| Swine Vesicular Disease Virus |
| Virus Neutralisation Test |[ ]
| SVD Competition ELISA |[ ]
| Vesicular Stomatitis |
| Virus Neutralisation Test |[ ]

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| **Samples to be submitted** |
|  |
| Tube Number | Animal ID | Animal Species | Sample Type | Date of Sampling | Test Required |
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| Tube Number | Animal ID | Animal Species | Sample Type | Date of Sampling | Test Required |
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**Please submit form to:** incoming.samples@pirbright.ac.uk and include a copy in your shipment.

**Please address consignment to:**

Attention: Serum Assay Unit

The Pirbright Institute

Ash Road

Pirbright Woking Surrey

GU24 0NF