

UNIVERSITY OF COLORADO BOULDER ANIMAL CARE AND USE COMMITTEE
SATELLITE FACILITY - APPLICATION FOR CERTIFICATION

This form is for establishing a satellite housing facility for vertebrate animals that will be kept over 12 hours for USDA-covered species and over 24 hours for non-USDA covered species.

- Principal investigators overseeing the satellite facility must submit this form through email to iacucoffice@colorado.edu
- **Read the semi-annual facility checklist and ensure that you have implemented all relevant requirements of the [Guide for the care and Use of Laboratory Animals, 8th edition \(Guide\)](#). Having a copy of the [Guide in electronic form](#) or in hard copy is recommended as a reference. The semi-annual facility checklist for animal housing refers to page numbers in the *Guide*.**
- When completing this application, see [Standard Operating Procedure, SOP 400.18: Satellite Animal Facilities](#), on the IACUC website. This application is to provide assurance to the IACUC that animals will be cared for in accordance with the *Guide*.
- All procedures for the care and use of the animals must be in an IACUC protocol and reviewed and approved by the IACUC beforehand. This application is only for the establishment of the satellite to ensure the animals will be properly cared for outside the established animal facilities overseen by the Office of Animal Resources.

Please note that justification for the satellite must be approved by the IACUC, the site must be inspected by an IACUC sub-committee and an approval letter issued before the satellite is approved for use.

Proposed Name of Facility: _____

Location of Facility: _____

Proposed Facility Director: _____

Proposed Facility Manager: _____

Phone number: _____ E-mail: _____

Species to be housed and/or used: _____

Number of animals projected to be housed/used (estimated daily census): _____

Source of funding for operational costs: _____

How will this facility be secured (e.g. lock and key)? _____

How long do you plan to keep animals in this facility at any given time in accordance with the approved protocol (e.g. continually, or summers only, periodically)?

Air exchanges per hour: _____

All Personnel Employed in the Facility (all personnel caring and handling animals must be on an approved protocol, properly trained, and training documentation must be kept in accordance with the approved protocol): (add more rows as necessary)

NAME	DEGREE/ CERTIFICATION	IACUC TRAINING DATE	OCCUPATIONAL HEALTH ENROLLMENT DATE

Assurance of care from the Principal Investigator	Yes, No, Answer, or N/A
Do you have an emergency/disaster plan addendum form completed for your facility?	
Have all key personnel been trained on the disaster plan addendum, including the animal care program emergency plan?	
Do you have written standard operating procedures for the care of the animals, including scheduled cleaning of housing units and equipment, and water quality for fish and amphibians?	
Will animals be checked every day at least once and this will be documented along with the daily temperature and humidity checks, when the animals are fed and when the housing unit is cleaned? The animals must be checked every day (weekends and holidays included), and the care must be documented.	
Do you have the necessary laminated or plastic page-protected postings (reporting animal welfare concerns, veterinary on-call schedule, and reporting work related injuries) hanging on a permanent hook or other permanent fixture in or near the facility in a conspicuous location?	
Have you read the semi-annual facility checklist for animal housing and implemented all relevant requirements?	
If not, when do you plan to have the satellite facility ready?	
For fish and amphibians, are all relevant procedures performed to ensure appropriate water quality and maintenance for housing the animals?	
What light cycle will you provide to your animals in the satellite housing facility? Please list as hours of light/hours of dark. For example, 12 hours light and then 12 hours of darkness would be written 12/12.	
What type of security is used for this facility (choices include lock and key, swipe card access, etc.)?	
Will the IACUC and Attending Veterinarian have access to the facility at all times?	

Provide thorough justification for establishing this satellite housing facility: