

## Initial Cage Space Request

Please fill out the information below to make a request for cage space.

### Your Information

Principal Investigator: \_\_\_\_\_

Protocol #: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

### Facility for Your Cages / Number of Cages Being Requested

65 L

# of Cages

400 TS

What strains of mice are will you be using? (Please make sure to list any Immunocompromised Strains)

Will you be collaborating with other PIs that would require being housed in the same room?

How many cages need to start?

How many additional cages in the next 6 months – 1 year?

What is the Maximum Number of Cages you possibly may need at one time?

Will you require access to the ABSL2?

After completing this form, save it to your desktop and submit the completed form to [ASACRequests@mgh.harvard.edu](mailto:ASACRequests@mgh.harvard.edu).