**This specimen request form MUST accompany each specimen/s.**

**Request Form for INDIVIDUAL Dog Testing 2022**

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| --- | --- |
| **OWNER INFORMATION** | **ACCOUNT TO** |
| ID number: | **Society**:  Authorization Reference: |
| Surname: |
| Member number: | **Owner:**  **Deposit (Please attached proof of payment)**  Bank details: Standard Bank  Branch Code: 050410  Account nr: 041925858  Account name: Unistel Medical Laboratories  Deposit reference: Owner Name  Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Company: |
| VAT nr: |
| Address:  Contact Person: |
| E-Mail: |
| Tel: (H): (W): |
| Cell: |

|  |  |  |  |  |
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| **TEST No** | **TEST AVAILABLE** | **PRICE/UNIT**  **(Vat Excluded)** | **NO OF SPECIMEN** | **TOTAL** |
| 1 | Cocoa colour testing in French bulldogs | **R 495.00** |  |  |
| 2 | Merle Coat Colour - Various | **R 572.00** |  |  |
| 3 | Exercise Induced Collapse (EIC) - Various Breeds | **R 572.00** |  |  |
| 4 | Episodic Falling Disease - Spaniel Breeds | **R 572.00** |  |  |
| 5 | HNPK - Retrievers | **R 572.00** |  |  |
| 6 | FN (Familial Nephropathy) - Retriever & Spaniel | **R 572.00** |  |  |
| 7 | CEA/CH - Herding Breeds | **R 572.00** |  |  |
| 8 | MDR1 - Various Breeds | **R 572.00** |  |  |
| 9 | Haemophilia A (Factor VIII) - Shepherd | **R 572.00** |  |  |
| 10 | Degenerative Myelopathy (DM) - Various | **R 572.00** |  |  |
| 11 | Von-Willebrands Disease Type 1 - Various | **R 572.00** |  |  |
| 12 | prcd-PRA - Various | **R 572.00** |  |  |
| **Postal**  **Address** | **Suite 13, Private Bag X22**  **Tygervalley**  **7536**  **South Africa** | **Address: De Tijger Office Park, Block 1,**  **Parow North**  **7500**  **South Africa** | **VAT** |  |
|  |  |  | **TOTAL** |  |

**PLEASE INDICATE BREED:**

|  |  |  |
| --- | --- | --- |
| **Results to:** **Society** **Owner** **Contact Person** | | |
| I accept the instructions and terms stipulated and consent to the DNA data being recorded in the database of Unistel Animal Services.  I hereby consent to the further processing of the personal information provided on this form in terms of the Protection of Personal Information Act (2013) for the purposes of conducting this test and hereby agree to the terms and conditions of Unistel’s privacy policy and general terms and conditions for animal testing services which can be found at [www.unistelmedical.co.za](http://www.unistelmedical.co.za). | | |
| Signature: | Date: | Click here to enter a date. |

**Please take note of the following**: Should testing samples originate outside of South Africa, the client must notify Unistel prior to shipping samples so that we can apply for an import permit. Samples can only be shipped once a permit has been obtained and this permit will only be valid for one shipment. Unistel will cover the cost of permits for orders of 10 or more animals. Shipments of fewer than 10 animals will incur an additional cost of R200 per permit.