

Select Agent and Toxin Declaration Form

Florida International University requires all authorized users in possession of select toxins listed in the Select Agent Regulation (42 CFR 73) to complete this form. If the AU possesses less than the exempt quantity of toxin, no CDC/APHIS registration is necessary.

By signing below, I indicate the following:

- I am in possession of a select agent/toxin(s) found on the attached Select Agent list
- I have registered the select agent/toxin(s) in my possession with the CDC/APHIS and the FIU Department of Risk Management & Environmental Health and Safety (EH&S)
- I understand the quantity exemption limit for the toxin(s) in my possession and **I agree to never exceed the applicable possession limit without prior approval from the Department of Environmental Health and Safety and the Federal government**
- I understand that failure to abide by these quantity limits for specified toxins results in a Federal violation of the Select Agent Regulation, which may have serious consequences including personal criminal penalties and monetary fines
- I agree to maintain at all times an accurate inventory log for the select agent/toxin(s) in my possession
- I agree to notify EH&S in writing prior to making any attempt to purchase, acquire, or transfer any new agent/toxin(s)
- I agree to notify EH&S in writing prior to making any attempt to dispose of any select agent/toxin(s)
- I agree to notify EH&S in writing of any inventory, security, or training concerns for any select agent/toxin

Name (Print)

Date

Signature

Please return completed form to the Department of Environmental Health & Safety: CSC 162
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