**University of Colorado Colorado Springs**

**IBC BIOSAFETY APPLICATION FORM**

**Attachment II - Section C: Plants**

**Biosafety Application#  (Office Use Only)**

**Renewal for Application #** (Office Use Only)

**Administrative Information** Principal Investigator: 

Email Address:

**I. General Information:**

**A. Plant Species**

Transgenic: Yes  No

USDA-APHIS Permit required: Yes No Type/number:

USDA-APHIS Notification: Yes  No Number:

Field project duration: From:  To: 

Noxious weed (US or CA): Yes No

Method of reproduction: Self Wind pollinator Insect pollinator Human intervention required

**B. Location of work**:

Laboratory Room: Building/Room 

Growth Chamber: Building/Room 

Greenhouse: Building/Room 

Field Location, GPS coordinates: 

**C. Type of Recombinant DNA Experiment (see Worksheet 1 below)**

Section III-D-5:

Section III-E-2:

Containment level used:

BL-1-P  BL-2-P  BL-3-P

**II. Transgenic Plant Information**

Recombinants will have special growth requirements: Yes  No

Recombinants are expected to be more pathogenic: Yes  No

1. **Transformation method:**

*Agrobacterium tumefaciens* (all tumorigenic DNA removed)

Particle bombardment

Other:

1. **Inserted or deleted/silenced gene information:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Gene Modification** | | **Gene Name** | **Gene Source** | **Encode For** | **USDA-APHIS**  **Notification Number** |
| **Insert** | **Delete/**  **Silence** |
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**C. Characterization of inserted gene:**

Pharmaceutical

Pesticide, microbial pesticide, other plant-incorporated protectant

Pesticide resistance

Pathogen, pest, or herbicide resistance

Selectable marker genes that will not be removed

Other:

**III. Containment**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Greenhouse** | **Growth Chamber** | **Tissue Culture Use** |
| Pollen | Yes No | Yes No | Yes No |
| Seeds | Yes No | Yes No | Yes No |
| Whole plants | Yes No | Yes No | Yes No |
| Motile macrorganisms insects, nematodes | Yes No | Yes No | Yes No |
| Microorganisms | Yes No | Yes No | Yes No |

**IV. Inactivation of biological material by (describe in scope of work narrative):**

Chemical Inactivation; Disinfectant

Autoclave, Location(s)

Physical Destruction, Method:

None

**V. Field release:** Yes  No

**VI. Environmental impact if accidentally released**: Yes  No

If yes, methods used to prevent release:

**VII. Transportation of recombinant plants**: Yes  No

If yes, methods used to prevent release:

**VIII. Methods used to minimize dissemination and inadvertent release:**

Removal of flower and seed heads

Harvest prior to sexual maturity

Cloaking of flowers to prevent seed and pollen dispersal

Use of male sterile lines

Keeping distance between infected plants and a susceptible host

Choosing season/chronological timing of experiment to prevent cross contamination of susceptible plants

Removal of vectors for insect borne transmission

Use of plants genetically disabled for survival in the wild