ANIMAL RESEARCH FACILITY
ANNUAL REPORT
FOR YEAR _____

Under Section 14 of the Animals and Birds (Care and Use of Animals for Scientific Purposes) Rules and Section II.9.3 of the NACLAR Guidelines, all animal research facilitates are required to submit an annual report covering the period 1 January to 31 December of each year.

The information provided below must be type-written or written in legible block letters. Where the space provided is insufficient, please furnish type-written information on a separate sheet of paper and attach it with the Annual Report.

Part A: Particulars of Facility

Name of Research Facility:	
Address of Research Facility:	
Name of Licence Applicant:	
Reporting Period:	
Licence Number	

Part B: Assurance (As specified in Section II.9.3 of the NACLAR Guidelines)

(B)(I) ANIMAL CARE, TREATMENT AND USE OF ANIMALS

(B)(II) CONSIDERATION OF ALTERNATIVES

(B)(III) COMPLIANCE WITH GUIDING PRINCIPLES / ANY EXCEPTIONS TO THE GUIDING PRINCIPLES

Part C: Background information

Name	Email Address	Contact Number	Occupation	Position in IACUC	Category[1]
				Chairperson	
				Attending Veterinarian	E.g. (a)

Please attach a separate list if there is insufficient space in the table.

Categories: (a) Attending Veterinarian, (b) Scientist, (c) Non-affiliated and not a user of any animal, (d) Person whose primary concerns or interests are in non-scientific areas.

(C)(II) PARTICULARS OF ATTENDING VETERINARIAN(S)					
Name: (Attending vet)		Full-time or Part-time basis:		Licence No:	
Name: (Cover for attending vet)		Full-time or Part-time basis:		Licence No:	

(C)(III) LOCATION OF PREMISES	
List all locations where animals were housed or used or held for scientific purposes. (As listed in the licence)	
1	
2	
3	
4	
5	
6	
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8	
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11	
12	
13	
14	
15	

Part D: Statistics

(D)(I) State the common names and numbers of animals used for scientific activities at each facility involving NO pain, distress, or use of pain-relieving drugs. Routine procedures (e.g. injections, tattooing, blood sampling) should be reported with this group.

Common Name of Animals	Number of Animals	Remarks

(D)(II) State the common names and the numbers of animals used for scientific activities at each facility involving accompanying pain or distress to the animals and for which appropriate anaesthetics, analgesics, or tranquillising drugs were used.

Common Name of Animals	Number of Animals Used	Remarks

(D)(III) State the common names and the numbers of animals used for scientific activities at each facility involving accompanying pain or distress to the animals and for which the use of appropriate anaesthetics, analgesic, or tranquillising drugs would have adversely affected the procedures, results, or interpretation of the research, experiments, surgery, or tests. A brief explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used can be given in the Remarks.

Common Name of Animals	Number of Animals	Remarks

(D)(IV) State the common names and the numbers of animals being bred, conditioned, or held for scientific activities at each facility but not yet used for such purposes.		
Common Name of Animals	**Number of Animals**	**Remarks**

Total number of animals used for scientific activities: Item D(I) + D(II) + D(III)	

Total number of animals used and held by Facility Item D(I)+(II)+(III)+(IV)	

Part E: Reviews & Inspections Carried Out by IACUC

(E)(I) 1st Semi-annual review of animal care and use programmes		
Date	Significant deficiencies[2] identified in the annual programme review by IACUC (State "None" if no deficiencies identified)	Corrective Actions (State "NA" if no actions to be taken.)

[2] A significant deficiency is one that is or may be a threat to the health and safety of the animals and which is classified as such by the IACUC in its reports.

(E)(II) Annual Facility Review by IACUC

Housing and Research Facility(ies) must be conducted at least once annually. If the IACUC conducted more than two facility reviews during the reporting period, please indicate so in the following table.

Date	Significant deficiencies identified in the annual inspection of facilities by IACUC (State "None" if no significant deficiencies identified)	Corrective Actions (State "NA" if no actions to be taken.)

Part F: Attachments

You may attach more information or details on the reviews or inspection of your Facility. Please label the attachments, if any.

(F) List of Tables or Attachments (if any)

S/N	Table / Attachment

Part G: [Other information]

You may wish to provide other information in the Annual Report.

Part H: Certification By CEO

(H) I certify that the above annual report is true and accurate and complies with such requirements as may be set out in the NACLAR Guidelines.

_____	_____
Name of CEO/IO & Designation/ Title	Signature of CEO/IO
_____	_____
Date signed	Animal Research Facility stamp