

学術研究 ABS ツールキット  
IV-C

遺伝資源利用研究のための  
「事前情報に基づく同意 (PIC)」 見本

ABS 学術対策チーム  
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はじめに

生物多様性条約第 15 条第 5 項に、「遺伝資源の取得の機会が与えられるためには、当該遺伝資源の提供国である締約国が別段の決定を行う場合を除くほか、事前の情報に基づく当該締約国の同意を必要とする。」と規定されている。この項目では、4つの重要な条件が入っている。一つは所得の機会（アクセス）許可が必要なのは遺伝資源が対象であり、生物資源ではないということである。次に、提供国が別段の決定を行う場合を除くため、提供国が別段の決定を行っているかどうか確認する必要がある。次に、事前の情報に基づくという決まりがあり、研究活動を行う前に同意をとることが必要である。最後に提供国の同意という点である。提供国の同意であって、提供国研究者の同意ではない。提供国の同意を与える機関は権威ある当局（Competent National Authority）と呼ばれている。一般的に同意のことを Prior Informed Consent (PIC と略) とよばれているが、多くの提供国の場合、許可 (Permit) を呼ぶ場合が多い。

同意を与える権威ある当局は、提供国の制度によって異なる。一か所が許可を与える国もあれば、多くの政府系機関に権限を移譲している場合もある。また研究内容によっても異なるので、提供国の情報提供機関 (National Focal Point) に問い合わせることが必要となる。

PIC 取得で課題となるのは申請書の中身と審査期間である。多くの申請書では、研究目的に従い、提供国内での活動のためのアクセス許可と遺伝資源の国外移動の許可、その他の許可（特許出願など）がある。したがって、目的に合わせて取得すべき PIC は異なる。提供国内で研究を行い、収集したサンプルを日本に移動させる場合は、アクセス許可と国外移動許可の2つが必要となる。また特許出願等を考える場合にはそのための許可も必要となる。

PIC は政府機関が与えるものなので、制度を作っている国では決まった標準書式を用いる場合が多い。許可申請に必要な書類として、研究計画書や素材移転契約書、利益配分契約書など共に、申請人の身元、能力、資金等を示す書類が必要になる場合がある。したがって、許可申請に必要な書類をよく精査する必要がある。インドでは許可を入手してから契約を行う順序になっているが、その他の国では、提供国内の当事者との契約が最初に行い、その契約書を申請書類に添付する形式が多い。

ここでは、PIC 制度を整備したいいくつかの国の発行している標準書式を掲載し

ている。制度を整備していない国の場合であっても、標準形式を用いることは有用であると考えられるが、まず提供国の情報提供機関で確認することが最も重要である。

PIC の具体的取得手順について、各国毎にまとめたクイックリファレンスチャートを作成する。そのため、本書では許可申請の書式のみをまとめている。今後提供国では制度整備が行われ、本書で記載した書式が最終版でなくなる可能性が高い。したがって、実際に PIC 許可申請する場合、本書の書式をそのまま使う前に、最新書式がないかチェックすることが必要である。

## 事前の情報に基づく合意（PIC）の取り方マニュアル

事前の情報に基づく合意（PIC）の取得について基本的方法を示す。PICは提供国によって異なる場合がある。また、詳細に取得方法を示していない場合もある。そのため、ここに掲載する基本方法を基に、それぞれの国の要求される事項に従って修正することが望ましい。

ここでは、南アフリカ共和国の規則である「Commencement of on Bioprospecting, Access and Benefi-sharing Regulations 2008」を参考として例示する。

### ステップ1 申請に必要な書類の準備

提供国で申請書類の形式が決まっている場合はそれに合わせる。

1. 研究計画書
2. PIC申請書  
バイオ探索研究申請単独またはバイオ探索研究と輸出許可申請の両方
3. 素材移転契約書
4. 利益配分契約書
5. 確認に必要な証拠書類  
遺伝資源に付随する伝統的知識および伝統的知識保持者
6. 申請人を同定するのに必要な証明書

## ステップ 1 - 1 遺伝資源情報の考察と整理

1. 利用する遺伝資源の同定で考察する項目
  - 遺伝資源か外来種か
  - ヒト由来か
  - ペット、鑑賞植物関連か
  - 国内各種法令のふくまれないこと
  - 素材の起源を示す証拠収集
2. 付随する伝統的知識の有無

## ステップ 1 - 2 研究内容の明確化

1. 非営利研究か営利研究の可能性は
2. 特許出願の可能性はあるか
3. 栽培化、繁殖、遺伝子解析などの可能性

## ステップ 1 - 3 研究計画書の作成

- 上記考察を含む通常の研究計画内容以外に必須となる項目
1. 研究成果はどのように予想するか、
  2. 特許化の可能性、商用研究への移行の可能性、利益見通しなどの明記
  3. 環境保全への影響、効果
  4. 提供国への利益配分の実態予想
  5. 報告の約束、報告の形態

## ステップ1－4 PIC 申請書類の作成

注意：提供国内でのみバイオ探索研究を行う場合はバイオ探索研究用の PIC 申請を行う。収集した試料を日本に持ち帰り、研究を行う場合はバイオ探索研究用 PIC と輸出許可証の両方を申請する。提供国の規則の確認を要する。

### 1. バイオ探索研究用の PIC 申請

法人名、申請者名、その他の申請者、その他の協力者、プロジェクト主催者、プロジェクト資金提供者

用いる遺伝資源情報

種類、量、採取地など

その他必要な認可書

提供者への情報開示状況

提供者情報

伝統的知識の有無（告示、文献情報）

伝統的知識開示状況（先住民等からの開示、文献・データベース情報）

伝統的知識保有者である先住民社会との利益配分契約

利益配分契約の紛争解決手段

プロジェクト提案

目的、利益、方法、期間、環境保護、報告義務、成果予想、

採取サンプルの破棄方法など

添付資料

参加者の身分証明書の写し

その他の認可書の写し

サイン入り素材移転契約書と利益配分契約書の写し

1. 遺伝資源輸出許可書作成
  - 輸入者情報
  - その他の規制書類（植物検疫、ワシントン条約規制等）
  - 輸出の理由
2. 素材移転契約書（MTA）完成
  - 事前に提供関係者と合意し、サインしたものが必要
3. 利益配分契約書（MAT）
  - 事前に提供関係者と合意し、サインしたものが必要
5. 確認に必要な証拠書類
  - 遺伝資源に付随する伝統的知識の内容を示した書類
  - 伝統的知識保持者から入手した PIC の写し
6. 申請人を同定するのに必要な証明書
  - パスポートの写し、大学在籍証明書、資金提供証明書など

## ステップ 2 申請書の提出

権威ある当局と呼ばれる政府省庁に提出する。権威ある当局は提供国の国内法令、規則等に記載されている。

## ステップ 3 受付

申請書に不備がないかチェックする  
受領書と申請受付ナンバーを発行

## ステップ 4 申請料の支払い



規定に従い申請料を支払う。申請料の額は規則参照。その時、申請受付ナンバーを記載する。

## ステップ5 委員会審査

申請料受領確認  
申請審査委員会へ送付  
(審査委員会は定期的開催されるが頻度は多くない)  
審査委員会で審査  
他省、あるいは該当地方当局への照会  
追加質問、資料請求

## ステップ6 決定

審査委員会の決定、PIC発行担当省（環境省が多い）への推薦状発行

## ステップ7 担当省審査

担当省での審議  
審査基準

- 提供者の権利が確保
- 素材移転契約が締結
- 利益配分契約が締結
- 申請研究が環境保全に貢献
- 申請研究が経済に貢献
- 申請研究が科学に貢献

## ステップ8 大臣決裁

担当大臣決裁  
認可証の発行  
許可条件の明示

## ステップ9 研究実施

PIC 認可証の受領、許可条件の確認  
遺伝資源利用計画の実行  
定期的な報告

フィリッピン標準研究提案

## RESEARCH PROPOSAL FORMAT

\_\_\_\_ Academic \_\_\_\_ Commercial

### 1. Project Title

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### 2. Project/Research Objectives

2.1 \_\_\_\_\_

2.2 \_\_\_\_\_

2.3 \_\_\_\_\_

### 3. Places of Collection

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Projected date of implementation and reason

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4. Bioresources and quantity (if possible) (indicate live or dead specimen specify if by-products or derivatives)

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5. Methodology (use separate sheet if necessary)

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6. Manner data to be gathered (recorded, photographed, video, collected, observed, etc.) and format (notes, specimens, photographs, etc.)

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7. Anticipated intermediate and final destination of bioresources, etc.

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8. How bioresources obtained are to be used initially (i.e. national collection) subsequently (e.g.) drug exploitation, field guide preparation, etc.)

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9. Description of funding support with budget (use separate sheet if necessary)

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10. Analysis of the research of foreseen impact on biological diversity.

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11. Detailed description of immediate compensation anticipated.

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12. Detailed description of long-term compensation anticipated.

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13. List of in-country entities likely to receive compensation enumerated in # 11 and reasons (logical and legal)

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## インド生物資源伝統的知識アクセス許可申請 FORM I

Application form for access to Biological resources and associated traditional knowledge

### Part A

#### 1. Full particulars of the applicant

Name:

Permanent address:

Address of the contact person / agent, if any, in India:

Profile of the organization (personal profile in case the applicant is an individual). Please attach relevant documents of authentication):

Nature of business:

Turnover of the organization in US\$:

#### 2. Details and specific information about nature of access sought and biological material and associated knowledge to be accessed

Identification (scientific name) of biological resources and its traditional use:

Geographical location of proposed collection:

Description / nature of traditional knowledge ( oral / documented):

Any identified individual / community holding the traditional knowledge:

Quantity of biological resources to be collected (give the schedule):

Time span in which the biological resources is proposed to be collected:

Name and number of person authorized by the company for making the selection:

The purpose for which the access is requested including the type and extent of research, commercial use being derived and expected to be derived from it:

Whether any collection of the resource endangers any component of biological diversity and the risks which may arise from the access:

#### 3. Details of any national institution which will participate in the Research and Development activities.

4. Primary destination of accessed resource and identity of the location where the R&D will be carried out.

5. The economic and other benefits including those arriving out of any IPR, patent obtained out of accessed biological resources and knowledge that are intended, or may accrue to the applicant or to the country that he/she belongs

6. The biotechnological, scientific, social or any other benefits obtained out of accessed biological resources and knowledge that are intended, or may accrue to the applicant or to the country that he/she belongs

7. Estimation of benefits, that would flow to India/ communities arising out of the use of accessed bioresources and traditional knowledge.

8. Proposed mechanism and arrangements for benefit sharing.

9. Any other information considered relevant.

## **Part B**

### **Declaration**

I/ we declare that:

Collection of proposed biological resources shall not adversely affect the sustainability of the resources;

Collection of proposed biological resources shall not entail any environmental impact;

Collection of proposed biological resources shall not pose any risk to ecosystems;

Collection of proposed biological resources shall not adversely affect the local communities;

I/we further declare the Information provided in the application form is true and correct and I /We shall be responsible for any incorrect / wrong information.

Place  
Signed

Date

Name

Title

## インド研究結果海外商用目的移転許可申請 FORM II

Application for seeking prior approval of National Biodiversity Authority for transferring the results of research to foreign nationals, companies, NRI`s, for commercial purposes.

### 1. Full particulars of the applicant

1. Name
2. Address:
3. Professional profile
4. Organizational affiliation (Please attach relevant documents of authentication):

### 2. Details of the results of research conducted

### 3. Details of the Biological resources and /or associated knowledge used in the research.

### 4. Geo-geographical location from where the biological resources used in the research are collected

### 5 Details of any traditional knowledge used in the research and any identified individual /community holding the traditional knowledge

### 6. Details of institution where R&D activities carried out.

### 7. Details of the individual / organization to whom the research results are intend to transfer.

### 8. Details of economic, biotechnological, scientific or any other benefits that are intended, or may accrue to the individual /organization due to commercialization of transferred research results.

### 9. Details of economic, biotechnological, scientific or any other benefits that are intended, or may accrue to the applicant seeking approval for transfer of results of research.



10. Details of any agreement or MOU between by the proposed recipient and applicant seeking approval for transfer of results of research.

**Declaration**

I/we declare the Information provided in the application form is true and correct and I /We shall be responsible for any incorrect / wrong information.

Signed

Place

Name

Date

Title

## インド知的財産権出願許可申請 FORM III

Application for seeking prior approval of National Biodiversity Authority for applying for Intellectual Property Right

### 1. Full particulars of the applicant

- i. Name
- ii. Address:
- iii. Professional profile
- iv. Organizational affiliation (Please attach relevant documents of authentication):

### 2. Details of the invention on which IPRs sought

### 3. Details of the Biological resources and /or associated knowledge used in the invention.

### 4. Geo-graphical location from where the biological resources used in the invention are collected

### 5. Details of any traditional knowledge used in the invention and any identified individual /community / holding the traditional knowledge

### 6. Details of institution where Research and Development activities carried out.

### 7. Details of economic, biotechnological, scientific or any other benefits that are intended, or may accrue to the applicant due commercialization of the invention.

## **Declaration**

I/we declare the Information provided in the application form is true and correct and I /We shall be responsible for any incorrect / wrong information.

Signed

Place

Name

Date

Title

## インド生物資源伝統的知識第三者移転許可申請 FORM IV

Application form for seeking approval of National Biodiversity Authority for third party transfer of the accessed Biological resources and associated traditional knowledge.

### 1. Full particulars of the applicant

- i. Name
- ii. Address:
- iii. Professional profile
- iv. Organizational affiliation (Please attach relevant documents of authentication):

### 2. Details of the biological material and traditional knowledge accessed.

### 3. Details of the access contract entered (Copy to be enclosed)

### 4. Details of the benefits and mechanism / arrangements for benefit sharing already implemented.

### 5. Full particulars of the third part to whom the accessed material / knowledge is intended to transfer.

### 6. The purpose of the intended third party transfer.

### 7. Details of economic, social, biotechnological, scientific or any other benefits that are intended, or may accrue to the third party due to transfer of accessed biological material and knowledge.

### 8. Details of any agreement to be entered between the applicant and the third party.

### 9. Estimation of benefits that would flow to India/ communities arising out of the third party transfer of accessed biological resources and traditional knowledge

10. Proposed mechanism and arrangements for benefit sharing arising out of the proposed third party transfer.

11. Any other relevant information

**Declaration**

I/we declare the Information provided in the application form is true and correct and I /We shall be responsible for any incorrect / wrong information.

Signed

Place

Name

Date

Title

ブータン王国のアクセス許可申請

### **Access/collection permit**

This access/collection permit is issued by the Ministry of Agriculture, Royal Government of Bhutan pursuant to the Biodiversity Act and the Rules.

1. Details of the Applicant

Name of the applicant (organization):

Nationality:

Permanent Address:

2. This permit shall be applicable within the area and for the biological resource specified below.

Collection sites/area:

Type of Biological resource/TK:

3. Duration of collection.

Start date:..... End date:.....

4. Reference No. of the letter of grant of access.

5. Validity of the permit shall be for the duration specified in number 3 and any collection activity beyond the stipulated duration shall be prohibited.

**Sign:.....**

**Seal:.....**

**Head of the National Biodiversity Center/Authorized Agency**

ブータン王国遺伝資源と関連する伝統的知識アクセス申請

## **Application for Access to Biological/biochemical resources and/or associated TK**

### **Part A: Description of the Applicant & Access Activity**

1. Details of the Applicant:

- a) Name:
- b) Permanent Address:
- c) Address of the contact person/agent if any in Bhutan:
- d) Profile of the organization (personal profile in case the applicant is an individual with relevant documents)
- e) Identity and responsibilities of all entities and individual persons who will be involved in the activities for which access authorization is requested.
- f) A valid PIC reference number (a copy of the valid PIC)

2. A description of the applicant(s) technical and financial capability to conduct the activities for which access authorization is requested.

- a) Annual turnover of the organization in Nu/US dollars.
- b) Equipments and laboratories relevant to the activity.
- c) Description of all previous biological/biochemical resource collection activities in Bhutan or elsewhere.
- d) Provide complete information about existing or proposed contracts between the applicant and any third party relating to the use of any information and products resulting from the access activity.

### **PART B: Project Proposal**

3. The project proposal shall among other things include the details and specific information about nature of access sought, and biological material and associated knowledge to be accessed.

- a) Identification (scientific name) of Biological resource and its use.
- b) Geographical location of proposed collection.
- c) Description/nature of traditional knowledge (oral/documentated)
- d) Any identified individual/community holding the traditional knowledge
- e) Quantity of biological resources to be collected with schedule.
- f) Provide information on the arrangements made within Bhutan to facilitate

the collection mission.

- g) Time span in which biological resources is proposed to be collected.
- h) Purpose for which access is requested including the type and extent of research, mechanism for sharing of results, commercial use being derived and expected to be derived from it and any other benefits anticipated.
- i) Whether any collection of the resource endangers any component of biological diversity and the risks which may arise from the access.
- j) Indicate the work plan and time frame within which the project is to be completed.
- k) The information included in the Access Application Form including Project/research proposal shall be in sufficient detail to enable the relevant authorities to make a decision whether to grant or refuse Access.

4. Provide information on:

- a) the primary destination of the resources and any expected subsequent destinations of the resources.
- b) intended distribution/sharing of the accessed resources and list actual or potential beneficiaries.

5. Details and responsibilities of collaborating national institution/s, scholars, scientists, students, farmers and farmer groups in Bhutan in the field mission and/or its follow-up activities.

6. The economic and other benefits including those resulting from any Intellectual Property rights (IPR) and patent obtained out of accessed biological resources and knowledge that are intended, or may accrue to the applicant or to the country that he/she belongs.

**PART C: DECLARATION**

I/we declare that the information in the application form is true and correct, and I/we shall be responsible for any incorrect/wrong information.

Signature -----Name

-----Title

-----Date

& place -----





ブータン王国生物資源及び関連する伝統的知識第三者移転許可申請

Application form for seeking approval for third party transfer of the accessed Biological resources and/or associated Traditional Knowledge.

1. Full particular of the applicant

(a) Name:

(b) Address:

(c) Professional profile:

(d) Organization affiliation (please attach relevant documents of authentication)

2. Details of the biological material and/or traditional knowledge

3. Details of the contract/user agreement entered (Copy to be enclosed)

4. Details of the benefits and mechanism/arrangements for benefit sharing already implemented.

5. Full particulars of the third party to whom the accessed materials and/or knowledge is intended to transfer.

6. The purpose of the intended third party transfer.

7. Details of economic, social, biotechnological, scientific or any other benefits that are intended, or may accrue to the third party due to transfer of accessed biological material and knowledge.

8. Details of any agreement to be entered between the applicant and the third party.

9. Estimation of benefits that would flow to Bhutan/communities arising out of the third party transfer of accessed biological resources/biochemical resources and/or associated traditional knowledge.

10. Proposed mechanism and arrangements for benefit sharing arising out of the proposed third party transfer.

11. Any other relevant information

**Declaration**

I/we declare the information provided in the application form is true and correct and I/we shall be responsible for any incorrect/wrong information.

Signature.....

Name .....

Title .....

Place : .....

Date : .....

ブータン王国知的財産権出願許可依頼申請

**Application for seeking prior approval for applying for intellectual Property Right**

1. Full particulars of the applicant

a) Name:

b) Address:

c) Professional profile:

d) Organizational affiliation (Please attach relevant documents of authentication)

2. Details of the invention on which IPRs are sought

3. Details of the Biological resources and/ or associated knowledge used in the invention

4. Geo-graphical location from where the biological resources used in the invention were collected.

5. Details of any traditional knowledge used in the invention and any identified individual/ community holding the traditional knowledge.

6. Details of institution where Research and Development activities carried out.

7. Details of economic, biotechnological, scientific or any other benefits that are intended, or may accrue to the applicant due commercialization of the invention.

**Declaration**

I/we declare the Information provided in the application form is true and correct and I/We shall responsible for any incorrect/ wrong information.

Signature.....

Name.....

Title.....

## Community Biodiversity Traditional Knowledge Documentation

### 1. Prior Informed Consent at Individual/Community Level

The ..... (name of the Community/individual) agrees to document traditional knowledge associated with biological/biochemical resources. Understanding that this will help in reducing the erosion of knowledge, and will preserve and protect the knowledge of the ...(community/individual) and the nation as a whole to be passed on to our future generations, we herein consent the Authorized Agency to document the TK in accordance with the procedure provided in the Rules.

Dzongkhag:.....

Geog:.....

Village.....

Village Representative Signature

(tshokpa):.....

Name of the Tshokpa.....

Authorized Government Agency Representative

Signature.....

Name of the Authorized Agency

representative.....

Seal of the government office applying for the consent letter

Date .....

マレーシアサラワク州生物資源アクセス収集研究許可申請

APPLICATION FOR A PERMIT\_ (Form SBC-RA/1)

Access, Collection and Research on Biological Resources in Sarawak

Application No.: \_\_\_\_\_

**THIS APPLICATION SHOULD BE TYPEWRITTEN**

**Project Title** :

**Name of Applicant** :

**Name of Researcher(s)** :

Please tick (/) which is applicable. *For further information please refer to Sarawak Biodiversity Regulation, 2004.*

<input type="checkbox"/>	Research on Biological Resources
<input type="checkbox"/>	Collection and Research on Protected Resources
<input type="checkbox"/>	Export on Biological and Protected Resources
<input type="checkbox"/>	Sale of Protected Resources
<input type="checkbox"/>	Research on Ethnobiological

**Note:**

- *Please ensure that all information is provided in order to avoid administrative delay.*
- *Please send completed research application form in BOTH soft and hard copies*

---

**SARAWAK BIODIVERSITY CENTRE**

KM20 Jalan Borneo Heights, Semengoh, Locked Bag 3032, 93990 Kuching,  
Sarawak, Malaysia

Tel: 60-82-610610 Fax: 60-82-611535

Email: [tk@sbc.org.my](mailto:tk@sbc.org.my) or [biosar@sbc.org.my](mailto:biosar@sbc.org.my)

---

**Part 1 ORGANISATION PROFILE**

*This part consists of information on the organization in which the applicant is affiliated to.*

*All fields **MUST** be completed by the applicant.*

*Commercial organizations are **ALSO** required to complete Attachment 1.*

Name of Organization			
Registered Address			
Correspondence Address			
Business Address (if applicable)			
Tel. No		Fax No.	
E-mail		Website	
Date of Establishment		Registration No.	
Summary of the organization's core business			
Contact person for further information the organization			

**Part 2 INFORMATION ON THE APPLICANT AND RESEARCHER(S)**

*This part must be completed by the **applicant** and **EACH researcher/team member** involved in the project.*

**PHOTOGRAPH**

Part 2a Personal Details					
Name				Sex	
Date of birth				Place of birth	
Citizenship				IC/Passport No.	
Correspondence Address					
Permanent Address					
Contact No. (Office) (Home) (Mobile)		Fax No.		E-mail	
Occupation					Designation
Organization/Institution					
Department					
Purpose of Research (Ph.D, M.Sc etc)					
Field of Study					
Role(s) of Applicant/Researcher					
Names of accompanying persons (accompanying members are not allowed to work or carry out research)		Citizenship	Age	Relationship	Occupation
Part 2b Supervision of Project					
Name of Research Supervisor/Advisor					
Address of Institution					
Occupation					Designatio



				n	
Area(s) of Expertise					
Contact No. (Office) (Home) (Mobile)		Fax No.		E-mail	
<b>Part 2c Researcher's Educational Details &amp; Professional Training</b>					
Names of Institutions		Year From To		Qualifications gained	Major fields of Study
<b>Part 2d Related Research Experience in Sarawak</b> <i>Provide brief description of related research experience conducted in Sarawak, if any.</i> <i>Please include dates, description and details on publications related.</i>					
<b>Part 2e Related Research Experience outside Sarawak</b> <i>Provide brief description of related research experience conducted outside Sarawak.</i> <i>Please include dates, description and publication, if any.</i>					
<b>Part 2f Area(s) of Expertise &amp; Special Qualifications</b>					
<b>Part 3 PROJECT INFORMATION</b> <i>This part needs to be completed only ONCE per application</i>					
<b>Part 3a Project Title</b>					
<b>Part 3b Project Classification</b> <i>e.g. botanical, zoological, microbiological, mycological, ethnobotanical, etc.</i>					



<b>Part 3g Research Methodology</b> <i>This part is to be completed according to the outline as provided in the form.</i>
(i) Type of biological resources to be collected in terms of species, parts of organism and quantities
(ii) Type of biological data to be collected
(iii) The time of executing or carrying out the collection activities
(iv) The place of executing or carrying out the collection activities
(v) The methods of executing or carrying out the collection activities
(vi) The local informants involved in the case of ethnobiological research
(vii) The use(s) of the collected biological resources
(viii) The plan for evaluation of the biological resources collected
(ix) The final destination of the biological resources collected
<b>Part 3h Institution(s)</b> <i>Name(s) and address(es) of the Institution(s) in which the research/analysis will take place.</i>
<b>Part 3i Expected Results and Programme Output</b>
<b>Part 3j The anticipated and final destination of the information resulting from the access, collection and research</b>
<b>Part 3k The anticipated uses of the information and end product</b>
<b>Part 3l Financial Sponsor</b> <i>The financial sponsor must disclaim and waive all rights to any discovery or invention which may result from this project and any other activity pertaining to any biological resources of Sarawak.</i> <i>Please complete <b>Attachment 2</b>.</i>

(i) Name

(ii) Address

(iii) Amount

(iv) Terms and conditions of sponsorship

**Part 3m Permission To Enter Project Location**

*Please specify the permit(s) number and attach a copy of the permit(s) from the relevant authority.*

*For ethno-biological research please attach a copy of the Letter of Consent from the community leader.*

**Part 3n Local Collaborator (If applicable)**

*Collaborator is required to monitor, advise, facilitate and participate in the implementation of the research activities. Please complete **Attachment 3**.*

**Statement by Applicant**

I confirm that the particulars given in this application are correct.

---

---

Date

Signature of Applicant

For Official Use	
Incomplete documentation	
Re-apply with amendments	
Action to be taken	
Comments/Remarks	

This application is approved/rejected by the Sarawak Biodiversity Council on \_\_\_\_\_.

\_\_\_\_\_  
*CEO/Secretary*  
*Sarawak Biodiversity Council*

Attachment 1

SHAREHOLDERS' PROFILE				
(You may use a separate sheet if the space below is insufficient)				
	Shareholder	Shareholder	Shareholder	Shareholder
Name				
Address				
Tel No.				
Fax No.				
Email address				
IC/Passport No.				
Citizenship				
Date of birth				
Place of birth				

Position in the Organization				
Appointment date				
Qualifications				
No. of Shares				

\* Please attach Audited Financial Report of the previous year.

**BOARD OF DIRECTORS' PROFILE**

(You may use a separate sheet if the space below is insufficient)

	Director	Director	Director	Director
Name				
Address				
Tel No.				
Fax No.				
Email address				
IC/Passport No.				
Citizenship				
Date of birth				
Place of birth				
Position in the Organization				
Appointment date				
Qualifications				
No. of Shares				

**KEY STAFF'S PROFILE**

(You may use a separate sheet if the space below is insufficient)

	Staff	Staff	Staff	Staff
Name				
Address				
Tel No.				
Fax No.				
Email address				
IC/Passport No.				
Race				
Citizenship				
Date of birth				
Place of birth				

Position in the Organization				
Appointment date				
Qualifications				
No. of Shares				

Attachment 2

**DECLARATION OF DISCLAIMER**

TO:

Chief Executive Officer

Sarawak Biodiversity Centre

Project

Title:

.....  
 .....

Researcher:

.....  
 .....

I/We the undersigned hereby declare that I/we waive and disclaim all rights and interests whatsoever, to any discovery or invention arising from research, using the biological resources of Sarawak, carried out or undertaken by the above named researcher.

Signed

by:



Witnessed by:

Signature: .....

Signature: .....

Name: .....

Name: .....

Designation: .....

Designation: .....

On behalf of:

.....

(Name and seal of the Institution)

Dated this on .....day of .....

Attachment 3a

**STATEMENT OF UNDERTAKING BY THE LOCAL  
COLLABORATOR(S)**

TO:

Chief Executive Officer  
Sarawak Biodiversity Centre

Project

Title:

.....  
.....

Researcher

(*Permit*

*Holder*): .....  
.....

I, the undersigned, of

.....

..... (*full address*), hereby declare that I agree to be the Local Collaborator in this research project and agree to abide and accept the responsibility as stipulated in the agreement to be signed between the researcher (permit holder) and the Sarawak Government. I also declare that I have obtained the approval of my institution to fulfill the obligations of

being a collaborator in this project (letter of approval from my institution is attached as attachment 4b)

Signed by:

Signature: .....

Name: .....

NRIC: .....

Institution: .....

.....  
.....  
.....

Witnessed by:

Signature:.....

Name:.....

NRIC: .....

Dated this on .....day of .....

Attachment 3b

***APPROVAL FROM INSTITUTION***

TO:

Chief Executive Officer

Sarawak Biodiversity Centre

Project

Title:

.....  
.....

Researcher

(*Permit*

*Holder*):

.....  
.....

This is to confirm that

.....  
..... (*institution*) has given approval for  
.....

... to be the local collaborator in this project and to make use of the facilities and resources of the institution in the discharge of his obligations as the Local Collaborator in this project.

Signed by:

Signature: .....

Name: .....

Designation: .....

On behalf of:

.....

(Name and seal of the Institution)

Dated this on ..... day of .....

## Research Application Form Guidelines

### Part 1 – Organization Profile

This part consists of information regarding the organization in which the applicant is affiliated to. All fields **MUST** be completed by the applicant.

Commercial organizations are **ALSO** required to complete *Attachment 1*.

### Part 2 – Information on the Applicant and Researcher(s)

This part needs to be completed by the *applicant* and *each researcher/team member* involved in the project.

- Part 2a – Personal details of applicant/researcher(s).
- Part 2b – Supervisor of the applicant/researcher(s).
- Part 2c – Applicant/Researcher's educational details & professional training.
- Part 2d – Brief description of related research experience conducted in Sarawak.

Please include dates, description and publication, if any.

- Part 2e – Brief description of related research experience conducted outside Sarawak.

Please include dates, description and publication, if any.

- Part 2f – Applicant/Researcher's expertise & special qualifications.

### Part 3 – Project information

This part needs to be completed only **ONCE** per application.

- Part 3a – Title of the proposed project.
- Part 3b – Classification of the project. (E.g. botanical, zoological, microbiological, mycological, ethnobotanical, etc).
- Part 3c – Abstract of the project.
- Part 3d – Background of the project.

- Part 3e – Objectives of the project.
- Part 3f – Proposed work schedule.  
Please include Gantt Chart with expected starting and ending dates of research activities, dates of submission of draft and final reports.
- Part 3g – Research Methodology.  
This part is to be completed according to the outline as provided in the form.
- Part 3h – Name and addresses of the Institution in which the research/analysis will take place.
- Part 3i – Expected results and programme output.
- Part 3j – The anticipated and final destination of the information resulting from the access, collection and research
- Part 3k – The anticipated uses of the information and end product.
- Part 3l – Financial sponsor.  
The financial sponsor must disclaim and waive all rights to any discovery or invention which may result from this project and any other activity pertaining to any biological resources of Sarawak.  
Please complete ***Attachment 2***.
- Part 3m – Permission to enter project location.  
Please specify the permit(s) number and attach the permit(s) from the relevant authority. For ethno-biological research please attach a Letter of Consent from the community leader.
- Part 3n – Local Collaborator (if applicable)\*.  
Local collaborator is required to monitor, advise, facilitate and participate in the implementation of the research activities. Please complete ***Attachment 3***.

アフリカユニオン伝統的知識同意契約  
Informed Consent

Project

\_\_\_\_\_  
I, \_\_\_\_\_, as a legally nominated representative of \_\_\_\_\_, have been fully informed of the project (insert the objectives of the project; the partners and nature of partnership, funding, outcomes and benefits; what the recipient / researcher expects from the provider, including any targets that may be envisaged; assurance of authenticity; etc.).  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Commitment of the Recipient Include the following information:

1. The research process emphasizing what the recipient will do in and/or for the community

2. Key principles that will be observed such as:

- a) Confidentiality;
- b) Respect and cultural sensitivity;
- c) Communication;
- d) Empowerment;
- e) Equity; and
- f) Indigenous guardianship.

3. Conditions Associated with the Project Include explanations of all conditions that may affect the Provider such as:

- a) Life of the agreement;
- b) Withdrawal;



- c) Amendment; and
- d) Renegotiation.

#### 4. Commitment of Representative of the Provider

The representative of the Provider must be made aware of his / her role and rights in the project. Commitment should be obtained on:

- a) Willingness to represent provider (community);
- b) Legal nomination of the representative;
- c) Freedom to withdraw from the project (in person) at any time without affecting the project; and
- d) Freedom to withdraw the community participation from the project, without jeopardizing future projects.

#### Signatures

Signature of TK holder / practitioner: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/20\_\_\_\_

Signature of TK recorder who obtained informed consent: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/20\_\_\_\_

Signature of witness: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/20\_\_\_\_

#### Annexures

Append documents mentioned in the agreement as appropriate.

#### **Project Information**

(Note: Care must be taken to avoid the indiscriminate use of technical jargon and, where appropriate, the document should be translated into local languages)

Title of Project:

\_\_\_\_\_

Synopsis of the Project (Clearly summarize what the project is about, the objectives, the partners, the outcome, benefits etc.)

Contribution of the Provider

Explain what the Recipient / Researcher expects from the Provider, including any targets that may be envisaged and assurance of authenticity.

Rights of Project Partners Include explanations on:

- a) Withdrawal;
- b) Amendment; and
- c) Renegotiation.

Additional Information

Invite the Provider to feel free to ask any questions about the project.

Contacts: Include contact details of key project personnel

ウガンダ共和国事前の情報に基づく同意申請

APPLICATION FOR PRIOR INFORMED CONSENT *Regulation 12(1)*

FIRST SCHEDULE

THE NATIONAL ENVIRONMENT (ACCESS TO GENETIC RESOURCES AND BENEFIT SHARING) REGULATIONS, 2005

APPLICATION FOR PRIOR INFORMED CONSENT

To\*: .....

..... (lead agency)

..... (Local Community)

.....(Owner)

I / we\*

.....

.....

of

.....

*(address)*

hereby apply for prior informed consent to enable me/us to apply to the competent authority to access genetic resources under your ownership / jurisdiction.

The prior informed consent is being applied for, for the genetic resources located at

.....

*(State location by local council, village, parish, sub-county and district)*

The prior informed consent is being applied for in respect of the following genetic resources:

.....

I / we\* declare that I am / we\* are willing to enter into an accessory agreement with you on terms and conditions acceptable to you.

I / we\* hereby further declare that to the best of my / our information the

information given in this application is correct and true and that the prior informed consent will only be used for applying to the competent authority to access genetic resources from Uganda

*Date:* .....

*Signature of applicant:*.....

**FOR OFFICIAL USE ONLY**

Application received on: .....

Guidelines for Access to Genetic Resources and Benefit Sharing 31

*dd – mm - yyyy*

*\*Delete whichever is not applicable*

南アフリカ共和国バイオ探索許可申請

**PART 1: APPLICATION FOR A BIOPROSPECTING PERMIT**

**COMMERCIALISATION PHASE OF BIOPROSPECTING PROJECT**

Notes on completing form:

1. If you are applying for a bioprospecting permit and you do not intend to export the relevant indigenous biological resources, you need only to complete part 1 of this form.
2. If you are applying for an integrated export and bioprospecting permit, you must complete parts 1 and 2 of this form.
3. If insufficient space is provided in this form, additional information may be included by way of Annexures.

**KIND OF PERMIT APPLIED FOR (Tick relevant box)**

Bioprospecting permit:

Integrated export and bioprospecting permit:

PART 1: APPLICATION FOR A BIOPROSPECTING PERMIT

APPLICANT (If applicant is a juristic person complete clause 1 – 5 below)

1. NAME OF INSTITUTION OR BODY:
2. IS THE JURISTIC BODY REGISTERED IN SOUTH AFRICA? Y/N
3. IF YES, PROVIDE THE SOUTH AFRICAN REGISTRATION NUMBER OF THE JURISTIC BODY:
4. IF NOT, IN WHICH COUNTRY IS THE JURISTIC BODY REGISTERED AND PROVIDE THE REFERENCE NUMBER:
5. CONTACT DETAILS OF THE JURISTIC BODY:

Name:

Tel No:

Fax No:

E-mail:

Postal Address:

Physical Address:

6. DETAILS OF CONTACT PERSON IN A BODY

Name of contact person:

Capacity:

Identity or Passport No: (Attach a certified copy)

Tel No:

Fax No:

E-mail:

Postal Address:

Physical Address:

(If applicant is a natural person complete clause 6 – 9 below)

7. APPLICATION BY A NATURAL PERSON

Name of applicant:

Identity or Passport No: (Attach a certified copy)

Tel No:

Fax No:

E-mail:

Postal Address:

Physical Address:

8. IS THE APPLICANT AFFILIATED TO A JURISTIC BODY?  
Y/N

9. IF YES, CONTACT DETAILS OF JURISTIC BODY:

Name of juristic body:

Contact person:

Tel No:

Fax No:

E-mail:

Postal Address:

Physical Address:

The rest of this part to be completed by all applicants

10. NAME AND CONTACT DETAILS OF OTHER COLLABORATORS:

A

Name:

Identity or Passport No: (Attach a certified copy)

Tel No:

Fax No:

E-mail:

Postal Address:

Physical Address:

B.

Name:

Identity or Passport No: (Attach a certified copy)

Tel No:

Fax No:

E-mail:

Postal Address:

Physical Address:

11. NAMES AND CONTACT DETAILS OF INDIVIDUALS CONDUCTING  
BIOPROSPECTING PROJECT:

A.

Name:

Identity or Passport No: (Attach a certified copy)

Tel No:

Fax No:

E-mail:

Postal Address:

Physical Address:

B.

Name:

Identity or Passport No: (Attach a certified copy)

Tel No:

Fax No:

E-mail:

Postal Address:

Physical Address:

12. ARE THERE INTERNATIONAL SPONSORS:

Y/N

13. IF YES, CONTACT DETAILS OF INTERNATIONAL SPONSORS

Name:

Contact Person:

Tel No:

Fax No:

E-mail:

Postal Address:

Physical Address:

13. ARE THERE SOUTH AFRICAN SPONSORS:

Y/N

15. IF YES, CONTACT DETAILS OF SOUTH AFRICAN SPONSORS

Name:

Contact Person:

Tel No:

Fax No:

E-mail:

Postal Address:

Physical Address:

INDIGENOUS BIOLOGICAL RESOURCES

16. SET OUT THE TYPE OF INDIGENOUS BIOLOGICAL RESOURCES FOR WHICH A PERMIT IS SOUGHT, THE FAMILY, GENUS OR SPECIES, THE PART OF THE ORGANISM TO BE COLLECTED, THE

QUANTITY OF THE RESOURCES TO BE COLLECTED OR OBTAINED AND THE SPECIFIC AREA OR SOURCE FROM WHICH EACH RESOURCE IS TO BE COLLECTED OR OBTAINED.

Type of organism	Family, genus or species (scientific and common names) (if possible)	Part of organism to be collected	Quantity	Full locality data (GIS readings if possible)
<i>Example:</i> Plant	<i>Aloe ferox</i>	Leaves	6 kg	....

PREVIOUS RESEARCH AND APPLICATIONS FOR PERMITS

17. IN RESPECT OF THE INDIGENOUS BIOLOGICAL RESOURCES SET OUT ABOVE, HAS ANY OTHER APPLICATION FOR A PERMIT IN TERMS OF THE ACT OR IN TERMS OF ANY OTHER LEGISLATION BEEN SUBMITTED, EITHER PREVIOUSLY OR SIMULTANEOUSLY WITH THIS APPLICATION? Y/N

18. IF YES.

Granted	Refused	Pending (Issuing authority's reference number)
---------	---------	--

19. IF GRANTED

Permit number	Issuing authority	Date of issue
---------------	-------------------	---------------

DISCLOSURE OF INFORMATION

20. HAS ALL MATERIAL INFORMATION BEEN DISCLOSED TO ANY PERSON, ORGAN OF STATE OR COMMUNITY PROVIDING OR GIVING ACCESS TO THE INDIGENOUS BIOLOGICAL RESOURCES AND TO ANY IDENTIFIED INDIGENOUS COMMUNITIES WITH TRADITIONAL KNOWLEDGE OR USE OF THE INDIGENOUS BIOLOGICAL RESOURCES?

Y/N

21. SUBSTANTIATE ANSWER ABOVE:

---



---

## STAKEHOLDERS

NOTE: If any person, organ of state or community is required to provide or give access to the indigenous biological resources, their consent must be obtained and a material transfer agreement (MTA) in the form of Annexure 7 and a benefit-sharing agreement (BSA) in the form of Annexure 8 must be attached to this application.

22. IDENTIFY THE PERSON, ORGAN OF STATE OR COMMUNITY WHOSE CONSENT IS REQUIRED AND IN EACH INSTANCE INDICATE IF A MTA AND A BSA HAVE BEEN CONCLUDED WITH THEM. THESE AGREEMENTS MUST BE ATTACHED TO THIS APPLICATION.

Access provider

MTA concluded and attached?

BSA concluded and attached?

NOTE: If any indigenous community/ies have been identified, a benefit-sharing agreement (BSA) in the form of Annexure 8 must be concluded with that/ those community/ies and must be attached to this application.

23. STEPS TAKEN TO IDENTIFY INDIGENOUS COMMUNITIES:

---

24. DESCRIPTION / NATURE OF TRADITIONAL KNOWLEDGE OR USE (ORAL / DOCUMENTED)

---

25. DESCRIPTION OF ANY INDIGENOUS COMMUNITIES IDENTIFIED AND IN EACH INSTANCE INDICATES IF A BSA HAS BEEN CONCLUDED WITH THEM AND IF THAT AGREEMENT IS ATTACHED TO THIS APPLICATION.

Indigenous community

BSA concluded?

BSA attached?

26. HAVE ANY AGREEMENTS BEEN CONCLUDED IN RELATION TO THE INDIGENOUS BIOLOGICAL RESOURCES WITH COLLABORATING PARTIES THAT ARE NOT STAKEHOLDERS IN TERMS OF THE ACT?

Yes

No

If yes, have those agreements been disclosed to-

Yes

No

Access provider

Knowledge holder / provider

27. Is any assistance required from issuing authority to conclude the necessary agreements?

Yes /No

If yes, specify nature of assistance and why.

PROJECT PROPOSAL (Attach)

28. A detailed project proposal must be attached to this application setting out the following –

28.1. The objectives of the bioprospecting project;

28.2. The benefits that may result from the project;

28.3. The proposed methodology;

28.4. The proposed time-frames (i.e. required period of validity of permit);

28.5 Any relevant environmental considerations including impacts of the collection of the indigenous biological resources and proposed steps to minimise or remedy those impacts;

28.6. Reporting processes;

28.7. Desired outcomes of the project; and

28.8. What will happen to the discarded/ wasted specimens at the end of the study?

29. FEES

Departmental Bank Account Pretoria

ABSA Bank South Africa

Account number: 1044240072 Branch code : 632005

ACCOUNT TYPE: CURRENT

Swift Account : ABSA ZAJJ CPT (OUTSIDE SA)

REFERENCE NUMBER: 00946420 & Depositors Details (i.e. your full name and/or company etc.)

R5 000 application fee paid

Yes /No

If yes (attach copy of invoice)

Signature of Applicant

Date

Capacity

ENDORSEMENT OF JURISTIC BODY, IF APPLICABLE

Name

Signature of duly authorized officer

Date

南アフリカバイオ探索研究標準輸出許可申請

**PART 2: APPLICATION FOR AN EXPORT PERMIT FOR THE PURPOSES  
OF BIOPROSPECTING**

An applicant completing this part must also complete and sign part 1

**1. RECIPIENT OF INDIGENOUS BIOLOGICAL RESOURCES BEING  
EXPORTED (IMPORTER)**

Name of recipient / importer:

Tel No:

Fax No:

E-mail:

Postal Address

Physical Address

**2. REQUIREMENTS OF OTHER LEGISLATION**

Name of Legislation

Reference number

Waybill numbers (where appropriate)

**3. PURPOSE OF EXPORT**

---

4. Benefits of intended bioprospecting to:

Yes

No

The conservation of biodiversity of South Africa

The economic development of South Africa

Any other matter that is in the public interest

**IF YES, PROVIDE DETAILS**

---

---

**5. FEES**

Departmental Bank Account Pretoria

ABSA Bank South Africa

Account number: 1044240072 Branch code : 632005

ACCOUNT TYPE: CURRENT

Swift Account : ABSA ZAJJ CPT ( OUDSIDE SA)

REFERENCE NUMBER: 00946420 & Depositors Details (i.e.  
your full name and/or company etc.)

**R5 200 application fee paid**

Yes

No

If yes (attach copy of invoice)

**Signature of Applicant**

**Date**

**Capacity**

**ENDORSEMENT OF JURISTIC BODY, IF APPLICABLE**

**Name Signature of duly authorized officer**

**Date**

カメルーンリンベ動植物園共同研究覚書 (PIC)

ELEMENTS OF AGREEMENTS/MEMORANDA OF UNDERSTANDING  
FOR COLLABORATIVE RESEARCH

LIMBE BOTANIC AND ZOOLOGICAL GARDENS (MOUNT CAMEROON  
BIODIVERSITY CENTRE)

[OCTOBER 2001]

Objective of Agreement for Collaborative Research

The objective of the Collaborative Research Agreements is to ensure that research is conducted in a collaborative manner, and where possible incorporates the research priorities and objectives of LBZG/MCBCC. Research should promote and assist in the conservation of biodiversity and sustainable use of its components, and should not cause damage to biodiversity. The guidelines and agreements seek to ensure that research is conducted in a manner respectful of local traditions and cultures, and that the informed consent of involved stakeholders - including LBZG/MCBCC, local communities, and the Government of Cameroon - is received prior to initiation of a research program, and that benefits are equitably shared.

This Agreement will be attached to the general *Limbe Botanic Garden Policy on Access to Genetic Resources and Benefit-Sharing*, which outlines the wider objectives and principles which all LBZG (MCBCC) Agreements are intended to serve. This Agreement is also intended to reflect the letter and spirit of the LBZG (MCBCC) *Research Guidelines*.

1. PRIOR INFORMED CONSENT

Prior to initiating research, researchers must submit an application to LBZG/MCBCC for approval for collaborative research. Researchers must also acquire the informed consent of relevant government ministries [MINREST and MINEF] and local communities (where applicable), as described in the Research Guidelines.

### 1.1 LBZG/MCBCC

Research application submitted to LBZG/MCBCC: \_\_\_\_\_  
[DATE]

Approved by LBZG/MCBCC: \_\_\_\_\_ [DATE]

### 1.2 GOVERNMENT

Assistance with government permits provided - YES/NO

Fees paid to LBZG/MCBCC for this service:

Government permits received by researcher

PERMIT	PERMIT #	DATE RECEIVED

### 1.3 LOCAL COMMUNITIES

If appropriate, consultations with local communities will take place in the following communities, in conjunction with LBZG/MCBCC staff, roughly according to the following agreed-upon schedule:

COMMUNITY	SCHEDULE FOR CONSULTATIONS


<b>2. THE RESEARCH PROCESS</b>
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While undertaking research, researchers are required to adhere to high standards of behavior, collecting practice, and benefit-sharing, as detailed in the Research Guidelines.

**2.1 Description of collections to be made, and agreed with LBZG/MCBCC:**

**2.2 Benefits to be shared during the research process**

**With LBZG/MCBCC**



<b>BENEFITS</b>	<b>SCHEDULE FOR DELIVERY</b>
INSTITUTIONAL OVERHEAD	

**With Local Communities (if applicable)**

<b>BENEFITS</b>	<b>SCHEDULE FOR DELIVERY</b>


### 2.3 LBZG/MCBCC contribution to research

Check as appropriate, and describe:

\_\_\_\_ Use of administrative infrastructure (computers, photocopiers, phone, etc.).

\_\_\_\_ Access to libraries, copies of publications, etc. held by staff.

\_\_\_\_ Briefings on previous research conducted in the area, ecology, history, and other areas relevant to the research process.

\_\_\_\_ Use of the nursery facilities

**DESCRIPTION OF USE AND RATES CHARGED**

\_\_\_\_ Use of the herbarium

**DESCRIPTION OF USE AND RATES CHARGED**

\_\_\_\_ Vehicles (as available)

**DESCRIPTION OF PROPOSED USE AND RATES CHARGED:**

\_\_\_\_ Staff

**DESCRIPTION OF PROPOSED COLLABORATION AND RATES CHARGED (may also elaborate in an attached document):**




**With Local Communities (if applicable)**

<b>BENEFITS</b>	<b>SCHEDULE FOR DELIVERY</b>

<b>4. REPORTING, MONITORING, AND EVALUATION</b>
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Researchers should update LBZG/MCBCC on the status of the research

process, data analysis, publication, and key findings according to an agreed upon schedule. Reports of 1-2 pages, providing an update on activities and any preliminary findings should be submitted every six months until final publications or reports are available.

First interim report (6 months after beginning research) is due on:

Second interim report (12 months after beginning research) is due on:

Third interim report (18 months after beginning research) is due on:

[continue with reporting every six months until final report and publications are available]

FINAL report is due on:

<b>5. TERM AND AMENDMENT OF THE RESEARCH AGREEMENT</b>
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The research agreement between \_\_\_\_\_ and LBZG/MCBCC will be in effect as of \_\_\_\_\_, and will remain in effect until\_\_\_\_\_.

The mechanism for resolving grievances is as follows: \_\_\_\_\_.  
Acceptable reasons for breaking this agreement include: \_\_\_\_\_,  
\_\_\_\_\_, \_\_\_\_\_.

During the course of the research process, the agreement between the researcher and LBZG/MCBCC may be amended through the following process: submission of written request from researcher to the [Research Coordinator], and through Research Coordinator the [Collaborative Research Committee].

## 6. CHOICE OF LAW

This agreement is governed by and shall be construed in accordance with Cameroon law.

### Declaration

I understand that by signing here I agree to comply with the conditions above, and those found in Annexes and attached documents (as detailed below).

Signed by:

[RESEARCHER,  
TITLE, INSTITUTION,  
LBZG/MCBCC] ADDRESS]

Date:

Signed by:

[DIRECTOR,

Date:

Signed by:  
[DEPARTMENT HEAD,  
LBZG/MCBCC]

Date:

Signed by:  
[POLICY UNIT  
COORDINATOR,  
LBZG/MCBCC]

Date:

**ATTACHED DOCUMENTS:**

- The LBZG/MCBCC *Policy on Access to Genetic Resources and Benefit-Sharing*
- Other agreements signed in addition to the Research Agreement (to be attached). Check as appropriate:
  - \_\_\_\_\_Agreement for the Supply of Biological Material for Non-Commercial Use
  - \_\_\_\_\_Agreement for the Acquisition of Biological Material for Non-Commercial Use
  - \_\_\_\_\_Agreement for the Supply of Duplicate Herbarium Specimens
  - \_\_\_\_\_Agreement on Conditions for Access to LBZG/MCBCC Databases
  - \_\_\_\_\_Agreement for the Loan of Herbarium Specimens
- Any agreements signed between the researcher and local communities, or description of verbal agreements reached (when available)
- Government permits (when available)
- Copy of the Research Application
- Copies of researcher's institutional policy, and professional society's codes of ethics and other research guidelines
- Copy of the Research Guidelines





ブラジル非商用研究用遺伝遺産アクセスと輸出標準許可申請

**FORMULÁRIO PARA SOLICITAÇÃO DE AUTORIZAÇÃO DE ACESSO E DE REMESSA DE AMOSTRA DE COMPONENTE DO PATRIMÔNIO GENÉTICO PARA PESQUISA CIENTÍFICA**

ESTE FORMULÁRIO NÃO SE APLICA A:

- a) atividades de bioprospecção;
- b) atividades que envolvam acesso ao conhecimento tradicional associado;
- c) solicitação de autorização especial de acesso e de remessa.

DOCUMENTOS QUE DEVEM SER ANEXADOS AO FORMULÁRIO:

- a) Documento que comprove a delegação de competência ao representante legal da instituição (ex: portaria ou ato de nomeação, estatuto ou regimento interno da instituição).
- b) Comprovação que a instituição requerente foi constituída sob as leis brasileiras (ex: Lei, decreto — geralmente citado no regimento interno — ou ata de criação da instituição).
- c) Comprovação que a instituição exerce atividades de pesquisa e desenvolvimento nas áreas biológicas e afins (ex: relatório de atividades da universidade, unidade ou departamento; produção científica, informações sobre participação em grupo de pesquisa cadastrado na Plataforma Lattes).
- d) Qualificação técnica da instituição para desempenho de atividades de coleta e remessa de amostra de componente do patrimônio genético (esta comprovação poderá ser dispensada, de acordo com o § 1º do Art. 8º do Decreto nº 4.946/2003)\*;
- e) Estrutura disponível para o manuseio de amostra de componente do Patrimônio Genético (esta comprovação poderá ser dispensada, de acordo com o § 1º do Art. 8º do Decreto nº 4.946/2003)<sup>1</sup>;
- f) Anuência prévia para realizar expedição de coleta de material biológico em áreas indígenas, comunidades locais, unidades de conservação, área de segurança nacional e águas jurisdicionais nos termos da Medida Provisória n.º 2.186-16/2001 e resoluções do Conselho de Gestão do Patrimônio Genético (CGEN) (a anuência por proprietários de áreas particulares será dispensada nos termos da Resolução nº 08/2003 do CGEN);

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<sup>1</sup> As instituições públicas, de ensino e pesquisa, estão dispensadas da comprovação dos itens “d” e “e”.

- g) Projeto de pesquisa que descreva a atividade de acesso ao componente do patrimônio genético, incluindo informação sobre o uso pretendido, na forma estabelecida no Decreto nº 4.946/2003;
- h) *Formulário de exportação*, quando envolver remessa para o exterior;
- i) *Termo de Transferência de Material (TTM)* ou *Termo de Responsabilidade para Transporte de Amostra de Componente do Patrimônio Genético (TRTM)*, quando estiver prevista remessa para o exterior.

## **I. DADOS DA INSTITUIÇÃO REQUERENTE**

Nome da Instituição:

Cadastro Nacional de Pessoa Jurídica (CNPJ):

Endereço:

Cidade:

Unidade da Federação (UF):

CEP:

Telefone(s):

Fax:

E-mail:

Nome do Representante Legal:

Documento de Identificação:

Órgão Emissor e UF:

Cadastro de Pessoa Física (CPF):

Cargo que ocupa:

Ato que delega competência ao representante legal (citar e anexar):

Endereço:

Cidade:

Unidade da Federação (UF):

CEP:

Telefone(s):

Fax:

E-mail:

Demais instituições participantes do projeto de pesquisa:

## **II. DADOS DO COORDENADOR DO PROJETO DE PESQUISA**

Nome

Cargo/Função:  
Cadastro de Pessoa Física (CPF):  
Documento de Identificação:  
Órgão Emissor – UF:  
Endereço comercial:  
Cidade: Unidade da Federação (UF):  
CEP:  
Telefone(s):  
Fax:  
E-mail:  
Instituto/Departamento:

### **III. DADOS RESUMIDOS DO PROJETO DE PESQUISA**

1. Título:
2. Objetivos:
3. Componentes do patrimônio genético a serem acessados (grupos taxonômicos) :  
Indicar previsão de coleta de espécie ameaçada de extinção ou de espécie de endemismo estrito (identificar as espécies):  
Localização da coleta (localidade ou região):  
Município(s):  
Unidade(s) da Federação (UF):  
Está prevista coleta de material zoológico em Unidades de Conservação?  
Tipos de amostras de material biológico a serem coletadas:  
Quantidade de amostras previstas ou esforço de coleta estimado (metodologia/tempo/área):  
Épocas previstas para a coleta:
4. Impacto previsto sobre as populações amostradas no caso de espécie ameaçada de extinção ou de espécie de endemismo estrito:
5. Identificação das instituições / unidades onde serão realizadas cada etapa do projeto com discriminação das respectivas estruturas:
6. Nome da instituição credenciada como fiel depositária onde será depositada a sub-amostra do componente do Patrimônio Genético:
7. Destino das amostras dos componentes do patrimônio genético a serem acessados (Identificar as instituições que receberão amostras do material coletado):

#### **A) NO BRASIL**

Instituição / Coleção:

Curador:

Endereço:

Cidade: Unidade da Federação (UF):

CEP:

Telefone(s):

Fax:

E-mail:

Observação:

#### **B) NO EXTERIOR**

Instituição/Coleção:

Curador:

Endereço:

Cidade: País: Código de área:

Telefone(s):

Fax:

E-mail:

Observação:

#### **IV. TERMO DE COMPROMISSO (PREENCHIMENTO OBRIGATÓRIO)**

A instituição requerente, acima qualificada, por meio de seu representante legalmente constituído, considerando o disposto da Convenção sobre Diversidade Biológica (CDB), na Medida Provisória n.º 2.186-16/2001, nos Decretos n.º 3.945/2001 e n.º 4.946/2003, e na Deliberação n.º 40 do Conselho de Gestão do Patrimônio Genético (CGEN), solicita ao Instituto Brasileiro do Meio Ambiente e dos Recursos Naturais Renováveis (Ibama) Autorização de Acesso e de Remessa de amostra de Componente do Patrimônio Genético, comprometendo-se a utilizar a(s) amostra(s) acessada(s), descritas neste formulário, de acordo com as seguintes condições:

1. A instituição requerente compromete-se a utilizar a(s) amostra(s) cujo acesso foi autorizado em estrita observância ao exposto no projeto de pesquisa apresentado;

2. Excepcionalmente, se por ocasião de expedição de coleta autorizada pelo Ibama, vier a ser identificado componente do patrimônio genético em área diferente daquela que consta da autorização obtida, a amostra poderá ser coletada desde que previamente seja obtida, quando couber, a anuência correspondente à nova área, na forma do § 9º do Art. 16 da Medida Provisória n.º 2.186-16/2001, devendo o requerente, na primeira oportunidade, encaminhar ao Ibama esta anuência prévia, para efeito de regularização de sua autorização;
3. Caso seja identificado potencial de uso econômico de produto ou processo, passível ou não de proteção intelectual, originado de amostra de componente do patrimônio genético acessado com base em autorização que não estabeleceu esta hipótese, a instituição requerente obriga-se a comunicar o fato ao CGEN ou ao Ibama, como previsto no art. 16, § 5º, da Medida Provisória n.º 2.186-16/2001;
4. A remessa de amostra obtida na forma acima identificada fica condicionada ao cumprimento das normas pertinentes;
5. A instituição requerente compromete-se a efetuar o depósito de sub-amostra em instituição credenciada como fiel depositária;
6. Elaborar e entregar, ao Ibama, relatório anual, a partir da data da autorização, e relatório final da pesquisa, com o conteúdo mínimo de: resumo das atividades executadas; descrição das coletas realizadas (localização georreferenciada, período); discriminação e quantificação do tipo de material coletado, bem como indicação de seu uso e destino; descrição dos resultados obtidos, cópia das publicações resultantes e cronograma das próximas atividades. A nãoentrega do primeiro relatório, até 90 dias do transcurso do período anual, e do segundo, até 180 dias da conclusão do projeto e/ou a constatação de conduta inadequada, provocará a imediata suspensão da autorização concedida.
7. O coordenador da pesquisa poderá requerer sigilo, quando justificado, sobre os dados apresentados neste(s) relatório(s);
8. Identificar a origem do material biológico em qualquer publicação advinda do estudo e utilização das amostras, mencionando o número do processo autuado pelo Ibama e o envio de um exemplar da publicação ao CGEN;
9. O descumprimento das condições estabelecidas neste Termo de Compromisso, na Medida Provisória n.º 2.186-16/2001, nos Decretos n.º 3.945/2001 e n.º 4.946/2003, sujeita o infrator às sanções previstas na

legislação vigente. De acordo:

\_\_\_\_\_, \_\_\_\_ de \_\_\_\_\_ de 200\_\_.

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(Assinatura do representante legal da instituição requerente)

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(Assinatura do coordenador do projeto de pesquisa)

ブラジル非商用研究用遺伝遺産アクセスと輸出特別許可申請

FORM FOR SPECIAL AUTHORIZATION REQUEST FOR ACCESS AND  
COMPONENT SAMPLE SHIPMENT OF GENETIC HERITAGE FOR  
SCIENTIFIC RESEARCH

ESTE FORMULÁRIO NÃO SE APLICA A:

- a) atividades de bioprospecção;
- b) atividades que envolvam acesso ao conhecimento tradicional associado;

**I. DADOS DA INSTITUIÇÃO REQUERENTE**

Nome da Instituição:

Cadastro Nacional de Pessoa Jurídica (CNPJ):

Endereço:

Cidade: Unidade da Federação:

CEP:

Telefone(s):

Fax:

E-mail:

Nome do Representante Legal:

Cargo / Função:

Ato que Delega Competência ao Representante Legal (anexar):

Cadastro de Pessoa Física (CPF):

Documento de Identificação Órgão Emissor / UF:

Endereço Comercial:

Cidade: Unidade da Federação: CEP:

Telefone(s):

Fax:

E-mail:

**DOCUMENTOS QUE DEVEM SER ANEXADOS AO FORMULÁRIO:**

a) Documento que comprove a delegação de competência ao representante legal da instituição

(ex: portaria ou ato de nomeação, estatuto ou regimento interno da instituição).

b) Comprovação que a instituição requerente foi constituída sob as leis brasileiras (ex: Lei, decreto — geralmente citado no regimento interno — ou

ata de criação da instituição).

c) Comprovação que a instituição exerce atividades de pesquisa e desenvolvimento nas áreas biológicas e afins (ex: relatório de atividades da universidade, unidade ou departamento; produção científica, informações sobre participação em grupo de pesquisa cadastrado na Plataforma Lattes).

d) Qualificação técnica da instituição para desempenho de atividades de coleta e remessa de amostra de componente do patrimônio genético (esta comprovação poderá ser dispensada, de acordo com o § 1º do Art. 8º do Decreto nº 4.946/2003)\*.

## **II. TERMO DE COMPROMISSO ASSINADO PELO REPRESENTANTE LEGAL DA INSTITUIÇÃO REQUERENTE**

A instituição requerente, acima qualificada, por meio de seu representante legalmente constituído, considerando o disposto da Convenção sobre Diversidade Biológica (CDB), na Medida Provisória n.º 2.186-16/2001, nos Decretos n.º 3.945/2001 e n.º 4.946/2003, e na Deliberação nº 40 do Conselho de Gestão do Patrimônio Genético (CGEN), solicita ao Instituto Brasileiro do Meio Ambiente e dos Recursos Naturais Renováveis (Ibama) Autorização Especial de Acesso e de Remessa de amostra de Componente do Patrimônio Genético, comprometendo-se a utilizar a(s) amostra(s) acessada(s), descritas nos formulários e projetos que integram o portfólio de projetos da instituição, de acordo com as seguintes condições:

1. A instituição requerente compromete-se a utilizar a(s) amostra(s) cujo acesso foi autorizado em estrita observância ao exposto nos projetos de pesquisa apresentados;
2. Excepcionalmente, se por ocasião de expedição de coleta autorizada pelo Ibama, vier a ser identificado componente do patrimônio genético em área diferente daquela que consta da autorização obtida, a amostra poderá ser coletada desde que previamente seja obtida, quando couber, a anuência correspondente à nova área, na forma do § 9º do Art. 16 da Medida Provisória n.º 2.186-16/2001, devendo o requerente, na primeira oportunidade, encaminhar ao Ibama esta anuência prévia, para efeito de regularização de sua autorização;
3. Caso seja identificado potencial de uso econômico de produto ou processo, passível ou não de proteção intelectual, originado de amostra de componente



do patrimônio genético acessado com base em autorização que não estabeleceu esta hipótese, a instituição requerente obriga-se a comunicar o fato ao CGEN ou ao Ibama, como previsto no art. 16, § 5º, da Medida Provisória nº 2.186-16/2001;

4. A remessa de amostra obtida na forma acima identificada fica condicionada ao cumprimento das normas pertinentes;
5. A instituição requerente compromete-se a efetuar o depósito de sub-amostra em instituição credenciada como fiel depositária;
6. Elaborar e entregar, ao Ibama, relatório anual, a partir da data da autorização, e relatório final da pesquisa, com o conteúdo mínimo de: resumo das atividades executadas; descrição das coletas realizadas (localização georreferenciada, período); discriminação e quantificação do tipo de material coletado, bem como indicação de seu uso e destino; descrição dos resultados obtidos, cópia das publicações resultantes e cronograma das próximas atividades. A não entrega do primeiro relatório, até 90 dias do transcurso do período anual, e do segundo, até 180 dias da conclusão do projeto e/ou a constatação de conduta inadequada, provocará a imediata suspensão da autorização concedida.
7. O coordenador da pesquisa poderá requerer sigilo, quando justificado, sobre os dados apresentados neste(s) relatório(s);
8. Identificar a origem do material biológico em qualquer publicação advinda do estudo e utilização das amostras, mencionando o número do processo autuado pelo Ibama e o envio de um exemplar da publicação ao CGEN;
9. O descumprimento das condições estabelecidas neste Termo de Compromisso, na Medida Provisória n.º 2.186-16/2001, nos Decretos n.º 3.945/2001 e n.º 4.946/2003, sujeita o infrator às sanções previstas na legislação vigente. De acordo:

\_\_\_\_\_, \_\_\_\_ de \_\_\_\_\_ de 200\_\_.

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(Assinatura do representante legal da instituição requerente)

### **III. DADOS DO COORDENADOR / ORIENTADOR DO(S) PROJETO(S) DE PESQUISA**

**(PREENCHER UM FORMULÁRIO PARA CADA PROJETO)**

Nome:

Cargo / Função:

Instituto / Departamento:

Cadastro de Pessoa Física (CPF):

Documento de Identificação: Órgão Emissor / UF:

Endereço comercial:

Cidade: Unidade da Federação:

CEP:

Telefone(s):

Fax:

E-mail:

**IV. DADOS DO PROJETO DE PESQUISA**

**(PREENCHER UM FORMULÁRIO PARA CADA PROJETO)**

Nome do(a) Coordenador(a) ( ) ou Orientador(a) ( ) (identificar a função e preencher os dois campos a seguir caso seja orientador):

Nome do(a) Aluno(a):

Nível do(a) Aluno(a):

( ) Estágio ( ) Iniciação Científica ( ) Aperfeiçoamento ( ) Mestrado ( )

Doutorado ( ) Outro:

Título do Projeto:

Objetivos:

Componentes do Patrimônio Genético a serem acessados (grupos taxonômicos) :

Indicar previsão de coleta de espécie ameaçada de extinção ou de espécie de endemismo estrito (identificar as espécies):

Indicar previsão de coleta em terra indígena, área ocupada por comunidade local ou unidades de conservação:

Localização da coleta (localidade ou região): Município: Unidade da Federação:

Tipos de amostras de material biológico a serem coletadas:

Quantidade de amostras previstas ou esforço de coleta estimado (metodologia/tempo/área):

Épocas previstas para a coleta:

Impacto previsto sobre as populações amostradas no caso de espécie ameaçada de extinção ou de espécie de endemismo estrito:

Se aplicável, informar demais instituições de pesquisa e/ou fomento participantes do projeto (especificar condições de participação e anexar cópia de documentos que formalizam tal participação):

Identificação das instituições / unidades onde serão realizadas cada etapa do projeto, com discriminação das respectivas estruturas e responsabilidades:

Nome da instituição credenciada como fiel depositária onde será depositada sub-amostra de Componente do Patrimônio Genético:

Destino das amostras de componentes do patrimônio genético a serem acessados (identificar as instituições que receberão amostras do material coletado – especificar se haverá transferência de responsabilidade sobre as amostras, da instituição remetente para a instituição destinatária):

#### **A) NO BRASIL**

Instituição / Coleção:

Nome do curador ou do responsável pela coleção:

Endereço

Cidade: Unidade da Federação (UF):

CEP:

Telefone(s):

Fax:

E-mail:

Observações:

#### **B) NO EXTERIOR**

Instituição / Coleção:

Nome do curador ou do responsável pela coleção:

Endereço:

Cidade: País: Código de área:

Telefone(s):

Fax:

E-mail:

Observações:

**ESTE FORMULÁRIO NÃO SE APLICA A:**

a) atividades de bioprospecção;

- b) atividades que envolvam acesso ao conhecimento tradicional associado;
- c) solicitação de autorização especial de acesso e de remessa.

#### DOCUMENTOS QUE DEVEM SER ANEXADOS AO FORMULÁRIO:

- a) Qualificação técnica da instituição para desempenho de atividades de coleta e remessa de amostra de componente do patrimônio genético (esta comprovação poderá ser dispensada, de acordo com o § 1º do Art. 8º do Decreto nº 4.946/2003)<sup>2</sup>;
- b) Estrutura disponível para o manuseio de amostra de componente do Patrimônio Genético (esta comprovação poderá ser dispensada, de acordo com o § 1º do Art. 8º do Decreto nº 4.946/2003);
- c) Anuência prévia para realizar expedição de coleta de material biológico em áreas indígenas, comunidades locais, unidades de conservação, área de segurança nacional e águas jurisdicionais nos termos da Medida Provisória n.º 2.186-16/2001 e resoluções do Conselho de Gestão do Patrimônio Genético (CGEN) (a anuência por proprietários de áreas particulares será dispensada nos termos da Resolução nº 08/2003 do CGEN);
- d) Projeto de pesquisa que descreva a atividade de acesso ao componente do patrimônio genético, incluindo informação sobre o uso pretendido, na forma estabelecida no Decreto nº 4.946/2003;
- e) *Formulário de exportação*, quando envolver remessa para o exterior;
- f) *Termo de Transferência de Material (TTM)* ou *Termo de Responsabilidade para Transporte de Amostra de Componente do Patrimônio Genético (TRTM)*, quando estiver prevista remessa para o exterior.

#### **V. TERMO DE COMPROMISSO ASSINADO PELO COORDENADOR DO PROJETO DE PESQUISA (PREENCHER UM FORMULÁRIO PARA CADA PROJETO)**

O coordenador do projeto de pesquisa, acima qualificado, considerando o disposto da Convenção sobre Diversidade Biológica (CDB), na Medida Provisória n.º 2.186-16/2001, nos Decretos n.º 3.945/2001 e n.º 4.946/2003, e na Deliberação nº 40 do Conselho de Gestão do Patrimônio Genético (CGEN), compromete-se a utilizar a(s) amostra(s) acessada(s), descritas neste

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<sup>2</sup> As instituições públicas, de ensino e pesquisa, estão dispensadas da comprovação dos itens “a” e “b”.

formulário, de acordo com as seguintes condições:

1. O coordenador do projeto de pesquisa compromete-se a utilizar a(s) amostra(s) cujo acesso foi autorizado em estrita observância ao exposto no projeto de pesquisa apresentado;
2. Excepcionalmente, se por ocasião de expedição de coleta autorizada pelo Ibama, vier a ser identificado componente do patrimônio genético em área diferente daquela que consta da autorização obtida, a amostra poderá ser coletada desde que previamente seja obtida, quando couber, a anuência correspondente à nova área, na forma do § 9º do Art. 16 da Medida Provisória n.º 2.186-16/2001, devendo o requerente, na primeira oportunidade, encaminhar ao Ibama esta anuência prévia, para efeito de regularização de sua autorização;
3. Caso seja identificado potencial de uso econômico de produto ou processo, passível ou não de proteção intelectual, originado de amostra de componente do patrimônio genético acessado com base em autorização que não estabeleceu esta hipótese, a instituição requerente obriga-se a comunicar o fato ao CGEN ou ao Ibama, como previsto no art. 16, § 5º, da Medida Provisória n.º 2.186-16/2001;
4. A remessa de amostra obtida na forma acima identificada fica condicionada ao cumprimento das normas pertinentes;
5. O coordenador do projeto de pesquisa compromete-se a efetuar o depósito de sub-amostra em instituição credenciada como fiel depositária;
6. Elaborar e entregar, ao Ibama, relatório anual, a partir da data da autorização, e relatório final da pesquisa, com o conteúdo mínimo de: resumo das atividades executadas; descrição das coletas realizadas (localização georreferenciada, período); discriminação e quantificação do tipo de material coletado, bem como indicação de seu uso e destino; descrição dos resultados obtidos, cópia das publicações resultantes e cronograma das próximas atividades. A não-entrega do primeiro relatório, até 90 dias do transcurso do período anual, e do segundo, até 180 dias da conclusão do projeto e/ou a constatação de conduta inadequada, provocará a imediata suspensão da autorização concedida.
7. O coordenador do projeto de pesquisa poderá requerer sigilo, quando justificado, sobre os dados apresentados neste(s) relatório(s);
8. Identificar a origem do material biológico em qualquer publicação advinda do estudo e utilização das amostras, mencionando o número do processo

atuado pelo Ibama e o envio de um exemplar da publicação ao CGEN;  
9. O descumprimento das condições estabelecidas neste Termo de  
Compromisso, na Medida Provisória n.º 2.186-16/2001, nos Decretos n.º  
3.945/2001 e n.º 4.946/2003, sujeita o infrator às sanções previstas na  
legislação vigente. De acordo:

\_\_\_\_\_, \_\_\_\_ de \_\_\_\_\_ de 200\_\_.

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(Assinatura do coordenador do projeto de pesquisa)

GEF プロジェクト事前情報に基づく伝統的知識アクセス承認 (PIC) 標準申請  
PRIOR INFORMED CONSENT AGREEMENT<sup>3</sup>

Dear Traditional Knowledge Holder(s),

The researcher(s)  
(name)  
and (name)  
and (name),  
from the Research Institution  
(name of institute),

intend to conduct a research project which involves collecting and using  
traditional knowledge and practices related to the use of crop diversity in  
your farm.

The research is described here:

Objectives.....  
Scope.....  
Purpose of the use of traditional  
knowledge.....

We would like to get your consent to collect and use the traditional  
knowledge and practices. With this purpose, please tick the appropriate  
boxes of the Agreement and sign in front of each of them.

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<sup>3</sup> <https://www.cbd.int/abs/doc/biodiversity-guidelines-en.PDF>

FOR INDIVIDUAL HOLDERS

• Can (Name of the Research Institution) use your traditional knowledge in its research activities? Yes No

• Can (Name of the Research Institution) share your contact details with those interested in your traditional knowledge/practice?  Yes  No

• Can (Name of the Research Institution) share your traditional knowledge with other individuals and institutions?  Yes  No

• Can (Name of the Research Institution) publish your traditional knowledge on the Internet/ a magazine or any other media?  Yes  No

• Should (Name of the Research Institution) include your name as the source of the traditional knowledge in any publication where such knowledge is mentioned or used?  Yes  No

• If Yes, to what extent can (Name of the Research Institution) share your traditional knowledge

Partial disclosure: only a summary

Full disclosure

• Would you like (Name of the Research Institution) to pursue further research on your traditional knowledge (if applicable)? If yes, please specify .....

• Would you like to be informed about how your traditional knowledge has been used by (Name of the Research Institution)?  Yes  No



## FOR A COMMUNITY

• Name of the community's authorized leader  
elected .....  
traditional.....

• Can (Name of the Research Institution) use the traditional knowledge of the community in its research activities?  Yes  No

• Can (Name of the Research Institution) share the address of the community with those interested?  Yes  No

• Can (Name of the Research Institution) share the community's traditional knowledge with other individuals and institutions?  Yes  No

• Can (Name of the Research Institution) publish the traditional knowledge on the Internet/in a magazine or any other media?  Yes  No

• Should (Name of the Research Institution) refer to the community as the source of the traditional knowledge in any publication in which such traditional knowledge is mentioned?  Yes  No

• If Yes, to what extent can (Name of the Research Institution) share the traditional knowledge?

Partial disclosure/summary

Full disclosure

To what extent is specific traditional knowledge/community knowledge known and / or practiced within or among the concerned communities?

Known to few

Known to many

Known widely

Practiced by few

Practiced widely

Practiced by many

• Should (Name of the Research Institution) inform the community about how its traditional knowledge has been used?  Yes  No

Declaration:

I/We have read this Prior Informed Consent Form carefully and have understood the implications of sharing my/our traditional knowledge in the context of the research project described above.

I/We have voluntarily decided to select the option/ options which I/we have ticked above.

I/We assure (Name of the Research Institution) that all the information given here is correct (true) to the best of my/our knowledge, understanding and belief.

Name and Address of the Community/Traditional Knowledge

Holder .....  
.....  
.....  
.....

Signature.....

Name and Address of (Name of the Research Institution)

Representative: .....

Signature.....

Date.....