

For office
use only

Next-Generation Sequencing (NGS) Submission Form

Date Requested:

SUBMITTER INFORMATION

Name
Company
Address
City State Zip
Phone
E-mail

OWNER INFORMATION

Name
Company
Address
City State Zip
Phone
E-mail

BILL TO ☐ Submitter ☐ Owner ☐ Other

☐ PO (list here)

☐ Affiliates (list here)

PREFERRED EMAIL ADDRESS(ES) FOR REPORTING:

☐ Submitter ☐ Owner

☐ Other(s) (list here)

A SUMMARY REPORT WILL BE SENT UPON COMPLETION. PLEASE CHECK THIS BOX IF YOU ALSO REQUIRE THE SEQUENCE (fasta) FILE:

☐ Yes, send the fasta file to the email address(es) noted above

SAMPLE INFORMATION

Species: ☐ Porcine ☐ Turkey ☐ Fish ☐ Bovine ☐ Other:

Number of samples submitted Farm/Site:

Sample type(s): ☐ Viral isolate ☐ Bacterial isolate ☐ Tissue homogenate ☐ Serum ☐ Feces ☐ Oral Fluids

☐ Other:

Sample ID(s), or attach a separate sheet:

Brief description of why sequencing is requested or goals (e.g. whole genome sequencing of specific pathogen, disease investigation, etc.):

Select the type of sequencing requested:

Description	Price*
<input type="checkbox"/> Whole genome sequencing of a particular pathogen (specify pathogen below) • Pathogen for whole genome sequencing: <input type="text"/>	\$364
<input type="checkbox"/> Whole genome sequencing of 15+ viral isolates	\$260
<input type="checkbox"/> RNA disease investigation	\$416
<input type="checkbox"/> DNA disease investigation	\$416
<input type="checkbox"/> Metagenomics (i.e. RNA + DNA disease investigation)	\$832
<input type="checkbox"/> Bacterial whole genome sequencing	\$249.60
<input type="checkbox"/> Analysis only (must supply a fastq file; all other NGS options already include analysis)	\$124.80

*PRICES SUBJECT TO CHANGE – PLEASE CHECK OUR WEBSITE TO CONFIRM CURRENT PRICING

Please include any other pertinent information such as clinical signs or previous test results that may aid in analysis: