

 <small>Medische Biobank Noord Nederland BV Chamber of Commerce number 59133708</small>	<h2>SAMPLE DISPOSE AGREEMENT</h2>	iDocs: 23819
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Project number	
Project title	
Name main applicant	
Type, number and volume of biomaterial	
Data release of biomaterials	
Date sending sample dispose agreement	

In accordance with the signed DMTA for this research project, the main applicant hereby declares that there is no residual biomaterial from the biomaterials released by Lifelines to the main applicant.

There are residual biomaterials from the biomaterials released by Lifelines:
 Yes
 No

In case there are residual biomaterials, the main applicant hereby confirms that all biomaterial are destroyed.

Date
.....

Main applicant
Name
.....

Signature
.....

Executive researcher or lab personnel
Name
.....

Signature
.....

Please send the completed form to research@lifelines.nl or to the project leader.