International Form

**BUDAPEST TREATY ON THE INTERNATIONAL RECOGNITION OF THE DEPOSIT OF MICROORGANISMS FOR THE PURPOSES OF PATENT PROCEDURE**

**INTERNATIONAL FORM**

- TO

- **VIABILITY STATEMENT**
  issued pursuant to Rule 10.2 by the INTERNATIONAL DEPOSITARY AUTHORITY identified on the following page

**NAME AND ADDRESS OF THE PARTY TO WHOM THE VIABILITY STATEMENT IS MADE**

<table>
<thead>
<tr>
<th>I. DEPOSITOR</th>
<th>II. IDENTIFICATION OF THE MICROORGANISM</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name:</td>
<td>Accession number given by the INTERNATIONAL DEPOSITARY AUTHORITY:</td>
</tr>
<tr>
<td>Address:</td>
<td>Date of the deposit or of the transfer ¹:</td>
</tr>
</tbody>
</table>

**III. VIABILITY STATEMENT**

The viability of the microorganism identified under II above was tested on ². On that date, the said microorganism was

- [ ] ³ viable
- [ ] ³ no longer viable

¹ Indicate the date of the original deposit or, where a new deposit or a transfer has been made, the most recent relevant date (date of the new deposit or date of the transfer).

² In the cases referred to in Rule 10.2(a)(ii) and (iii), refer to the most recent viability test.

³ Mark with a cross the applicable box.

Form BP/9 (first page) (01/01/2023)
IV. CONDITIONS UNDER WHICH THE VIABILITY TEST HAS BEEN PERFORMED ¹

V. INTERNATIONAL DEPOSITARY AUTHORITY

<table>
<thead>
<tr>
<th>Name and Address:</th>
<th>Signature(s) of person(s) having the power to represent the International Depositary Authority or of authorized official(s):</th>
</tr>
</thead>
<tbody>
<tr>
<td>E-mail Address:</td>
<td></td>
</tr>
<tr>
<td>Telephone No.:</td>
<td>Date:</td>
</tr>
</tbody>
</table>

¹ Fill in if the information has been requested and if the results of the test were negative.

² While such information is optional, it may facilitate subsequent communication between the Party to whom the viability statement is made and the International Depositary Authority.