



DEPARTMENT OF HEALTH and HUMAN SERVICES

PUBLIC HEALTH SERVICE
NATIONAL INSTITUTES OF HEALTH

FOR US POSTAL SERVICE DELIVERY:

Office of Laboratory Animal Welfare
Division of Assurances
6705 Rockledge Drive
RKL 1, Suite 360, MSC 7982
Bethesda, Maryland 20892-7982
Home Page: <http://grants.nih.gov/grants/olaw/olaw.htm>

FOR EXPRESS MAIL:

Office of Laboratory Animal Welfare
Division of Assurances
6705 Rockledge Drive, Suite 360
Bethesda, Maryland 20817
Telephone: (301) 496-7163
Facsimile: (301) 402-7065

Date: January 12, 2015

Reference: Animal Welfare Assurance
Approval Letter for #A3054-01

Horst Simon, Ph.D.
Berkeley Lab Deputy Director
Institutional Official
Lawrence Berkeley National Laboratory
1 Cyclotron Road, MS 50A4119
Berkeley, CA 94720

Dear Dr. Simon:

I am pleased to inform you that The Office of Laboratory Animal Welfare (OLAW) reviewed and approved the renewal of your institution's Animal Welfare Assurance (Assurance) that was submitted in compliance with the Public Health Service (PHS) Policy on Humane Care and Use of Laboratory Animals (Policy), as revised August 2002.

Your Assurance renewal, number **A3054-01**, became effective on **January 12, 2015** and expires on **December 31, 2018**. This Assurance supersedes all previously issued Assurances. ***Please include the Assurance number in all correspondence to OLAW.*** A copy of the Assurance signature page is enclosed.

The Assurance is a key document in defining the relationship of your Institution to the PHS. It sets forth the responsibilities and procedures of your Institution regarding the care and use of laboratory animals. Among the important elements of the Assurance, I would especially call your attention to the reporting requirements that are essential for continued compliance with the PHS Policy. Please note that a Report to OLAW is required at least once every 12 months. The reporting period is the calendar year. Reports, for the previous calendar year, are due **January 31**.

Sincerely,

Venita B. Thornton, DVM, MPH
Senior Assurance Officer
Office of Laboratory Animal Welfare

cc: IACUC Chairperson
Regulatory Compliance Officer / Administrator

VII. Institutional Endorsement and PHS Approval

A. Authorized Institutional Official

Name: Horst Simon, PhD

Title: Berkeley Lab Deputy Director

Name of Institution: Lawrence Berkeley National Laboratory

Address: *(street, city, state, country, postal code)*

Laboratory Directorate

Lawrence Berkeley National Laboratory

1 Cyclotron Road, MS 50A4119

Berkeley, CA 94720

Phone: 510/486-6100

Fax: 510/486-6720

E-mail: HDSimon@lbl.gov

Acting officially in an authorized capacity on behalf of this Institution and with an understanding of the Institution's responsibilities under this Assurance, I assure the humane care and use of animals as specified above.

Signature:



Date:

January 12, 2015

B. PHS Approving Official *(to be completed by OLAW)*

Venita B. Thornton, D.V.M., M.P.H.
Senior Assurance Officer, Division of Assurances
Office of Laboratory Animal Welfare (OLAW)
NIH/OD/OER
6705 Rockledge Drive
RKL 1, Suite 360-MSC 7982
Bethesda, Maryland 20892-7982
thorntov@od.nih.gov

Signature:



Date:

Jan. 12, 2015

Assurance Number:

A3054-01

Effective Date:

Jan 12, 2015

Expiration Date:

December 31, 2018