Booking Sheet / Enquiry for QuoteDroughtSpotter **CER/**s

|  |
| --- |
| **1. Customer Details** |
| **Family Name** of Lab Leader, Supervisor): |  | **Given Name:** |  |
| **Title:** |  | **Email address:** |  |
| **Phone:** |  | **Mobile or Home:** |  | **Facsimile:** |  |
| **Organisation:** |  | **A.B.N.** |  |
| **Department:** |  |
| **Physical Address:** Street / Suburb / State / Post Code / Country |  |
| **Postal Address:** PO Box / Suburb / State / Post Code / Country |  |
| ***Alternative Contact Person:*** |  |
| ***Email address:*** |  |
| ***Phone:*** |  | ***Mobile:*** |  | ***Facsimile:*** |  |
| **2. Source of Funding** |
| **Source of funding for this project** (e.g. ARC, GRDC)**:** |  |
| **Please specify percentage of funding source:** | Research: %  | Commercial: % |
| **Brief description of grant:** |  |
| **Collaborators on this project:** |  |
| **UoA Customers Only – Project Code:** | Bus.Unit | Account | Fund | Dept .Id. | Campus | Project Code |
|  |  |  |  |  |  |
| **3. Project description** |
| **I would like to use (please select):** | **1** DroughtSpotter CER only | **2** DroughtSpotter CERs (Twin setting) |
| Controlled Env. Room | Number of lines: | Number of treatments: | Reps: | = Total no. of plants: |
| DroughtSpotter CER - **1** |  |  |  |  |
| DroughtSpotter CER - **2** |  |  |  |  |
| **Brief description of project including treatment outline:**  |
|  |
| **DroughtSpotter and/or Greenhouse requirements:**  |
| **BEFORE** using the DroughtSpotter system/s, I require a standard greenhouse for: |  | days |
| The plants are grown on the DroughtSpotter system/s for a duration of: |  | days |
| **AFTER** using the DroughtSpotter system/s, I require a standard greenhouse for: |  | days |
| **4. Plant Maintenance (what are you growing / what are your needs regarding soil and pots?)** |
| **Who will grow the plants?** | Customer / Plant Accelerator Staff (please specify) |
| **Plants / crop:** |  | **Variety:** |  |
| **Number of plants to be grown:** |  | **No. of plants/pot:** |  |
| **Crop duration:** |  | **Flowering time:** |  |
| **Seed purity:** | tested  | not tested | good  | poor (seed cleaning required) |
| **Number of seeds provided:** |  | **Age of seeds:** |  |
| **Condition in which seeds were stored:** |  |
| **% viability of your seeds?** |  | If value cannot be provided, the reason for this must be given and an estimate of the expected viability must be provided. |
| **Pots**: | 150 mm (closed base) | 150 mm (with drainage holes & saucer) | 200 mm (with drainage holes & saucer) | 400 mm tall pots |
| **Other pots:** |  |
| **Blue frames required?** | Yes / No |
| **Soil** (please select)  | Cocopeat soil (PRC)  | UC Mix | Waikerie river sand | Peat/perlite mix for Arabidopsis |
| **Other soil** (please specify) |  |
| **Fertiliser:** |  |
| **Fertilising schedule:**(time of application and frequency) |  |
| **Other requirements / additional information:** (e.g. seed treatment, vernalisation, nutrient specifications, growth regulations, etc.).  |
|  I understand that pest and disease control will be carried out as required (no omissions). |
| **5. DroughtSpotter and other Greenhouse Use**  |
| **5.1. BEFORE** using the DroughtSpotter, I require a greenhouse. Details as follows: |
| **Duration in days:** |   | **Start date:** |  | **End date:** |  |
| **Preferred air-conditioning:** | evaporative / refrigerated / either | **GH size:** | **S** (~24m2 ) / **M** (~48m2) / **L** (~72m2) |
| **GH type:** | Standard / Rice | GH Room number (if known): |  |
| **Note regarding temperature:** If customers do not provide temperature information, theroom default settings will apply: **15C night / 22C day**. Precise temperature control will depend on room type. The system automatically sets a 24-hour SIN-shape temperature curve. |
| **Temperature (oC):** | Day:  | Night:  | **Lighting requirements:** |  |
| **Do you wish to do your own watering?**  | YES / NO (Additional costs apply for watering by Plant Accelerator staff) |
| **Watering:** | * To Field Capacity
* Other (please specify):
 |
| **Will your plants be arranged in a particular order?** | Yes / No |
| **5.2. DURING** **DroughtSpotter** system/se use, details as follows: |
| **Duration in days:** |  days | **Start date:** |  | **End date:** |  |
| **Project Design:**  | Please refer to attached DroughtSpotter layout and consult Trevor Garnett or Bettina Berger for consultation on project design. |
| **Settings in the CER/s** | DroughtSpotter CER - **1** | DroughtSpotter CER - **2** |
| Maximum day temperature setting/s (5°C - 50°C): |  |  |
| Minimum night temperature setting/s (5°C - 50°C): |  |  |
| Humidity setting (40% - 80%): |  |  |
| Variable wavelength LED setting (max. 1,000 µmol/m2/s): |  |  |
| Do you want to vary the LED wavelengths? (Please specify) |  |  |
| **5.3. AFTER** using the DroughtSpotter, I require a greenhouse as follows: |
| **Duration in days:** |   | **Start date:** |  | **End date:** |  |
| **Preferred air-conditioning:** | evaporative / refrigerated / either | **GH size:** | **S** (~24m2 ) / **M** (~48m2) / **L** (~72m2) |
| **GH type:** | Standard / Rice | GH Room number (if known): |  |
| **Note regarding temperature:** as per 5.1. above |
| **Temperature (oC):** | Day:  | Night:  | **Lighting requirements:** |  |
| **Do you wish to do your own watering?**  | YES / NO (Additional costs apply for watering by Plant Accelerator staff) |
| **Watering:** | * To Field Capacity
* Other (please specify):
 |
| **Will your plants be arranged in a particular order?** | Yes / No |
| **6. Access requirements**  |
| **Keys required:** | Yes / No | **Other people who will need access to the greenhouse are:** |
| **Family Name** | **Given Name** | **Email** | **Phone** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Other requirements / additional information:**   |
| **7. Are the Plants/Seeds Genetically Modified?** | No (go to item 8.) | Yes (please fill in details below) |
| **Please tick as appropriate:** |
| 🞎 | **A.** | Our NLRD includes The Plant Accelerator (Cert.3062/2010 and 3790/2014) as a facility and I have attached a copy for your records. | OGTR Id: |  |
| 🞎 | **B.**  | The Accelerator (Cert.3062/2010 and 3790/2014) was not originally listed as an approved facility in our NLRD. I have attached a copy of a) our NLRD, **and** b) a letter stating that we have sought and gained approval from our Institutional Biosafety Committee (IBC) to have Cert.3062/2010 and 3790/2014 added to our existing NLRD. | OGTR Id: |  |
| 🞎 | **C.**  | The Accelerator (Cert.3062/2010 and 3790/2014) was not originally listed in our NLRD. I have attached a copy of a) the approval of our NLRD with the OGTR identifier on it, and b) a letter stating that we have sought and gained approval from our Institutional Biosafety Committee (IBC) to have Cert.3062/2010 and 3790/2014 added to our existing NLRD. | OGTR Id: |  |
|  Copies of OGTR training of all users requiring access to the greenhouse will be provided. |
| **8. Other Services** |
| Harvesting / threshing: |  |
| Post seeds to my address: |  |
| Other services (please specify): |  |
| Seed storage at Plant Accelerator until: |  |
| PlantEye use (please specify): |  |

For questions about high-throughput phenotyping at The Plant Accelerator® please contact

* Trevor Garnett on 08-8313 1134 regarding project design
* Evi Guidolin on 08-8313 1137 regarding pricing and availability
* Paul Jenkins on 08-8313 0822 regarding temperature, lighting, humidity, shades
* Robin Hosking on 08-8313 0809 regarding horticultural needs (pots, soil, consumables)

**Please return the facility booking sheet by email to** Evi Guidolin

**Physical Layout of the Drought Spotter System**

