000026

FOI Request

Application for a Certification (Section 83) in – Redland City

COPY

Certification Holder	CSIRO
Certification App Number	Cert-2532
Date Application Received	16-10-2007
Current Status	Certified
Expiry Date	13-12-2012
PC Level / Facility Type	PC2 Laboratory
OGTR Facility Title	Rooms 219, 220, 221a and 221b, Molecular Genetics, Level 2, Main Building, CSIRO Marine and Atmospheric Research
Locality State Postcode	Cleveland QLD 4163
Registry File Number	2007/066754
Folio Numbers	2 to 14
Total Number of Pages	13

Australian Government
Department of Health and Ageing
Office of the Gene Technology Regulator

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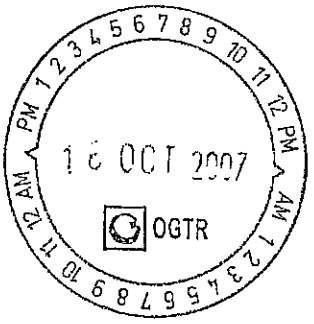
Application for the Certification of a Physical Containment Facility



Applicant Organisation Name: ...CSIRO Livestock Industries.....

Accreditation Number*: .....116/2003.....

* If organisation is accredited by the Gene Technology Regulator

Is this application accompanied by an application for a declaration that certain information be treated as **Confidential Commercial Information (CCI)** ?

Yes		No	x

Cert 2532/2007
CSIRO St Lucia

aken to complete this form:

Hours	Minutes

General Instructions

Application for certification

This application is for the certification of a facility to a specified containment level in accordance with Guidelines for the Certification of Physical Containment Facilities issued under the *Gene Technology Act 2000* (Commonwealth) (the Act). The Gene Technology Regulator (the Regulator) may require you to provide additional information. If this is necessary, the Regulator or the Regulator's delegate will notify you in writing of the additional information required. If the spaces provided are not sufficient to set out the requested information, you should attach a separate sheet for additional information and clearly mark on the attachment which section, part and question the information relates to. You should also indicate against the item that there is additional information attached, noting the attachment title/number and the page number(s).

Accuracy of information

Please answer all questions unless otherwise indicated. Please check that the information provided in this application is true and accurate. The Act provides for penalties to a person who knowingly gives information to the Regulator that is false or misleading.

Confidentiality

If you wish to make an application for a declaration that specifies information is Confidential Commercial Information (CCI) for the purposes of the Act, you must also complete the CCI application form available at <www.ogtr.gov.au> and place it at the end of this application.

Privacy

Any personal information is safeguarded by the *Privacy Act 1988*. This prevents the submitted personal information from being used for purposes other than assessing the certification application, or other circumstances specified by the *Gene Technology Act 2000* (Commonwealth). In certain circumstances information supplied as part of a certification application may, according to their specific needs, be given to the following:

- an officer or employee of the Department of Health and Ageing;
- an officer or employee of a State government agency or organisation;
- Courts, Tribunals and/or other Commonwealth agencies where it is an obligation under law to provide it;
- law enforcement authorities; and
- the relevant Minister.

Authorisation

Please ensure that if you are completing this application on behalf of the organisation, you hold the proper authority to submit this application on behalf of the organisation.

For further information

Please contact the OGTR by:

Telephone: 1 800 181 030
E-mail: ogtr@health.gov.au

The *Handbook on the Regulation of Gene Technology in Australia - A User's Guide to the Gene Technology Act 2000*, related legislation and other information are available at <www.ogtr.gov.au>.

The completed application can be lodged in person or as follows:

Mail: Office of the Gene Technology Regulator
MDP 54 PO Box 100
WODEN ACT 2606
Fax: (02) 6271 4202 (the original to follow in the mail)

Please retain a copy of your completed application. If you have not received a certification acknowledgement with the application identifier within two weeks, please e-mail ogtr@health.gov.au or telephone 1 800 181 030.

000029

Section 1:

Application Contact Details

Contact for this application

(Details of the person the OGTR can contact regarding this application)

Surname:		Preferred first name:	
Personal title: (eg Ms/Mr/Dr)		Job title:	
Phone number:		Fax number:	
Mobile number:		E-mail address:	
Street number and name:			
Town/City:		State:	
Postcode:		Country:	
Postal address: (if different)	same		

Applicant Organisation type

Status/type of Organisation

Please indicate below the legal entity type of the applicant organisation *eg.* university, public hospital, research body, body corporate under the *Corporations Act 2001*)

government research

Section 2:

Facility Details

000030

Level and type of containment facility

Please choose one containment level and one facility type from either of the following lists.

PC1		(Laboratory/Plant/Animal) Facility	
		Large Grazing Animal Facility	
		Large Scale Facility	

OR

PC2	X	Animal Facility	
PC3		Aquatic Organism Facility	
PC4		Arthropod Facility	
		Constant Temperature Room	
		Laboratory	X
		Large Scale Facility (PC2 only)	
		Plant Facility	

For further guidance ple
see the OGTR *Guide to*
Physical Containment
Levels and Facility Type
available on the OGTR
website <www.ogtr.gov.

OGTR Certification

Is this facility currently certified by the Regulator under another certification number (*eg.* by another organisation)?

Yes		No	X	Unknown	

If Yes, please indicate the OGTR Certification number and facility type and PC level:

Certification number	
Facility type and PC level (eg PC2 Laboratory)	

AQIS premises

Is this facility approved by AQIS as a Quarantine Approved Premises?

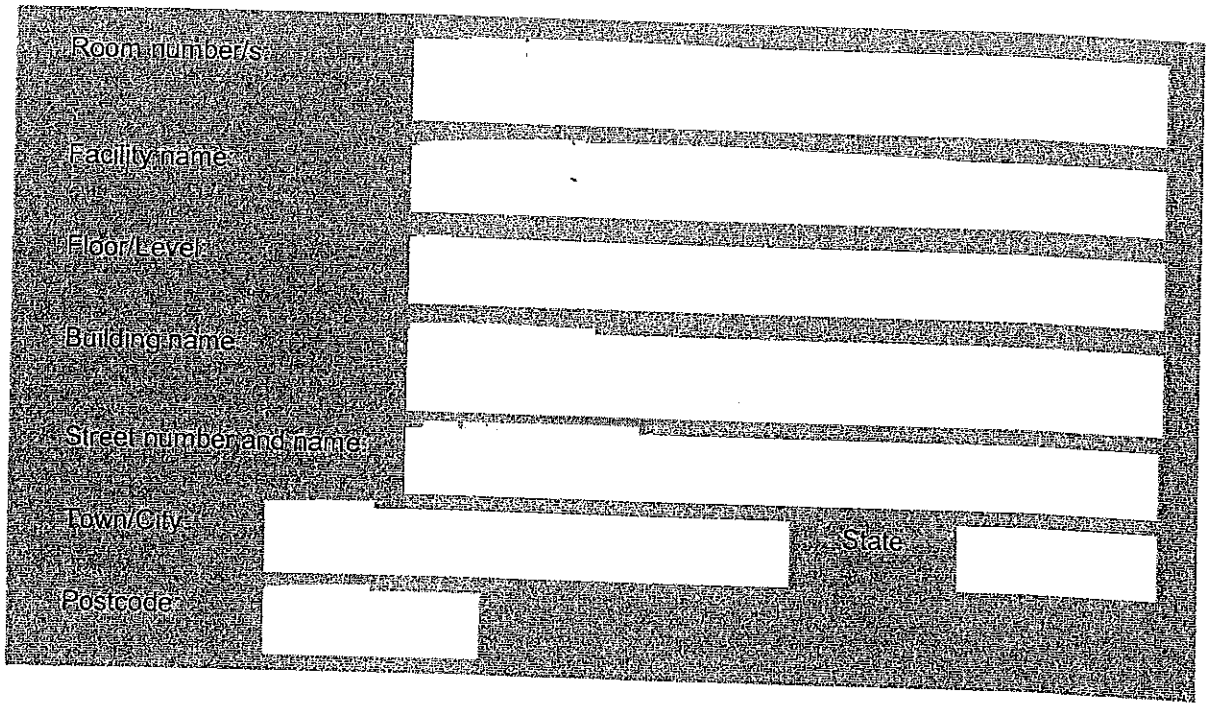
Yes		No	X

If Yes, please indicate the AQIS approval number and Quarantine Containment level:

AQIS approval number	
Quarantine Containment level (eg QC2, QC3)	

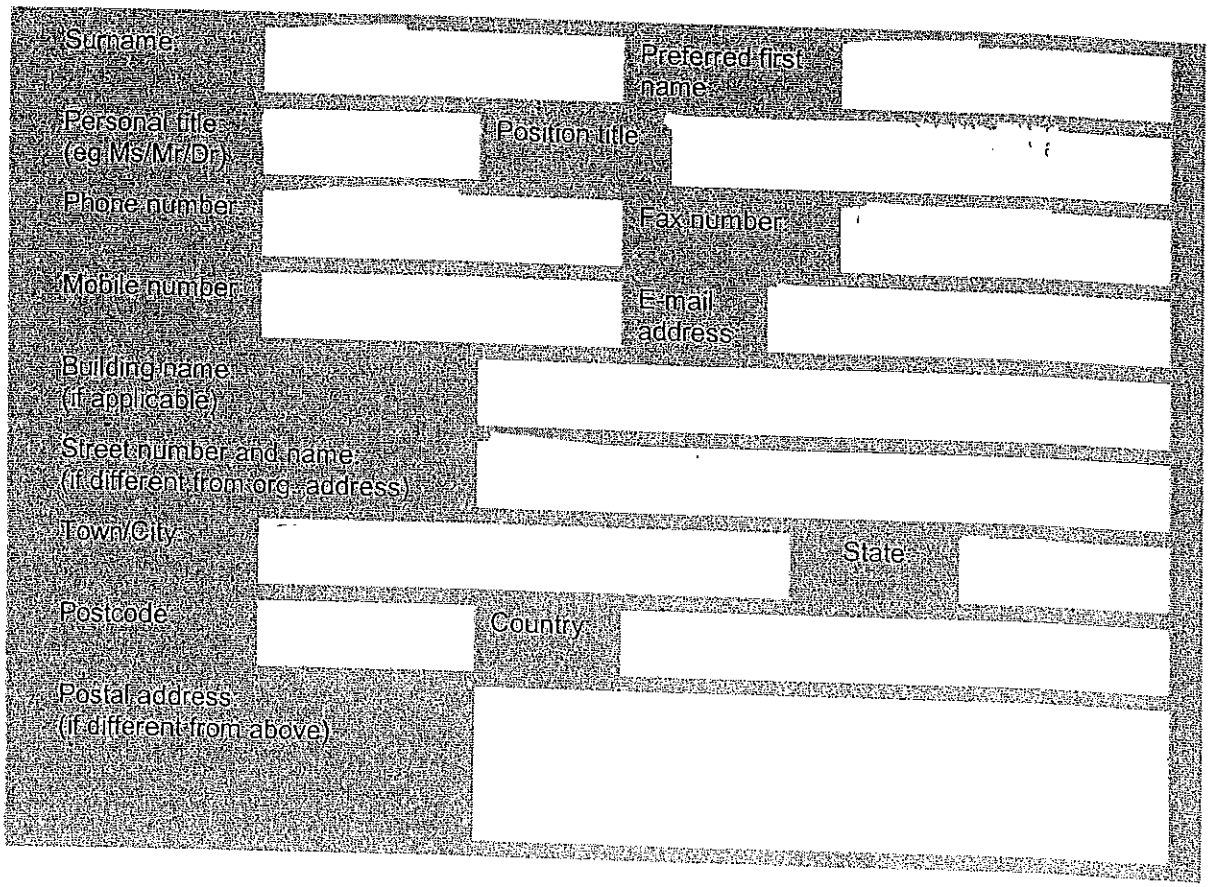
Facility name and address details

Please be specific as the facility name will appear on the Certification instrument, along with the room number/s and organisation name.



Facility contact person

This is the person, such as the Facility Manager, that the OGTR can contact for further information about the facility, both during the evaluation of this application and during the period of certification.



Facility ownership

Does the applicant own the facility?

Yes		No	X

If "No", can the applicant comply with any conditions which require:

(a) upkeep of the physical containment attributes of the facility?:

(b) upkeep of fittings required by the conditions of certification?:

(c) the capacity to exclude persons from the facility?:

Yes	X	No	

Facility equipment

Does the applicant own the equipment in the facility?

Yes		No	X

If "No", can the applicant comply with any conditions which require testing, upkeep and operation of the containment equipment?:

Yes	X	No	

Facility diagram

Please attach a floor-plan or sketch of the facility. A formal floor plan is preferred but a sketch map will suffice. At the minimum, the floor plan should show all doorways and doors in the facility, and the area surrounding the facility.

If certification of a whole building, or the majority of the building, is being sought, the entire floor plan will be required. If certification is sought for one or more rooms within a larger area, the plan or sketch must show the boundary of the facility (doors and walls) as well as any adjoining corridors and their doors. If there are any lifts or stairs in the facility or adjoining areas/corridors they must be indicated as they may have a significant bearing on the approval of the application.

When applying for certification of facilities that require anterooms (arthropod, animal and plant facilities, PC3/PC4 laboratories) the anteroom(s) must be clearly indicated. If an adjoining corridor or another certified or non-certified room is proposed to perform the function of an anteroom, the floor plan must show all doors, lifts, stairs, and any other relevant details that may compromise the functioning of the corridor or room as an anteroom.

Attachment _____YES - SEE ATTACH 1

Section 3:

Organisation Inspection Declaration/Checklist

The facility must be inspected by a person who has acquired through training, qualifications or experience, or a combination of these, the knowledge and skill enabling that person to assess compliance with the Requirements for certification of a physical containment facility. The organisation may choose to use the services of an IBC member, a contractor or an independent expert, an employee or some one else.

Applications for certification of a PC1 or PC2 facility

After inspection is complete, the person with the authority to sign on behalf of the applicant organisation must confirm the following:

- Has the facility been inspected by an appropriate person as outlined above ?

Yes [X] No [ ]

- Does the facility meet all requirements contained in the relevant PC1 or PC2 guidelines ?

Yes [X] No [ ]

- If 'no' please advise

- In what way does the facility fail to comply with the relevant guidelines and

- what strategies you suggest to enable certification of the facility

Note: A copy of the inspection checklist may be requested by the OGTR

Applications for certification of a PC1/PC2 Large Scale Facility, or any PC3 or PC4 facility:

A report of the inspection must be provided to support the application for these facility types. The report must address the extent of compliance with the Requirements for certification for the specific facility type/PC level being applied for. The OGTR will arrange an independent inspection of the facility in addition to the organisation's inspection.

Note: *The OGTR is willing to undertake joint inspections with the organisations inspectors and/or third party inspectors for AQIS. Please contact the OGTR well in advance of anticipated/proposed inspection dates to make arrangements for this to occur.*

Inspection checklists are available on the OGTR website <www.ogtr.gov.au>.

Only a single checklist should be used even if the facility is inspected by more than one person.

X Inspection Report/Checklist is at Attachment ____2_____

Attachments:

Is there any other information that may assist the OGTR in making a decision about this application?

Section 4:

000035

Declarations

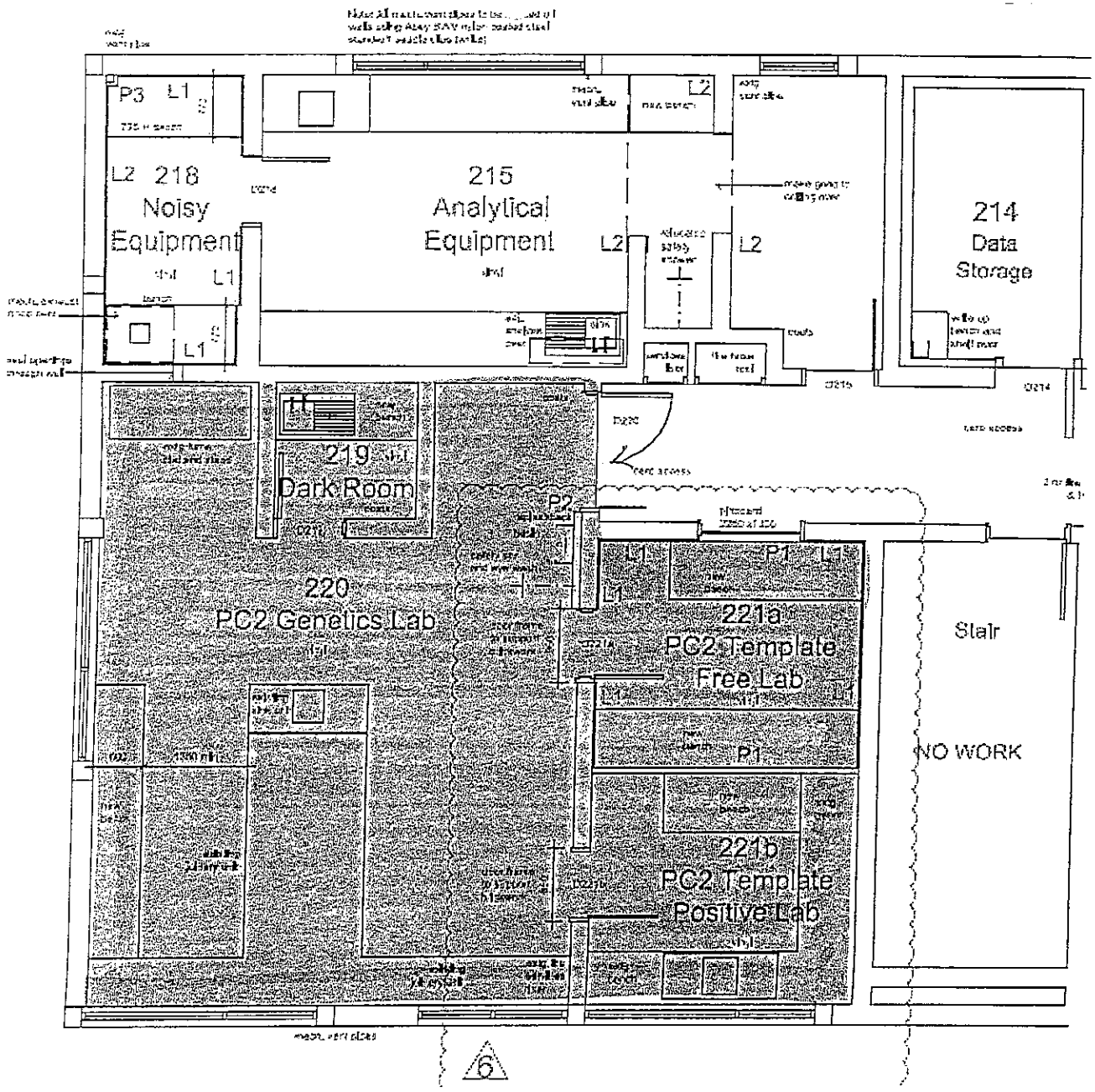
Declaration of the organisation submitting this application

This declaration must be completed and signed by the CEO (or equivalent), or a person with the authority to sign on behalf of the organisation.

I DECLARE THAT:

- I am duly authorised to sign this declaration;
- the information supplied on this form and any other attachment is true and correct; and
- I am aware that the making of a false or misleading statement may be punishable by imprisonment or a fine under the *Gene Technology Act 2000* or corresponding state law.

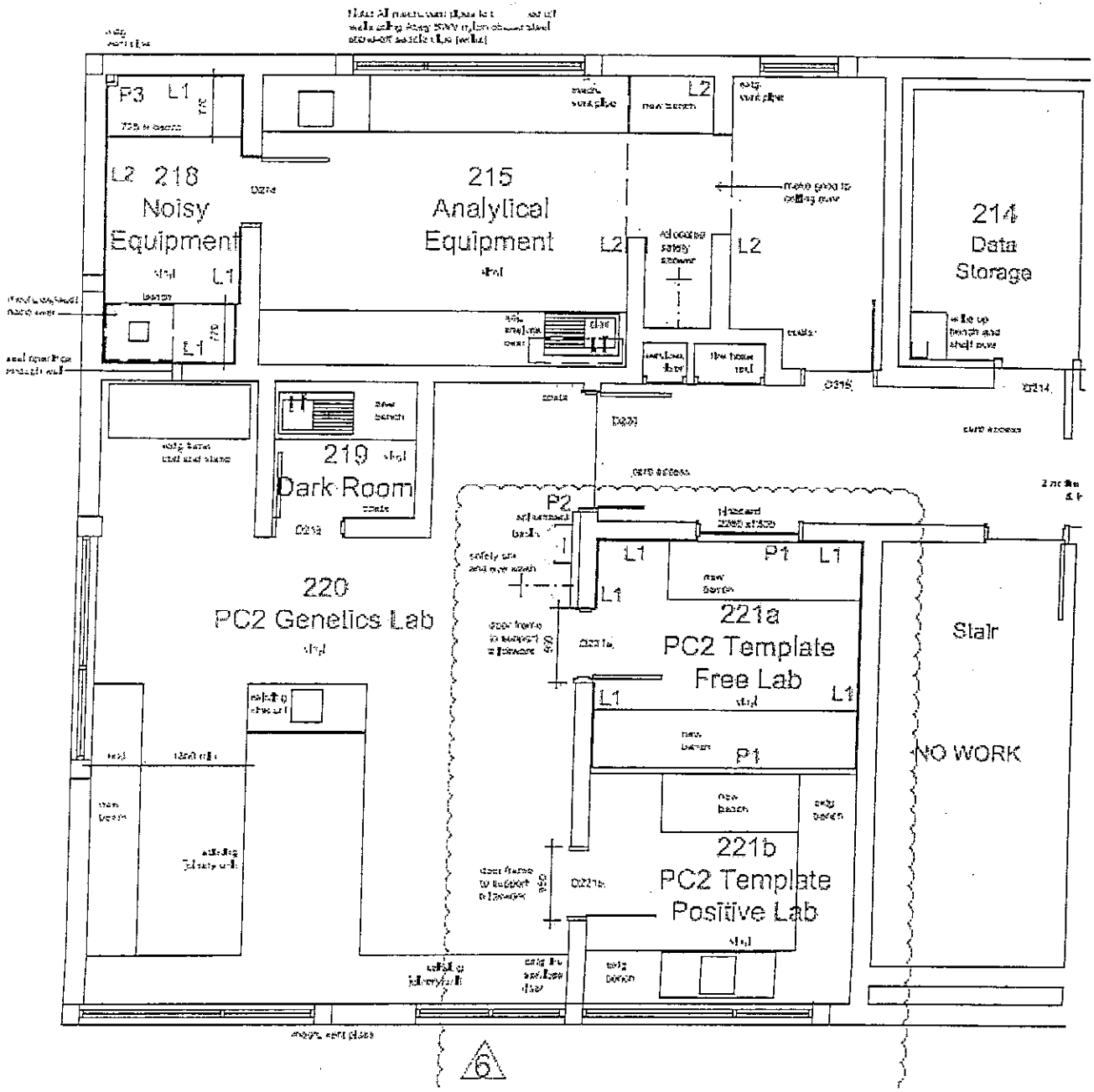
Printed name:		Signature:	
Job title:	"	Date:	6-Oct-07



Area covered by the application

Attachment One

000036


P3
L1
L2
218
Noisy
Equipment
215
Analytical
Equipment
214
Data
Storage
219
Dark Room
220
PC2 Genelics Lab
P2
P1
221a
PC2 Template
Free Lab
221b
PC2 Template
Positive Lab
Stair
NO WORK
6

Australian Government

Department of Health and Ageing
Office of the Gene Technology Regulator

Annual Inspection Checklist for PC2 Laboratories

Please Note

- The use of this checklist proforma is **not** mandatory in order to satisfy the annual inspection requirement of Condition 4 of part B the *Guidelines for Certification of a Physical Containment Level 2 Laboratory Version 3.1 - 1 July 2007* (the Guidelines). A completed copy of this proforma will be accepted by the OGTR as an annual inspection report for assessment of the facility's compliance for a certified facility under Condition 4, but the proforma is **not** intended to be the **only** acceptable format for the report. Rather, it is provided to assist those who find it convenient to use in the annual inspection of certified facilities for compliance with the conditions of certification (as outlined in Part B of the Guidelines).
- **Please do not send this report to the OGTR unless specifically requested.**

About Completing this Proforma

This proforma is based on the usual conditions of certification as detailed in the Gene Technology Regulator's *Guidelines for Certification of a Physical Containment Level 2 Laboratory Version 3.1 - 1 July 2007*.

- Where an exemption or variation to one or more conditions of certification has been approved by the Regulator (or delegate) then inspection must be made against the conditions as approved on the instrument of certification for the facility.
- In such cases you can make a note in the space provided and report on compliance against the variation to the usual condition that is detailed on the proforma.
- If answering 'No' to a condition for which there is no exemption or variation, please make a comment about the reason for the non-compliance and any actions being taken to rectify the situation. A request for a variation may be necessary.

Facility name: 220 Molecular Genetics	
Inspected by:	Date: 10-10-2007.
	OGTR Identifier number:

Facility and fitting conditions					
		Yes	No	N/A	Notes
Facility	Fully enclosed space bounded by walls, doors, windows, floors and ceilings	✓			
	Are there any significant structural changes that may affect containment?		✓		
Surfaces	Smooth, impermeable to water, cleanable and resistant to damage by any cleaning agents used	✓			
Open spaces under benches and equipment	Accessible for decontamination	✓			
Decontamination of hands	Hands free washbasin fitted ~~OR~~ AND	✓			
	Other means of decontamination of hands (eg: dispensers containing decontaminant solution)	✓			

		Yes	No	N/A	Notes
Eyewash	Equipment provided and maintained	✓			
Aerosol containment	PC2 GM dealings produce aerosols		✓		
	Aerosols are contained in a BSC or other equipment specifically approved in writing			✓	
	If BSC Class I or II used to contain the aerosols:				
	BSC inspected and tested at least once within last 12 months			✓	
	Certificate of test results and date of next test affixed to side of cabinet			✓	
Heat based decontamination equipment	Validated monthly	✓			
	Calibrated annually	✓			
Backflow prevention	**If installed at time of certification –** maintained and tested annually (if testable)			✓	
	Risks have altered and/or been reviewed			✓	
	Backflow prevention required to be installed due to new risks			✓	

General conditions					
		Yes	No	N/A	Notes
Ownership of facility	Certification holder owns or has authority to maintain facility and fittings	✓			
	If no – has owner failed to carry out or refused to carry out required maintenance				
Signs	OGTR signage and biohazard signs affixed to access door/s (signs are on or near access door/s and able to be clearly seen by persons entering facility)				Waiting for them i/facility Practices sign 1 x PC2 sign 1 x BIOHAZARD sign
Disinfectant	Supply suitable for use against the GMOs dealt with in the facility available	✓			
Pests	Control strategy in place	✓			
Obligations of the certification holder in respect to the users of the facility					
Authorised persons	Facility access restricted to authorised persons (as described in Part B, conditions 8 to 16, of the *Guidelines for Certification of Physical Containment Facilities PC2 Laboratory Version 3.1 – issued 1 July 2007*)	✓			
Behavioural Requirements					
Training	Persons conducting dealings with GMOs in the facility have been trained in the behavioural requirements (as listed in Part C of *Guidelines for Certification of Physical Containment Facilities PC2 Laboratory Version 3.1 – issued 1 July 2007*)	✓			

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005116

FOI Request

Application for a Certification (Section 83) in – Redland City

Certification Holder	Queensland Government Department of Employment, Economic Development and Innovation
Certification App Number	Cert-2622
Date Application Received	20-3-2008
Current Status	Certified
Expiry Date	1-6-2013
PC Level / Facility Type	PC2 Plant
OGTR Facility Title	Glasshouses 1, 2, 3, Processing Area, Bin Room, Chemical Room, Cold Room, Air Locks and Corridors, Ground Floor, Queensland Crop Development Facility
Locality State Postcode	Cleveland QLD 4163
Registry File Number	2008/016750
Folio Numbers	2 to 18
Total Number of Pages	17

Australian Government
Department of Health and Ageing
Office of the Gene Technology Regulator

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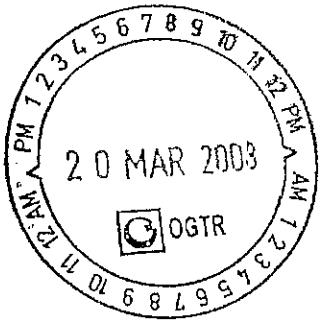
CC3217

Application for the Certification of a Physical Containment Facility



Applicant Organisation Name: Department of Primary Industries and Fisheries

Accreditation Number*: ACCR 008/2002

* If organisation is accredited by the Gene Technology Regulator

Is this application accompanied by an application for a declaration that certain information be treated as Confidential Commercial Information (CCI) ?

Yes ☐ No ✓

Cert-2622/2008
Queensland Government
Department of Primary Industries
and Fisheries

Time taken to complete thi

Hours Minutes

General Instructions

Application for certification

This application is for the certification of a facility to a specified containment level in accordance with Guidelines for the Certification of Physical Containment Facilities issued under the *Gene Technology Act 2000* (Commonwealth) (the Act). The Gene Technology Regulator (the Regulator) may require you to provide additional information. If this is necessary, the Regulator or the Regulator's delegate will notify you in writing of the additional information required. If the spaces provided are not sufficient to set out the requested information, you should attach a separate sheet for additional information and clearly mark on the attachment which section, part and question the information relates to. You should also indicate against the item that there is additional information attached, noting the attachment title/number and the page number(s).

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- an officer or employee of a State government agency or organisation;
- Courts, Tribunals and/or other Commonwealth agencies where it is an obligation under law to provide it;
- law enforcement authorities; and
- the relevant Minister.

Authorisation

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For further information

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Fax: (02) 6271 4202 (the original to follow in the mail)

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Section 1:

Application Contact Details

Contact for this application

(Details of the person the OGTR can contact regarding this application)

Surname:		Preferred first name:	
Personal title: (eg Ms/Mr/Dr)		Job title:	
Phone number:		Fax number:	
Mobile number:		E-mail address:	
Street number and name:			
Town/City:		State:	
Postcode:		Country:	Australia
Postal address: (if different)			

Applicant Organisation type

Status/type of Organisation

Please indicate below the legal entity type of the applicant organisation *eg.* university, public hospital, research body, body corporate under the *Corporations Act 2001*)

Queensland Government Department

000120 15

Section 2:

Facility Details

Level and type of containment facility

Please choose one containment level and one facility type from either of the following lists.

PC1	(Laboratory/Plant/Animal) Facility	
	Large Grazing Animal Facility	
	Large Scale Facility	

OR

PC2 ✓	Animal Facility	
PC3	Aquatic Organism Facility	
PC4	Arthropod Facility	
	Constant Temperature Room	
	Laboratory	
	Large Scale Facility (PC2 only)	
	Plant Facility	✓

For further guidance please see the OGTR *Guide to Physical Containment Levels and Facility Types*, available on the OGTR website <www.ogtr.gov.au>

OGTR Certification

Is this facility currently certified by the Regulator under another certification number (*eg.* by another organisation)?

Yes		No	✓	Unknown

If Yes, please indicate the OGTR Certification number and facility type and PC level:

Certification number:	
Facility type and PC level: (eg PC2 Laboratory)	

AQIS premises

Is this facility approved by AQIS as a Quarantine Approved Premises?

Yes		No	✓

If Yes, please indicate the AQIS approval number and Quarantine Containment level:

AQIS approval number:	
Quarantine Containment level: (eg QC2, QC3)	

Facility name and address details

Please be specific as the facility name will appear on the Certification instrument, along with the room number/s and organisation name.

Room number/s:

Facility name:

Floor/Level:

Building name:

Street number and name:

Town/City: State:

Postcode:

Facility contact person

This is the person, such as the Facility Manager, that the OGTR can contact for further information about the facility, both during the evaluation of this application and during the period of certification.

Surname: Preferred first name:

Personal title: (eg Ms/Mr/Dr) Position title:

Phone number: Fax number:

Mobile number: E-mail address:

Building name: (if applicable)

Street number and name: (if different from org. address)

Town/City: State:

Postcode: Country:

Postal address: (if different from above)

Facility ownership

Does the applicant own the facility?

Yes ✓ No

If "No", can the applicant comply with any conditions which require:

(a) upkeep of the physical containment attributes of the facility?:

(b) upkeep of fittings required by the conditions of certification?:

(c) the capacity to exclude persons from the facility?:

Yes No

Facility equipment

Does the applicant own the equipment in the facility?

Yes ✓ No

If "No", can the applicant comply with any conditions which require testing, upkeep and operation of the containment equipment?:

Yes No

Facility diagram

Please attach a floor-plan or sketch of the facility. A formal floor plan is preferred but a sketch map will suffice. At the minimum, the floor plan should show all doorways and doors in the facility, and the area surrounding the facility.

If certification of a whole building, or the majority of the building, is being sought, the entire floor plan will be required. If certification is sought for one or more rooms within a larger area, the plan or sketch must show the boundary of the facility (doors and walls) as well as any adjoining corridors and their doors. If there are any lifts or stairs in the facility or adjoining areas/corridors they must be indicated as they may have a significant bearing on the approval of the application.

When applying for certification of facilities that require anterooms (arthropod, animal and plant facilities, PC3/PC4 laboratories) the anteroom(s) must be clearly indicated. If an adjoining corridor or another certified or non-certified room is proposed to perform the function of an anteroom, the floor plan must show all doors, lifts, stairs, and any other relevant details that may compromise the functioning of the corridor or room as an anteroom.

Attachment 1

Section 3:

Organisation Inspection Declaration/Checklist

The facility must be inspected by a person who has acquired through training, qualifications or experience, or a combination of these, the knowledge and skill enabling that person to assess compliance with the Requirements for certification of a physical containment facility. The organisation may choose to use the services of an IBC member, a contractor or an independent expert, an employee or some one else.

Applications for certification of a PC1 or PC2 facility

After inspection is complete, the person with the authority to sign on behalf of the applicant organisation must confirm the following:

Has the facility been inspected by an appropriate person as outlined above ?

Yes ✓ No

Does the facility meet all requirements contained in the relevant PC1 or PC2 guidelines ?

Yes ✓ No

If "no" please advise:

- in what way does the facility fail to comply with the relevant guidelines; and
- what strategies you suggest to enable certification of the facility

Note: A copy of the inspection checklist may be requested by the OGTR

Applications for certification of a PC1/PC2 Large Scale Facility, or any PC3 or PC4 facility:

A report of the inspection must be provided to support the application for these facility types. The report must address the extent of compliance with the Requirements for certification for the specific facility type/PC level being applied for. The OGTR will arrange an independent inspection of the facility in addition to the organisation's inspection.

Note: *The OGTR is willing to undertake joint inspections with the organisations inspectors and/or third party inspectors for AQIS. Please contact the OGTR well in advance of anticipated/proposed inspection dates to make arrangements for this to occur.*

Inspection checklists are available on the OGTR website <www.ogtr.gov.au>.

Only a single checklist should be used even if the facility is inspected by more than one person.

☑ Inspection Report/Checklist is at Attachment 2

Attachments:

1. Plan of Facility
2. Inspection checklist

Is there any other information that may assist the OGTR in making a decision about this application?

Section 4:

Declarations

Declaration of the organisation submitting this application

This declaration must be completed and signed by the CEO (or equivalent), or a person with the authority to sign on behalf of the organisation.

I DECLARE THAT:

- I am duly authorised to sign this declaration;
- the information supplied on this form and any other attachment is true and correct; and
- I am aware that the making of a false or misleading statement may be punishable by imprisonment or a fine under the *Gene Technology Act 2000* or corresponding state law.

Printed name:

Signature:

Job title:

Date: 17/3/08

Australian Government
Department of Health and Ageing
Office of the Gene Technology Regulator

Annual Inspection Checklist for PC2 Plant Facility

Facility name: Queensland Crop Development PC2 Facility	
Inspected by:	Date: 12 March 2008
Signed:	OGTR Identifier number:

Facility and fitting conditions		Yes	No	N/A	Notes
Facility	Fully enclosed space bounded by walls, doors, windows, floors and ceilings, including any transparent sections	✓			
Boundaries	Maintained to be rigid, durable and suitable for the environmental conditions they are exposed to, and able to withstand expected wear and tear	✓			
	Transparent sections are made of glass, polycarbonate sheeting or similar durable material	✓			Twin Skin Polycarbonate sheeting
	Boundaries impact resistant or protected from impact	✓			Impact resistant
	Entry of surface run off water prevented	✓			The concrete surround is below the floor level of the facility.

		Yes	No	N/A	Notes
Anteroom	Facility has an anteroom and entry to the facility is via the anteroom	✓			
	If dealings have the potential to be disseminated by arthropods – anteroom has strategies in place to prevent entry and exit of arthropods.	✓			A sticky pest strip is located in the anteroom of the facility.
Decontamination of hands	Washbasin or other means of hand decontamination present.	✓			A hands-free washbasin is present in the anteroom.
Laboratory Coats	Are there designated hanging provisions for protective clothing available within the facility?	✓			
Drainage exits	Fitted with barriers to prevent arthropods, animals or GM plants or GM propagative plant material entering or escaping via the drains	✓			Stainless steel mesh cover the drainage points.
Facility alterations	Are there any significant structural changes that may affect containment?		✓		
Dealings involving GM micro-organisms (these conditions must also be met if any of the dealings in the facility involve GM micro organisms)					
Surfaces	Smooth, impermeable to water, cleanable and resistant to damage by any cleaning agents used in the facility. Includes walls, floor, ceiling, benches and furniture.	✓			Dealings do not involve GM micro-organisms.
Openings	Are openings in the walls and ceilings screened with fine mesh and of a material strong enough to withstand the airflow load, remain undamaged with regular cleaning, and resist corrosion and attack by insects?	✓			Dealings do not involve GM micro-organisms.

		Yes	No	N/A	Notes
Open spaces under benches and equipment	Accessible for decontamination	✓			Dealings do not involve GM micro-organisms.
Drainage exits	Fitted with liquid traps that are permanently filled with appropriate decontaminant		✓		Dealings do not involve GM micro-organisms.
	Liquid entering drains contained and treated as waste	✓			Dealings do not involve GM micro-organisms.
Aerosol containment	PC2 GM dealings produce aerosols			✓	
	Aerosols are contained in a BSC or other equipment specifically approved in writing			✓	
	If BSC Class I or II used to contain the aerosols:				
	BSC inspected and tested at least once within last 12 months			✓	
	Certificate of test results and date of next test affixed to side of cabinet			✓	
Heat based decontamination equipment	Validated monthly	✓			The autoclave is located in the ante-room of the facility. No checks are recorded as it is a new installation.
	Calibrated annually	✓			Commissioned 6 Mar 08.
Backflow prevention	**If installed at time of certification –** maintained and tested annually (if testable)	✓			Backflow prevention is installed and will be tested annually. Last test 16 Oct 07.
	Risks have been altered and/or been reviewed			✓	

General Conditions					
		Yes	No	N/A	Notes
Ownership of facility	Certification holder owns or has authority to maintain facility and fittings	✓			
	If no – has owner not carried out or refused to carry out required maintenance			✓	
Signs	OGTR signage and biohazard signs affixed to access door/s (signs are on or near access door/s and able to be clearly seen by persons entering facility)		✓		OGTR and biohazard signage are required for the two entrances to the facility.
Disinfectant	Supply suitable for use against the GMOs dealt with in the facility available.			✓	GM plants only.
Spills and Unintentional Release	Are procedures in place to both decontaminate and report any unintentional release of GMOs from the facility, or significant spills within the facility, to the Regulator as soon as practicable?	✓			Facility Manual Section 8.
Pests	Control strategy in place.	✓			The facility manager is responsible for regular inspection of pests, and treatment where necessary as outlined in the facility manual.
Obligations of the certification holder in respect to the users of the facility					
Authorised persons	Facility access restricted to authorised persons (as described in Part B, conditions 8 to 16, of the *Guidelines for Certification of Physical Containment Facilities PC2 Plant Facility Version 3.1 – issued 1 July 2007*)	✓			The facility is locked when not in use, and entry is only approved for authorised personnel.
Training	Persons conducting dealings with GMOs in the facility have been trained in the behavioural requirements (as listed in Part C of *Guidelines for Certification of Physical Containment Facilities PC2 Plant Facility Version 3.1 – issued 1 July 2007)*		✓		All staff appointed to work in the facility will receive training in both facility SOPs and the specifics of dealings, and also OGTR requirements.

Behavioural Requirements					
		Yes	No	N/A	Notes
Protective Clothing	Is protective clothing, to protect the front of the body, worn by all persons performing procedures in the facility?	✓			
	Is protective clothing removed, and hands decontaminated before leaving the facility?	✓			
Decontamination	Are all GMOs, organisms infected by GMOs, equipment or protective clothing contaminated with GMOs, and liquid and solid waste containing GMOs, decontaminated by steam sterilisation (autoclaving), chemical treatment, incineration or any other method approved in writing by the Regulator?	✓			GM plants and material that may contain reproductive material are rendered biologically inactive IAW OGTR requirements, via: • Autoclaving; and • Non-pressurised steam.
	If an autoclave is used, is the coldest part of the load exposed to a minimum of 121°C	✓			
	If incineration is used, is it performed in a high temperature, high efficiency, EPA-approved incineration facility?			✓	
	If chemical treatment is used for decontamination, is it used in accordance with Appendix E of AS/NZS 2243.3:2002.			✓	

DEALINGS:

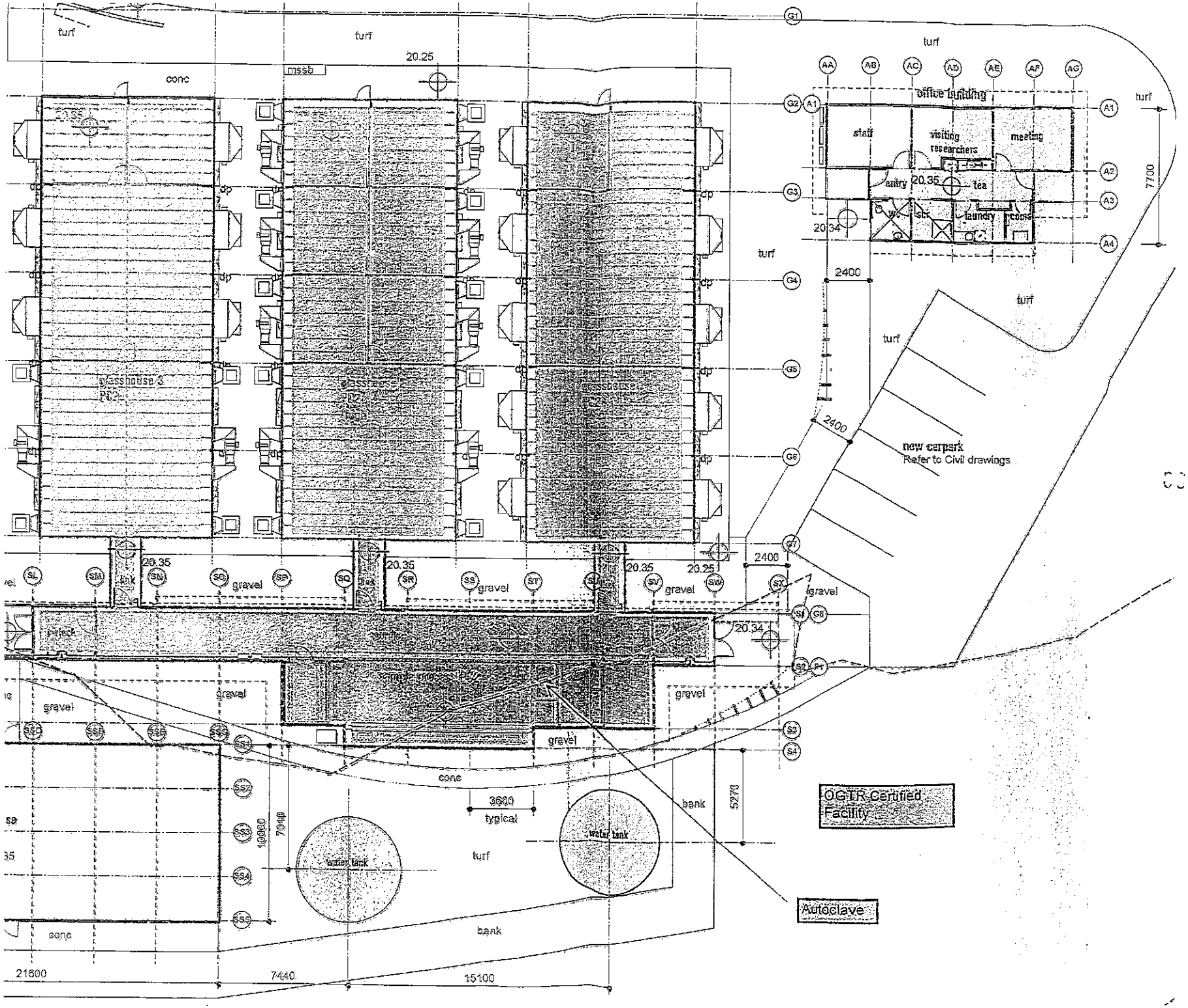
Not applicable

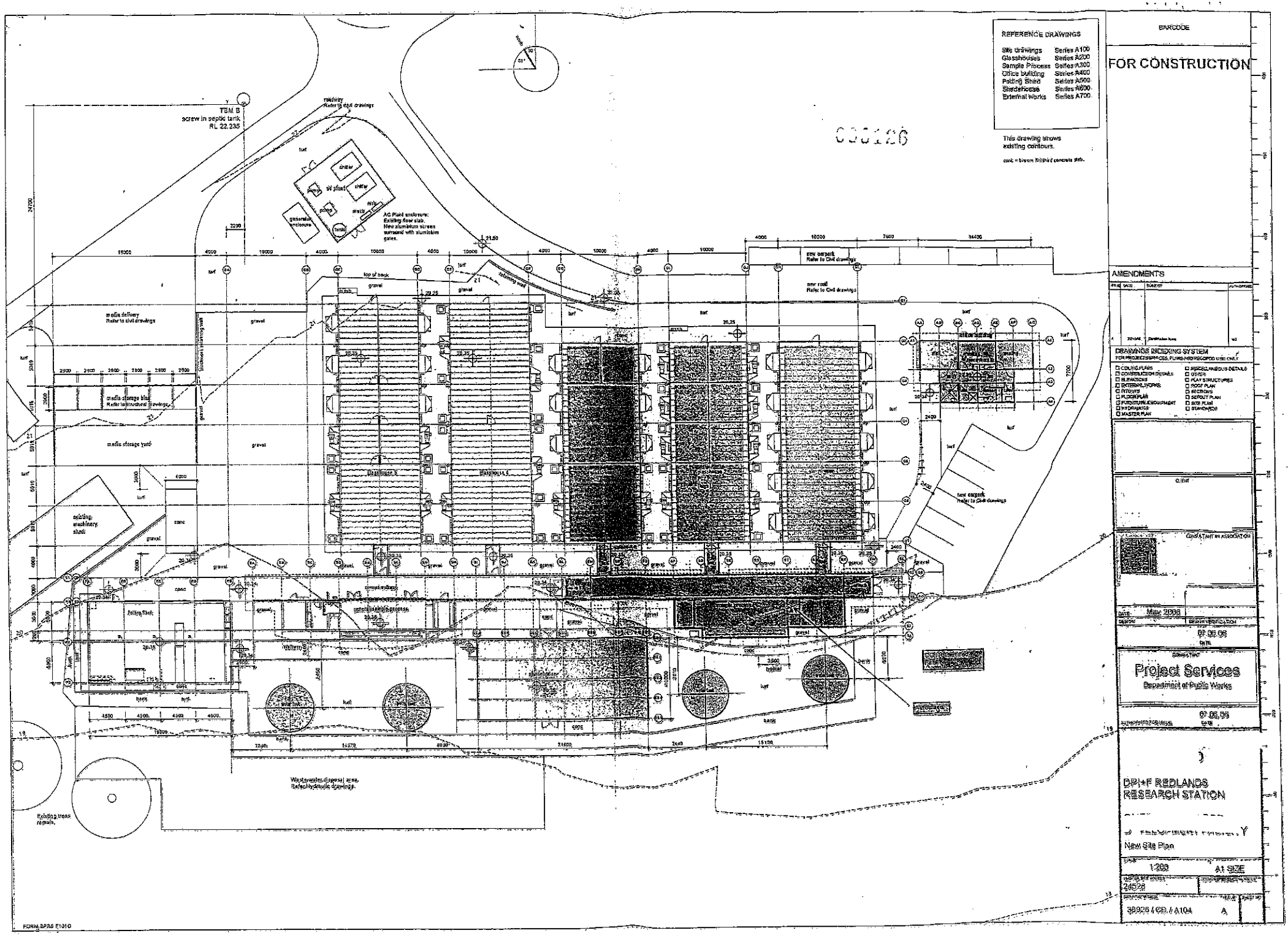
NON- CONFORMANCES:

nil

COMMENTS:

- 2 x PC2 and 2 x Biohazard signs are required.
- Staff will require training when appointed.


turf
conc
mssb
20.25
office building
staff
visiting researchers
meeting
entry
20.35
tea
wc
shr
laundry
comp
20.34
7700
2400
glasshouse 3
glasshouse 2
glasshouse 1
dp
gravel
20.35
20.25
new carpark
Refer to Civil drawings
OGTR certified Facility
Autoclave
water tank
3600
typical
5270
10900
7040
21600
7440
15100


REFERENCE DRAWINGS
Site drawings Series A100
Glasshouses Series A200
Sample Process Series A300
Office building Series A400
Potting Shed Series A500
Shadehouse Series A600
External works Series A700
This drawing shows existing contours.
conc = broom finished concrete slab.
BARCODE
FOR CONSTRUCTION
AMENDMENTS
DRAWINGS INDEXING SYSTEM
FOR PROJECT SERVICES, PLANS AND RECORDS USE ONLY
CEILING PLANS
CONSTRUCTION DETAILS
ELEVATIONS
EXTERNAL WORKS
FITOUTS
FLOOR PLAN
FURNITURE & EQUIPMENT
HYDRAULICS
MASTER PLAN
MISCELLANEOUS DETAILS
OTHER
PLAY STRUCTURES
ROOF PLAN
SECTIONS
SETOUT PLAN
SITE PLAN
STANDARDS
CLIENT
CONSULTANT IN ASSOCIATION
DATE May 2006
DESIGN VERIFICATION
07.06.06
DATE
CONSULTANT
Project Services
Department of Public Works
07.06.06
DATE
AUTHORISED FOR ISSUE
DPI+F REDLANDS RESEARCH STATION
New Site Plan
1:200
A1 SIZE
24528
38926 / 09 / A104
A
TBM B
screw in septic tank
RL 22.235
AC Plant enclosure:
Existing floor slab.
New aluminium screen
surround with aluminium
gates.
new carpark
Refer to Civil drawings
new road
Refer to Civil drawings
media delivery
Refer to civil drawings
media storage shed
Refer to structural drawings
media storage yard
existing machinery shed
glasshouse 5
glasshouse 6
potting shed
Wastewater disposal area.
Refer Hydraulic drawings.
Existing trees remain.
FORM BPRS E1010