

REQUEST FORM – ETHICS COMMITTEE CHU BRUGMANN UVC 2018

Type of EC submission (*please highline the adapted amount*):

Interventional trials

Monocentric trials: **1305.95** euros
 Multicentric trials, leading ethics committee : **1305.95** euros
 Multicentric trials, local ethics committee: **391.79** euros
 Amendment: **326.48** euros

Non-interventional trials (observational)

Monocentric trials : **522.38** euros
 Multicentric trials, leading ethics committee : **522.38** euros
 Multicentric trials, local ethics committee: **130.61** euros
 Amendment: **130.61** euros

TO :

Invoice address	Firm: Adress: Zip+locality: Country: VAT:
Send invoice to	Attention of:

FOR :

Study name :	
Eudract number :	
Reason of payment	Initial/Amendment - interv/observ - local/central
Contact Person EC :	Jérôme Dumont (invoice) urc.budgeting@chu-brugmann.be 02 477 35 99 Christine Potié (Ethics Committee) comite.ethique@chu-brugmann.be 02 477 39 16
Name of bank holder :	Comité d’Ethique CHU Brugmann
Bank account number :	091-0121029-02
Communication:	Eudract + investigator name If no Eudract : Study reference + investigator name

*Please complete this document and send it to
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