# New submission fee form – Non-commercial studies

|  |  |
| --- | --- |
| Date |  |
| RMH Local Project Number | **<YYYY.NNN>** | ERM Number |  |
| Chief/Coordinating Investigator |  |
| RMH Principal Investigator or Point of Contact  |  |
| Sponsor institution *(if applicable)* |  |
| Project Title |  |

## New (Initial) Ethics and Research Governance submissions (select all that apply)

|  |  |  |
| --- | --- | --- |
| **Initial Submissions** | **$ Amount (ext GST)** | **$ Amount (inc. GST)** |
|[ ]  Quality Assurance Project | 175 | 192.50 |
|[ ]  Authorised Prescriber Endorsement – RMH applications | 200 | 220 |
|[ ]  Authorised Prescriber Endorsement – External applications | 1000 | 1100 |
|[ ]  Ethics Review Only | 800 | 880 |
|[ ]  Multisite – per additional site ($25 per site) | <25 x n> | <27.5 x n> |
|[ ]  RMH Reviewing HREC & RMH Governance Review  | 1200 | 1320 |
|[ ]  Multisite – per additional site ($25 per site) | <25 x n> | <27.5 x n> |
|[ ]  RMH Governance Review only  | 1000 | 1100 |
|[ ]  First Time in Human (FTIH) RMH Ethics Review Only  | 1000 | 1100 |
|[ ]  Multisite – per additional site ($25 per site) | <25 x n> | <27.5 x n> |
|[ ]  FTIH with RMH Ethics & RMH Governance Review | 1400 | 1540 |
|[ ]  Multisite – per additional site ($25 per site) | <25 x n> | <27.5 x n> |
|[ ]  FTIH Coordination of Sourcing Expert Review (min. $3000; additional fees may apply) | <Contact OfR > | <Contact OfR > |
|[ ]  Telehealth/Decentralised Clinical Trial (DCT) study ($200 additional fee per satellite site) | <200 x n> | <220 x n> |
|[ ]  Genetically Modified Organism (GMO) Protocol (additional fee) | 400 | 440 |
| **Submission of Non-Standard Contracts[[1]](#footnote-1)** |
|[ ]  Contracts Management Fee per contract ($50 per contract) | <50 x n> | <55 x n> |
|[ ]  Commercially-Supported studies[[2]](#footnote-2) | 1800 | 1980 |
| **MH Sponsor Services** |
|[ ]  Clinical Trial Notification Lodgement by OfR (excluding regulatory agency fee) | 150 | 165 |
|[ ]  Sponsor - Melbourne Health (Set Up fee)3 | 200 | 220 |
| **Additional Services** |
|[ ]  Priority Review Fee[[3]](#footnote-3) | <Contact OfR > | <Contact OfR > |
| **TOTAL FEE (calculate total of *all* selections)** | **$ total** | **$ total** |

## Fee structure

### The fees charged represent only partial recovery of the total workflow cost of review and approval. Fees are cumulative based on all applicable submission modules selected. If you have any questions about the fee form or fee structure, please contact the Office for Research.

## Payment process

### Upon receiving the fee form, an invoice will be issued by the Royal Melbourne Hospital. The invoice will represent the total fee amount payable. Payment Terms are 30 days from invoice date.

## Invoice request details - External entity

|  |  |  |  |
| --- | --- | --- | --- |
| **Entity Name** | **Quali** | **Entity ABN** |  |
| Legal Address |  |
| Contact Person Name |  |
| Contact Person Email  |  |
| Telephone |  |
| Reference ID / Purchase Order Number |  |
| Alternate Email for Invoice payment |  |

## Journal transfers – RMH internal cost centres – GST not applicable

### Complete this section if the fee is to be paid via internal RMH cost centre transfer

|  |  |  |  |
| --- | --- | --- | --- |
| **Cost Centre number** | **Cost Centre manager name** | **Cost Centre manager signature** | **Total amount (ex-GST)** |
|  |  |  | **$** |
|  |  | Click the centre of the image to insert scanned signature from file |  |

### *Thank you*

*The Office for Research
Driving change in the sector to streamline research endeavours*.

1. 1 Contact the Office for Research if you have any questions regarding whether your contracts are standard or not. [↑](#footnote-ref-1)
2. 2 This fee applies for studies in collaboration with commercial sponsors for contracts management. [↑](#footnote-ref-2)
3. Contact the Office for Research - Sponsor Office for further information as additional fees may apply. [↑](#footnote-ref-3)