

Laboratory Equipment Decontamination Form:

Directions: Designated laboratory representative should complete form (Check N/A box for areas that do not apply). When the form is completed, sign the bottom to certify applicable decontamination steps have been properly addressed, and attach checklist to the equipment.

This equipment is being decontaminated for Disposal Relocation Repair Storage

Type of Equipment/Model: _____

Serial #: _____

Building: _____

Room: _____

Dept./Div.: _____

Principal Investigator : _____

Phone: _____

1. **Biohazardous Material** used in the equipment

N/A

Disinfected using: _____

Biohazard label removed

2. **Hazardous Chemicals** used in the equipment

N/A

Removed, cleaned and/or neutralized with appropriate detergent (refer to MSDS, etc.)

Hazardous Waste label applied to chemical(s)

3. **Radioactive Material** used in the equipment

N/A

Fully monitored for radioactive materials (inside and out), has been decontaminated, and is not radioactive

Radiation hazard label removed

EHS Radiation Protection Office has cleared the equipment:

Signature: _____ Name: _____ Date: _____

I certify that, to the best of my knowledge, the equipment is free of hazardous materials or hazards, including those noted above.

Signature: _____ Name: _____ Date: _____

Comments: _____

If internal components or surfaces may have been contaminated and cannot be cleaned by the equipment owner or service representative, consult with the Department of Environmental Health and Safety at 610-436-3333