

LABORATORY EQUIPMENT DECONTAMINATION FORM

EQUIPMENT OWNER

Principal Investigator: _____ Department: _____

Laboratory Manager: _____ Contact Phone: _____

Organization Name: _____ City: _____

EQUIPMENT INFORMATION

Equipment Type/Model: _____ Serial Number: _____

Service/Transportation/Disposal Provider: _____

Service to be performed: _____

RADIOACTIVE MATERIALS: If radioactive materials were used or stored in the equipment, provide a qualified Radiation Safety Service (RSS) survey report. Did the **RSS survey** indicate undetectable levels of radioactive contamination? Circle one (Yes No N/A)

CERTIFICATION OF DECONTAMINATION: I certify that the above laboratory equipment has been thoroughly cleaned and decontaminated of all chemical, biological, and radioactive contaminants.

(Name) _____ (Signature) _____ (Date) _____

Complete and attach this form to equipment used for hazardous materials that is sent outside the laboratory.
Contact Caltech at 604-279-8705 for questions about decontamination or completing the form.