

University of Arkansas
EQUIPMENT CLEARANCE FORM

(Attach form to equipment)

If laboratory equipment is to be removed from service for maintenance, relocation, transportation for storage, or sale/disposal, this form must be completed by laboratory personnel and attached to the equipment before such action is taken.

Equipment/Brand: _____

Model #: _____ Serial #: _____ USC ID #: _____

Contact: _____ E-mail: _____ Phone #: _____

PI/Department: _____ Building: _____ Room #: _____

CHECK ALL POTENTIAL CONTAMINANTS

(before cleaning / decontaminating)

_____ Chemical _____ Biological _____ *Radioactive _____ No hazard

***RADIOACTIVE MATERIALS:**

If radioactive materials were used or stored in the equipment, call EH&S (479-575-5448) to arrange for appropriate survey/wipe test.

- Do you have a confirmation letter from Radiation Safety indicating that the equipment has been surveyed and is free from removable contamination? Yes _____ No _____
(Please attached copy of letter to the equipment)?

EQUIPMENT CLEANING:

List actions taken to clean/decontaminate equipment:

EQUIPMENT OWNER:

I certify that the above lab equipment has been cleaned and decontaminated of all chemical, biological and radioactive contaminants.

Name: _____ Date: ____ / ____ / ____