



Laboratory Relocation/Close-Out Certification

(Prior to Close-Out Survey)

Department: _____

Lab Location: Bldg: _____ Room (s): _____

Contact for Lab/Dept: _____

Phone Number: _____

Date Ready for Final Survey: _____

In Preparation to vacate the above lab(s), I certify that:

- All associated chemical, biological, or radiological materials have been transferred to a new lab, another investigator or appropriately disposed.
- All associated hazardous and nonhazardous waste has been appropriately packaged, labeled, and disposed.
- All associated equipment (e.g. biological safety cabinet, storage cabinet, fume hood, centrifuge, freezer, refrigerator) has been appropriately decontaminated. For equipment used with radiological constituents the appropriate swipe testing has been performed to ensure no removable contamination remains.
- All hazardous material/component removed from equipment to be turned in as surplus.
- All remaining surfaces (e.g. counters, drawers, floors) in the subject lab have been disinfected, cleaned, or decontaminated to ensure that no biological, chemical, or radiological contamination remains.
- All DEA controlled substances have been properly handled/disposed.
- All gas cylinders with an Air Gas label were returned to Air Gas and EH&S was contacted for all others.
- All sharps have been removed.
- All lead shielding has been surveyed as appropriate and removed.
- All hazardous materials that were shipped to a site off campus were packaged, labeled, documented, and shipped by trained personnel in accordance with U.S. Department of Transportation and other applicable regulations and EH&S was contacted prior to shipment.

Signatures:

Lab Manager:

_____ Date: _____ Phone #: _____

Dept Representative:

_____ Date: _____ Phone #: _____

EHS Staff accepting this certification:

_____ Date: _____ Phone #: _____