

CLEARANCE CERTIFICATE

For the Inspection, Servicing, Repair or Return of Laboratory Equipment.

To: Manufacturer / Supplier Make & Description of equipment
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Manufacturer's Service Ref. Or Model / Catalogue

Authorised Return Ref. Serial / Batch N°

Customer Ref / Order N° Other Distinguishing Mark

**A Has this equipment been exposed internally or externally to any of the following?
Please answer all questions by deleting Yes / No as applicable and by providing details in section B below.**

- | | | | |
|---|-----------------|--|-----------------|
| 1. Bloody, body fluids, pathological specimens
<i>(Provide details below)</i> | Yes / No | 4. Chemicals or substances hazardous to health
<i>(Provide details below)</i> | Yes / No |
| 2. Any other biohazard
<i>(Provide details below)</i> | Yes / No | 5. Radioactive substances
<i>(Provide details below including names & quantities of isotopes and checks made for residual activity)</i> | Yes / No |
| 3. Biodegradable material that could become a hazard.
<i>(Provide details below)</i> | Yes / No | 6. Other hazards
<i>(Provide details below)</i> | Yes / No |

B Give details of hazards present as indicated above. Including details of names and quantities of agents etc.

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C Your method of decontamination (please describe)

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D Are there likely to be areas of residual contamination? (please specify)

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I declare that the information above is true and complete to the best of my knowledge and belief.

Authorised signature Date

Name Position

Customers name Department

Address

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.....Tel: