

**Central Michigan University
Laboratory Equipment Decontamination Form**

After cleaning, attach this form to the equipment.

Contact Name	
Phone Number	
Department	
Building/Room	
Equipment Description	
Manufacturer, Model #, Serial #	
CMU Tag#	

This equipment is going:

To Surplus For Repair To Salvage To a New Location: _____

This equipment:

has never been used with radioactive materials, chemicals, or biological agents/animals.
(NOTE: must still be cleaned with detergent solution.)

has been used with the following materials:

Chemicals (list chemicals used) _____

Biological Agents/Animals (list biological agents/animals used) _____

Radioactive Materials (list radioisotopes used) _____

The above named equipment has been cleaned with:

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(Describe process and agent used which is suitable for deactivating/removing/disinfecting the hazardous materials.)

Printed Name and Title of Person Doing the Cleaning	
Signature	
Printed Name of Department Chair/Director	
Signature	
Comments	
Date	
Phone Number	

Call the Office of Laboratory and Field Safety, 774-4474, if you have questions about completing the form.