

**NOTICE OF DECONTAMINATION**

Decontamination must be completed before equipment can be moved

**This equipment released for:**

**Service/Repair**

**Relocation**

**Disposal**

Exterior and interior surfaces have been decontaminated     Yes     No

Decontamination performed by: \_\_\_\_\_

Chemical or disinfectant used: \_\_\_\_\_

Date of decontamination: \_\_\_\_\_

Location of equipment: \_\_\_\_\_

Responsible party (PI): \_\_\_\_\_

Lab telephone number: \_\_\_\_\_

Biohazard labels required under the Bloodborne Pathogens Standard have been removed.

Areas of the instrument *that have not been decontaminated* are clearly labeled.

PI: \_\_\_\_\_

**PLEASE PRINT**

Signature: \_\_\_\_\_

**PRINCIPAL INVESTIGATOR**