



**Notice of Equipment
Decontamination Form**
Office of Research Integrity & Outreach

General Information	
Laboratory Owner/Principal Investigator (PI):	Department:
Building/Room:	PI Phone Number:
Equipment	
Type of Equipment (manufacturer, model #, serial #):	
Decontamination Procedure Performed:	
Hazardous Material Usage	
<p>To the best of my knowledge, the equipment described above:</p> <p style="padding-left: 40px;">Has never been used with radioactive materials, hazardous chemicals, or biological materials.</p> <p style="padding-left: 40px;">Has been used with the following hazardous materials (Select all that apply):</p> <p style="padding-left: 80px;"> <input type="checkbox"/> Hazardous Chemical <input type="checkbox"/> Biohazardous Material <input type="checkbox"/> Radioactive Material* </p> <p>Describe:</p>	
Signature	
<p>The above named equipment has been decontaminated in a manner which is suitable for deactivating, removing, and/or disinfecting the hazardous materials used with/in this equipment.</p>	
Print Name:	Date:
Signature:	

*Decontamination must be confirmed by wipe test. Contact University RSO for assistance.