

Laboratory Equipment Safety Clearance Form

This form must be completed by laboratory personnel and emailed to Property Management with requests to transfer laboratory equipment. If the request is from Plant Operations Personnel who are moving laboratory equipment, the form should be emailed directly to [EHS](#).

Contact Name: _____ Email: _____ Phone: _____

Department: _____ Building: _____ Room#: _____

Equipment Manufacturer: _____

Model #: _____ Serial #: _____ UH ID Tag: _____

POTENTIAL CONTAMINANTS or HAZARD:

- Chemical
- Biological
- Radioactive*
- X-ray Machine
- Lasers
- No hazard
- Unsure

EQUIPMENT CLEANING:

Describe process and agent used to clean/decontaminate equipment:

*RADIOACTIVE MATERIALS:

If radioactive materials were used or stored in the equipment, please contact [EHS](#) to schedule a survey and wipe test.

ACKNOWLEDGEMENT

I certify that the above lab equipment has been cleaned and decontaminated of all chemical, biological and radioactive contaminants.

Signature

Date

Printed Name and Title

Department

EHS Signature

Date