

Decontamination/Clearance Certificate

Our intent is to present quick and specified service as well as to protect the health of our staff. Therefore, we kindly ask for your understanding that we can only accept the return of our units and their corresponding accessories for repair, service, or inspection with a completed declaration. If this declaration is missing we reserve the right to refuse acceptance and return the equipment at customers' expense.

CLEARANCE CERTIFICATE
DECLARATION OF CONTAMINATION STATUS
For the Inspection, Servicing, Repair, or Return of Equipment and Instrument

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| Customer/Distributor Details:- | Description of equipment: |
| Customer Order No: Serial No: | Number of items on this certificate:..... If more than one, a list of all items must be attached |

What is the equipment being returned for?

a) service/Cal b) under WEEE Directive for disposal c) after loan/demo

A. Has the 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. Blood, body fluids, pathological specimens.....** Yes No
 Provide details in section B
- 2. Other Biohazard.....** Yes No
 Provide details in section B
- 3. Biogradable material that become a hazard ...** Yes No
 Provide details in section B
- 4. Chemicals or substances hazardous to health.** Yes No
 Provide details in section B
- 5. Radioactive substances** Yes No
 Provide details in section B
- 6. Other Hazards** Yes No
 Provide details in section B

B. Please provide details of any hazard present as indicated above. Include details of names and quantities of agents as appropriate

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C. Please describe your method of decontamination

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

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| I declare that the above information is true and complete to the best of my knowledge and belief. | |
| Authorised Signature | Date |
| Name (printed) | Position |
| Company Name | Department |
| Address | Tel: |
| | Fax: |
| CountyPost Code..... | |
| Country | Email: |
| Additional Relevant Information/Comments:- | |
| | |

Thank you for completing this form. Please do not hesitate to contact our Service Department if you require any further information or assistance.