LABORATORY CLEARANCE NOTICE

FOR

- Decommissioning
- Partial Renovation or Repair

Building ___________________________  Department ___________________________
Room ___________________________  Faculty ___________________________

Description and Drawing of Partial Renovation/Repair Area, if applicable (indicate N on the diagram)

________________________________________________________________________

The above noted □ room or □ area of room has been thoroughly cleaned and decontaminated of all chemicals, biological, and radioactive contaminants.

Principal Investigator or Designate  Department Lab Coordinator or Designate
Printed Name ___________________________  ___________________________
Signature ___________________________  ___________________________
Date ___________________________  ___________________________

Both signatures required

Should the process of demolition or repair reveal further hazards (suspected or otherwise) such as chemical, biological, or asbestos, please contact Environmental Health & Research Safety.

This notice to remain posted on lab door until work is completed.