

CASELLA INSTRUMENT DECONTAMINATION RECORD

Due to the potential hazard to our service personnel from materials sampled during the use of these devices, we require the completion of this declaration before any service work can be carried out.

Company:	
Address:	
Phone:	

Instruments Being Sent:

Model	Serial Number	Equipment Type

I confirm that the above equipment has been used to sample environments containing (Please be specific e.g. general workshop environment cannot be accepted):

Physical Contaminants:
Radiation Contaminants:
Gaseous Contaminants:

I certify that the equipment specified above has been fully vented and purged of all materials and contaminants which could be considered a risk to the health and safety of personnel servicing them.

FORM MUST BE ENCLOSED WITH RETURNED INSTRUMENT OR FAXED TO CASELLA CEL AT 716-276-3043

**WE REGRET THAT WE ARE UNABLE TO PROCESS ANY EQUIPMENT
THAT IS RETURNED WITHOUT THIS DECLARATION.**

Customer Signature: _____
PRINT NAME:
Date: