



## Equipment Safety Clearance Form

Faculty/Staff Name:

Date completed:

Department:

Building/Room Number:

Equipment (manufacturer/model):

Serial Number:

NCCU Fixed Asset Tag #:

This laboratory equipment has been made safe for maintenance, repair, or surplus/removal.

All hazardous materials have been removed and potentially contaminated surfaces have been decontaminated in accordance with NCCU Environmental Health & Safety requirements.

Hazardous materials removed	Yes	No	N/A
Decontaminated	Yes	No	N/A
All hazard/warning signage removed or defaced:	Yes	No	N/A

This form must be completed and attached to the equipment prior to removal or repair/maintenance.