

Hazard Clearance & Declaration Form

This form certifies that equipment and/or facilities being submitted to Physical Facilities (PF) for maintenance or disposal have been properly cleaned and all controllable hazards have been minimized. It is the responsibility of the customer making the work request to ensure that all proper cleaning and/or hazard abatement is performed before PF personnel arrive. **THIS FORM IS REQUIRED IF RADIOISOTOPES HAVE BEEN USED IN THE AREA.** If at any time, PF personnel or the customer have questions or would like REM to assist with this process, contact one of the following individuals: Adam Krajicek (49-63072), Bob Golden (49-41496), Lila Albin (49-40204), Steve Gauger (49-40238) or Jim Schweitzer (49-42350). Refer to <http://www.purdue.edu/rem/home/files/hazard.htm> for further decommissioning and cleaning instructions.

SECTION 1: To be completed by the individual that has the most knowledge of the potential hazards that may exist (e.g. researcher, principal investigator, laboratory manager). **If radioisotopes have been used, decontaminate all accessible surfaces and contact REM (49-46371).** REM will verify that the equipment and/or facility is free from radioactive contamination and complete Section 2 of this form.

Customer Name: _____ Phone #: _____

List all actions taken to minimize hazards to PF personnel performing requested work (e.g. cleaned surfaces):

Communicate all potential hazards and recommend appropriate Personal Protective Equipment (PPE) if necessary (e.g. wear chemical-resistant gloves):

Certification Statement: All surfaces have been cleaned/decontaminated if necessary. When possible, all additional hazards have been abated. Any hazards that still exist have been clearly communicated including PPE recommendations.

Signature: _____ Date: _____

SECTION 2: To be completed by REM if radioisotopes were used or if customer is seeking further advice.

REM Contact Name: _____ Phone #: _____

REM representative check the following box(es) that applies:

- Radioisotopes were used in this area and REM has confirmed no surface contamination exists.
- REM was requested to provide a professional opinion about possible needs for more cleaning, analytical testing, or additional PPE requirements. Refer to the Comments/PPE Recommendations below for REM's response.

Comments/PPE Recommendations: _____

Signature: _____ Date: _____