



## Health and safety clearance and decontamination form

This declaration must be present and complete (the original must accompany the shipment's delivery receipt) before the returned device can be examined.

Device type: .....

Serial number(s): .....

.....

.....

Reason for returning the device (please describe in detail):

(The device(s) was(were) in operation  yes  no)

.....

.....

.....

.....

.....

We confirm that the above device(s)

has(have) pumped exclusively **physiologically unobjectionable** media and that it(they) are free of hazardous materials and any materials that are harmful to health.

The device(s) was(were) cleaned  yes  no

has(have) pumped media of the following category(categories) which are not physiologically unobjectionable and that cleaning of the device(s) (potentially only media-contacting parts) is required.

Name, chemical formula, Material Safety Data Sheet

aggressive .....

biological .....

radioactive .....

toxic .....

other .....

The device(s) was(were) decontaminated and work can proceed without special measures  yes

Method / proof: .....

.....

The device(s) was(were) not decontaminated and special measures are required before starting work  yes

Measures: .....

.....

Legally binding declaration

We herewith affirm that the information provided in this form is correct and complete. Shipment of the devices and components is in compliance with statutory regulations.

.....  
Company (stamp)      Date      Name      Authorized signature      Position