

## Decontamination certificate for returned goods

**Be absolutely certain to include with all returns of pipettes, dispensing tools, devices and assemblies!**

The completely filled out decontamination declaration is the prerequisite for the acceptance and further processing of the return. If the return does not include a corresponding declaration, we will carry out decontamination and charge it to you.

**Please fill out in block letters:**

**First name, last name:** \_\_\_\_\_

**Organization / Company:** \_\_\_\_\_

**Street:** \_\_\_\_\_

**ZIP:** \_\_\_\_\_ **City:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

| Pos | Quantity | Decontaminated object | Serial number | Description and comment |
|-----|----------|-----------------------|---------------|-------------------------|
| 1   |          |                       |               |                         |
| 2   |          |                       |               |                         |
| 3   |          |                       |               |                         |
| 4   |          |                       |               |                         |
| 5   |          |                       |               |                         |
| 6   |          |                       |               |                         |
| 7   |          |                       |               |                         |
| 8   |          |                       |               |                         |
| 9   |          |                       |               |                         |
| 10  |          |                       |               |                         |

**Did the listed parts come into contact with the following materials?**

Health-damaging liquid solutions, buffers, acids and alkalis: .....  Yes  No

Potentially infectious agents: .....  Yes  No

Organic reagents and solvents: .....  Yes  No

Radioactive substances ..... Radiation:   $\alpha$    $\beta$    $\gamma$   No

Health-damaging proteins .....  Yes  No

DNA .....  Yes  No

Did these materials find their way into the device/pipette? .....  Yes  No

If so, which: \_\_\_\_\_

**Description of the measures for decontamination of the listed parts:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**I confirm that proper decontamination was carried out**

Signature of the authorized person: \_\_\_\_\_

Company/Dept.: \_\_\_\_\_ Place and date: \_\_\_\_\_

