

# LABORATORY CLEARANCE NOTICE

FOR  
† Decommissioning

Room \_\_\_\_\_

Faculty \_\_\_\_\_

Description and Drawing of Partial Renovation/  
Repair Area, if applicable (indicate N on the diagram)

\_\_\_\_\_  
\_\_\_\_\_



The above noted † room or † area of room has been thoroughly cleaned and decontaminated of all chemicals, biological, and radioactive contaminants.

	Principal Investigator or Designate	Department Lab Coordinator or Designate
Printed Name	_____	_____
Signature	_____	_____
Date	_____	_____

*Both signatures required*

Should the process of demolition or repair reveal further hazards (suspected or otherwise) such as chemical, biological, or asbestos, please contact Environmental Health & Research Safety.

*This notice to remain posted on lab door until work is completed.*