

Name: Date:

## NOTICE

F&S will be servicing this piece of laboratory equipment on:

## Start Date: End Date: Room: Building: Date Posted: Time: Serial #: Model: Make: DO NOT USE this piece of laboratory equipment! If you need to speak to the F&S personnel servicing your hood please call: Name: Phone: Before maintenance work can begin the Unit Coordinator or their designee must attest to the below statement. I have verified that all chemicals and other hazardous materials have been removed from the laboratory equipment or appliances and the interior surfaces have been decontaminated in accordance with the procedure described on the Hazard Assessment Checklist. Signature:

In an emergency contact the at 911.

Phone: