

DO NOT REMOVE

CHECK SHEET FOR VACATING ROOM

ROOM NUMBER _____

Post This Notice on the Door of the
Laboratory/Cold Room/Warm Room

This room has been cleaned of all hazardous materials (including broken glass and sharps) under my responsibility and no hazardous spills or residues are present in this room. Refrigerators, freezers, fume hoods, biological safety cabinets, storage cabinets, and sinks have been cleaned and appropriately disinfected.

Researcher

Date

All hazardous materials and biomedical wastes have been removed from this room.

Environmental Health and Safety Office

Date

This room has been wipe tested in accordance with the Nuclear Regulatory Commission requirements. No fixed or removable contamination has been detected.

No wipe down of this room is necessary.

Radiation Safety Office

Date

Countertops, floors, and sinks have been properly cleaned and disinfected.

General Services

Date

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