

Declaration of contamination of vacuum units and components



Repairs and/or maintenance will be carried out on vacuum units and components only if a fully completed, correct declaration of contamination is provided. If this is not the case, the corresponding repairs will be delayed or omitted. A separate declaration must be submitted for each device and each component.

This declaration can only be completed and signed by authorised and qualified staff:

| | |
|--|------------------------------------|
| <p>1. Description of component</p> <p>Equipment type/model:</p> <p style="padding-left: 40px;">Code No.:</p> <p style="padding-left: 40px;">Serial No.:</p> <p style="padding-left: 40px;">Invoice No.:</p> <p style="padding-left: 40px;">Delivery Date:</p> | <p>2. Reason for return</p> |
|--|------------------------------------|

| | | | | | | | | | | | | | | | | | | | | | | |
|---|---|---------------------|-----|----|-------------------|-----|----|--------------------------|-----|----|-------------|-----|----|---------------|-----|----|----------------|-----|----|--------------------------|-----|----|
| <p>3. Equipment condition</p> <p>Has the equipment been used? yes no</p> <p>What type of pump oil was used?</p> <p>Has the vacuum device/component been cleaned? yes no</p> <p style="padding-left: 40px;">Detergents:</p> <p style="padding-left: 40px;">Cleaning method:</p> | <p>4. Process related contamination of equipment</p> <table style="width: 100%; border-collapse: collapse;"> <tr><td>copper contaminated</td><td style="text-align: center;">yes</td><td style="text-align: center;">no</td></tr> <tr><td>toxic / corrosive</td><td style="text-align: center;">yes</td><td style="text-align: center;">no</td></tr> <tr><td>microbiological hazard *</td><td style="text-align: center;">yes</td><td style="text-align: center;">no</td></tr> <tr><td>explosive *</td><td style="text-align: center;">yes</td><td style="text-align: center;">no</td></tr> <tr><td>radioactive *</td><td style="text-align: center;">yes</td><td style="text-align: center;">no</td></tr> <tr><td>warfare agents</td><td style="text-align: center;">yes</td><td style="text-align: center;">no</td></tr> <tr><td>other harmful substances</td><td style="text-align: center;">yes</td><td style="text-align: center;">no</td></tr> </table> <p><small>* Devices / components that are contaminated microbiologically, radioactively, with explosives or warfare agents will not be accepted. Please contact us in advance.</small></p> | copper contaminated | yes | no | toxic / corrosive | yes | no | microbiological hazard * | yes | no | explosive * | yes | no | radioactive * | yes | no | warfare agents | yes | no | other harmful substances | yes | no |
| copper contaminated | yes | no | | | | | | | | | | | | | | | | | | | | |
| toxic / corrosive | yes | no | | | | | | | | | | | | | | | | | | | | |
| microbiological hazard * | yes | no | | | | | | | | | | | | | | | | | | | | |
| explosive * | yes | no | | | | | | | | | | | | | | | | | | | | |
| radioactive * | yes | no | | | | | | | | | | | | | | | | | | | | |
| warfare agents | yes | no | | | | | | | | | | | | | | | | | | | | |
| other harmful substances | yes | no | | | | | | | | | | | | | | | | | | | | |

5. Please list all substances, gases and by-products which may have come into contact with the equipment:

| Tradenname, Product name, Manufacturer | Chemical name (or Symbol) | Danger class | Precautions associated with substance | Action if spillage or human contact |
|--|---------------------------|--------------|---------------------------------------|-------------------------------------|
| | | | | |

Is the equipment free from potentially harmful substances? yes no

6. Legally binding declaration

We hereby guarantee that the information in this declaration is correct and complete. I, the undersigned, am able to provide a true assessment. We are aware of our liability toward the contractor for damage resulting from incomplete or inaccurate details; we undertake to be responsible for any third-party claims based upon claims of contamination or other nonconformity with the statements herein.

| | |
|----------------|------------|
| Organisation: | Name: |
| Address: | Job title: |
| ZIP / City: | Telephone: |
| Email address: | Telefax: |
| Date: | |

Legally binding signature and company stamp: _____