

LABORATORY CLEARANCE FORM

Laboratories that have been used with hazardous materials must be left clean and free of hazards prior to vacating due to remodeling, relocation or close-out.

Directions: This form replaces the EHRs Certificate of Vacancy Form. Contact EHRs at 215-707-2520 if you have any questions. Complete the form below and return to EHRs via email (ehrs@temple.edu). Once cleared by EHRs, a copy of the completed form must be posted on the outside door of each vacated lab. The completed form is valid for 30 days.

Principal Investigator (PI)		Phone #	Department
Building		Room(s):	
LABORATORY USAGE			
<input type="checkbox"/> Has never been used with biological, chemical or radiological agents <input type="checkbox"/> Has been used with the following materials: <input type="checkbox"/> Biological <input type="checkbox"/> Chemical <input type="checkbox"/> Radiological			
HAZARDOUS MATERIALS (Biological, Chemical or Radioactive)			
All hazardous materials have been transferred to my new lab, another TU PI, or disposed of properly in accordance with University policy and procedures.		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
All hazardous materials to be transferred to a site other than my current campus location have been packaged, labeled, documented and shipped by trained personnel and in accordance with Department of Transportation and other applicable regulations and EHRs has been involved in the transfer.		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
All DEA controlled substances have been transferred to my new lab or disposed of according to my DEA license requirements.		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Radioactive Areas-A final closeout survey was conducted with EHRs.		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
EQUIPMENT & SURFACES			
All work surfaces and equipment in the lab(s) have been disinfected, cleaned or decontaminated to assure that no contamination remains.		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
An Equipment Clearance Form has been completed, signed by EHRs and posted on each piece of decontaminated equipment prior to removal from the lab(s).		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
All equipment has been transferred to my new lab, another TU PI, or disposed of appropriately in accordance with University policy and procedures.		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
All chemical fume hoods, storage cabinets, drawers, bench tops, shelves and other enclosures in the lab(s) are empty and have been wiped with soap and water.		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
All glassware, empty containers, sharps and misc. equipment and supplies have been removed from the lab(s)		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
CERTIFICATION			
I certify that I have followed the required University Policies & Procedures and the EHRs Laboratory Vacancy or Relocation Guide to vacate the identified lab(s), including shared/support areas, listed on this form.			
PI or Designate Name		Signature	Date:
Department Chair or Administrator Name		Signature	Date
EHRs Review (For EHRs Use Only)			
Lab (s) Cleared <input type="checkbox"/> Yes <input type="checkbox"/> No Comments:			
EHRs Reviewer Name		Signature	Date