



# Decontamination Statement Form

List all chemicals in contact with the part.  
MSDS SHEETS REQUIRED

|                       | Product #1 | Product #2 |
|-----------------------|------------|------------|
| Chemical Name         |            |            |
| Description           |            |            |
| Health Safety Hazards |            |            |
| Precautions First Aid |            |            |

Please remove all chemicals as required by the EPA and OSHA

## Attention

|   |
|---|
| <p>Valves must be drained and thoroughly flushed of chemicals. Equipment that has not been decontaminated <b>WILL NOT</b> be forwarded or returned.</p> |
|---|

I hereby certify that the equipment being returned has been cleaned and decontaminated in accordance with good industrial practices. This equipment poses no health or safety risks due to contamination.

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Company: \_\_\_\_\_

RMA Number: \_\_\_\_\_

Date: \_\_\_\_\_

