



**LABORATORY DECOMMISSIONING CLEARANCE AUTHORIZATION
FOR Campus Operations & Safety (COS) and Research Compliance (RC)
USE ONLY**

Laboratory Information:

Principle Investigator/Responsible person

Department

Building

Building number

Date of Survey

Room(s)

A decommissioning survey has been performed by Campus Operations and Safety and Research Compliance on the laboratory space (s) listed above.

The following officials have also completed closeout surveys for the identified spaces.

| | Yes | No | N/A |
|-----------------------------|-----|----|-----|
| Research Compliance | | | |
| Radiological Safety Program | | | |
| Campus Operations & Safety | | | |

Based on visual inspection of the identified area(s), information submitted to COS and RC by the person responsible for those areas, and/or verification of hazard removal by the above groups, the status of the laboratory space is as follows. (Check the appropriate response.)

| | |
|-----------------------|---|
| <input type="radio"/> | The laboratory areas listed above have been successfully decommissioned and are cleared for reassignment to a new researcher; for re-occupancy as a non-laboratory space; or for Construction, renovation, remediation, and/or abatement. |
| <input type="radio"/> | The following issues must be addressed and a follow-up survey completed before the laboratory space may be re-assigned: |
| | _____ |
| | _____ |
| | _____ |

COS Representative Conducting survey: _____

Title

Date

Signature

IBC Member Conducting survey: _____

Title

Date

Signature