

Onsite Pipette Clinic Decontamination Declaration for Liquid Handling Equipment

It is important to complete all necessary information otherwise service could be delayed. To enable us to comply with Health & Safety Regulations, all pipettes must be decontaminated of all hazards and not present a risk to the technician.

Company		Email	
Area/Dept		Phone	
Contact		Cost Centre/PO (if applicable)	
UKAS/ISO 17025 Calibration		Tick if applicable	<input type="checkbox"/>
		Service O/N	

Paper calibration certificates will be issued unless you request an electronic version Tick for electronic certificate

Pipette Type	No. of Pipettes	Measurements	Service Level	Test Specification	Pipette Tip Type to be Used During Calibration

UKAS calibration is available for 2x4, 3x4, 3x5 and 3x10 calibrations. Selecting fewer than 10 readings @ 3 volumes is on the understanding that this does not fully conform to ISO 8655

***Other or Custom - please detail here**

****Customer Supplied – appropriate volumes and quantities need to be supplied to your assigned technician**

Interval and Date on Calibration Labels
 Interval, eg 3 months

 Date Format, eg DD/MM/YYYY

On Site Pipette Clinic Decontamination Declaration for Liquid Handling Equipment

Definitions of Service Levels:	
A	As Found calibration
B	Preventative Maintenance, As Returned calibration
C	As Found calibration, Preventative Maintenance, As Returned calibration)
D	As Found calibration (but if pipette fails then Preventative Maintenance and As Returned calibration will be performed)

Definition of Measurements:	
1x10	Ten readings at one volume
2x2	Two readings at two volumes
2x4	Four readings at two volumes
3x4	Four readings at three volumes
3x5	Five readings at three volumes
3x10	Ten readings at three volumes

Additional Information

Declaration of Decontamination

Have the pipettes been used with hazardous material? YES NO

Nature of contaminant

Method of decontamination

We certify that these instruments are safe for human handling

Decontaminated by

Print Name	Date
Signature (Email address can be used in place of signature)	

On completion of this form, please include it with your consignment of equipment and hand to your on site technician