



1565 Bustard Road
 Lansdale, PA 19446
 Phone: 610-287-3433 Fax: 610-287-0233
 Web: www.integratedservicesolutions.com

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Title:	Pipette Decontamination Form				
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Pipette Decontamination Form

***This form MUST be attached to each pipette order that is being sent to our Metrology lab for calibration.
 Failure to attach this form will result in service delays and/or equipment being returned without being serviced.***

It is the responsibility of the sender to remove all substances that are dangerous to human health and to choose the appropriate method of decontamination based upon the substances used in the pipette.

Company: _____ Contact: _____

Address: _____

Phone: _____ Email: _____

Method of Calibration: GLP* (5 Samples/ 3 Volumes) Non-GLP (5 Samples / 1 Volume) Service Level 1
 Service Level 2 Service Level 3 Service Level 3A Service Level 4 Other

Re-Calibration Cycle: 3 month 6 month* 12 Month Other

* GLP Default method & Cycle if not otherwise selected, per our Pipette SOP; Higher Price than non-GLP – better Quality.

Equipment Information:	Model:	Serial No.	Tips Included		Chargers Included		Repair	Calibration	Re-Test For As Found	Comments
			Yes	No	Yes	No				

If more space is needed, attach an equipment list, additional forms or a blanket decontamination letter signed and on your company letterhead.

Decontamination Information

What materials were used in each pipette listed above?

Non Hazardous Virus Toxic substance Pathogen Carcinogen Bacteria
 Chemical (explain) _____ Other (explain) _____

Decontamination Procedure Used: (If non-hazardous, skip this section)

Autoclave Biocides Other (explain) _____

Authorization: I certify that the unit(s) identified above has been totally decontaminated of all chemical, biological and/or radioactive materials PRIOR to shipment.

Printed Name of Company Representative: _____

Title: _____

Signature: _____

Date: _____

Office Use Only:

Job No.: _____

Total Quantity Received: _____

PO No.: _____

Chargers Received: _____

Tips Received: _____