

X

Statement of Product Cleanliness and Decontamination

| | Jtu | | | duct Ci | carrinic 33 ari | a Deconta | | |
|----------------------|-----------------------------|--|------------------------|--------------------------------------|---|---|--|------------------|
| Com | pany Name | | | | RMA# | | | |
| Со | ntact Name | | | | | | | |
| Str | eet Address | | | | Phone, Fax | | | |
| Cit | ty, State, Zip | | | | Email Address | | | |
| suppo | rt of this po | icy, Campbell Sc | ientific re | equires that all | ealth of our employees a products returned for so ls, insects, and pests. | | | |
| | | | | | equipment was taken, n processes that were p | | ances to which the e | quip- |
| form B within pense. | BEFORE your 5 working o | products arrive. lays of product r cientific reserve | Please d eceipts, o | o not put this f or found to be i | or BE PROCESSED. To avoin in a box with your in a box with your incomplete, the product where s | eturned products. If will be returned un | the form is not recei opened at the sende | ived er's ex- |
| Thank | you for sup | porting our effor | ts to pro | tect the health | and safety of our emplo | oyees. | | |
| Please | e provide th | e following info | rmation | n: | | | | |
| 1 | | location or applion vas installed (e.g., replant). | | | | | | |
| 2 | which the ec | environmental co uipment was exp er, herbicides, rac | osed (e.g | ., sewer, | | | | |
| | Did you clea equipment? | n and decontamii | nate the | | S *Fill out the rest of the O, not required. Equipm free from health and s | ent was used in an e | | |
| | Describe how decontamina | v the equipment sted. | was clear | ned and | | | | |
| 5 | equipment h | ances of concern as been, or poter ach MSDS sheets, | itially has | | | | | |
| I herek | exposed (att | ach MSDS sheets, it the returned e | if any). quipmer | it has been clea | aned and decontaminat | | | _ e: |

(Sign if completing on paper. Type your name if completing on the computer)