



Laboratory Clearance Checklist

Department: _____

Building: _____ Room #: _____

PI: _____

ITEM	YES	NO	NA
All gas cylinders removed from lab / designated area			
All stored chemicals removed from lab / designated area			
All biological materials removed from lab / designated area			
All hazardous waste removed from lab / designated area			
The following equipment has been decontaminated and an <i>Equipment Release Form</i> has been completed (as necessary)			
Refrigerators / Freezers			
Bench Tops / Cabinets			
Fume Hoods			
Biological Safety Cabinets / Hoods			
Ovens			
Other equipment:			
Other equipment:			
Other equipment:			
Other equipment:			
All bench tops / cabinets have been cleaned / decontaminated			
All laboratory keys have been returned to the departmental office			
All library books / materials in lab / designated area have been returned			
Based on responses above, will another walk-through be needed?			

Comments:

Completed By: _____

Signature: _____ Date: _____

Department Chair Signature: _____ Date: _____