



Declaration of Contamination of Vacuum Equipment and Components

ATTENTION! This declaration about contamination has to be filled in correctly and has to be attached to all vacuum gauges and components, which are sent back to us for repair or service. **Non - completion will result in delay.** This declaration must be filled in and signed by authorized and qualified staff only!

1. Data of the pump / of the component: Type number: _____ Serial number: _____ Material number: _____ Oil used: _____	2. Please, mark the reason for return: <input type="checkbox"/> Claim <input type="checkbox"/> Repair <input type="checkbox"/> Exchange <input type="checkbox"/> Repurchase Rental pump <input type="checkbox"/> Other _____
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3. Harmful Contamination of the Product		
the equipment has been in operation	no <input type="checkbox"/>	<input type="checkbox"/> yes
toxic	no <input type="checkbox"/>	<input type="checkbox"/> yes
corrosive	no <input type="checkbox"/>	<input type="checkbox"/> yes
microbiological	no <input type="checkbox"/>	<input type="checkbox"/> yes
explosive	no <input type="checkbox"/>	<input type="checkbox"/> yes
radioactive	no <input type="checkbox"/>	<input type="checkbox"/> yes
other substances	no <input type="checkbox"/>	<input type="checkbox"/> yes

! Contaminated products have to be shipped according the current transportation laws and i. a. have to be metallic blanked!

If no, further go on with 5.

4. Kind of harmful substances and dangerous products of reaction, which were in contact with the pump and equipment :				
Name, Manufacturer	Chemical Identification (Formula)	Hazard Category	Action in case of escape of the harmful substance	First aid in case of an accident
Required protection equipment: (Hand-, eyes-, body protection, surgical mask)				
Cleaning in water or steam cleaning of the equipment is harmless			no <input type="checkbox"/>	<input type="checkbox"/> yes
Parts to be scrapped can be disposed of harmlessly			no <input type="checkbox"/>	<input type="checkbox"/> yes
The equipment / component has been properly decontaminated			no <input type="checkbox"/>	<input type="checkbox"/> yes

5. Declaration

I guarantee that all statements in this form are correct and complete. The dispatch of the contaminated products will be arranged according to legal regulations.

Company: _____

Street: _____ ZIP, City: _____

Phone: _____ Fax: _____

Name: _____ Position: _____

Date, legally binding signature, company / institute stamp: _____