

# Calibration Request Form with Statement of



2518 Reliance Ave.  
Apex, NC 27539

Phone : 919.303.1212

Fax: 919.303.0712

## Decontamination

**INSTRUCTIONS:**

1. Fill out form completely with applicable information.
2. Fax completed form to (919) 303-0712. An RA# will be assigned and faxed back to you.
3. Send equipment and **INCLUDE** this form to: Scientific Calibration, 2518 Reliance Ave., Apex, NC 27539

**SHIP TO:**

**BILL TO:**

<b>Company:</b>		
<b>Street:</b>		
<b>City/State/Zip</b>		
<b>Country:</b>		
<b>Contact:</b>		
<b>Phone:</b>		
<b>Fax:</b>		
<b>Email:</b>		

**PAYMENT METHOD:**

<b>Purchase Order</b>			<b>PO #</b>
<b>Credit Card</b>		<b>MC VISA AMEX</b>	<b>CC #</b>
			<b>Name on card</b>
			<b>Expiration Date</b>

**EQUIPMENT:**

Manufacturer	Serial #	Range	GLP / GMP / NA	NOTES

**\*\* If additional space is needed, please attach list to this form.**

**Please state METHOD OF STERILIZATION:**

ETO   
  BIOCIDES   
  IRRADIATION   
  AUTOCLAVE  
 MANUAL DISASSEMBLY AND CLEANING   
  OTHER \_\_\_\_\_

**I certify that the aforementioned item(s) are free from any radioactive, biohazardous, or otherwise dangerous substances / gases and are safe for human handling.**

**Signature:** \_\_\_\_\_  
**Title:** \_\_\_\_\_