Declaration of contamination of equipment

The repair of devices is only carried out if a completely filled out declaration is available. If this is not the case, the work will be delayed. If this declaration is not enclosed with the equipment to be repaired, the shipment may be rejected. A separate declaration must be filled out for each unit.

This declaration may only be completed and signed by authorised specialized personnel of the user. Customer/Dept./Institute: Street: Postcode, city: Contact person: Fax: Phone: E-mail: Order no. of customer: A. Device details **Exact designation:** Lenz art. no.: Reason for the repair order: B. Condition of the device Yes No Not known Was it in use? Is it cleaned? Cleaning agent: Cleaning method: C. Information about Contamination (must be completed) What substances did the device come into contact with? Trade name and/or chemical name of equipment, material properties. e.g. according to safety data sheet (e.g. toxic, flammable, radioactive) Chemical name Material properties Trade name 1) 2) 3) 4) Yes No 🗆 Not known Are the substances listed above harmful to health? Hazardous degradation products under thermal stress? Yes 🗆 No 🗆 Not known Which: Special safety precautions are not required for further handling. The following safety precautions are required (e.g. hand protection due to danger of cuts, protective clothing due to corrosive substances): Equipment contaminated with microbiological or radioactive substances will only be accepted if proper cleaning can be proved. D. Legally binding declaration We confirm that the information in this declaration is true and complete and that I, as the undersigned, am in a position to assess this. We are aware that we are liable to the contractor for any damage caused by incomplete or incorrect information. We commit ourselves to indemnify the contractor against claims for damages by third parties arising from incomplete and incorrect information. We are aware that, irrespective of this declaration, we are directly liable to third parties, including in particular the contractor's employees assigned with the handling/repair of the product. Name of the autorized person (in block capitals):

Authorized person's signature

Company stamp

Date