

FSE DO Infrastructure and Safety Team (laST) Laboratory Equipment Tracking Form

This equipment tracking form is required whenever lab equipment ceases operation, or is transferred to another owner or location, or is removed from a lab for surplus/disposal. Before dispositioning the equipment, return the completed form to Rita.Bottesch@asu.edu and Amanda.L.Hoyt@asu.edu.

Laboratory Location Information			
Current equipment location (building and room number)): Department: _	Department:	
PI or Department Lab/Facilities Manager:		_	
Telephone Number: Email:		_	
Equipment History			
Previous equipment location (building and room number): PI:			
Approximate operational period (estimate start & end da	ates):	_	
Processes this equipment was used for (attach extra do	ocumentation as needed):		
Was this equipment used in a biological/medical resear	rch lab? □ Yes □ I	No	
Biological decontamination need	ed? □ Yes □ I	No	
Comments:			
Was this equipment used in a radioactive material rese	arch lab? □ Yes □ I	No	
Radiological decontamination ne	eded? □ Yes □ I	No	
Comments:			
Was this equipment used in a chemical research lab?	□ Yes □ I	No	
Chemical decontamination neede	ed? □ Yes □ I	No	
Comments:			
Comments:			

This equipment has been evaluated, and its current and past usage has been confirmed to the best of our ability.