

Desert Research Institute
Environmental Health and Safety Office
Laboratory Decommissioning Certification Form

Department: _____

Laboratory Location: Building _____ Room: _____

Laboratory Contact Person: _____

Telephone Number: _____

Date of Decommissioning Survey: _____

In preparation to vacate the laboratory listed above, I certify that:

1. All useful chemicals have been redistributed within the DRI or shipped to another location (following Department of Transportation regulations). The remaining chemicals have been properly disposed through the DRI EH&S hazardous waste program.
2. All controlled substances have been transferred to another registered user or disposed via a reverse distributor in accordance with federal regulations.
3. Chemicals have not been disposed in the normal refuse or via drain disposal without DRI EH&S permission.
4. Unknown and reactive chemicals were managed appropriately after consultation with the DRI EH&S.
5. All chemical waste has been disposed through the DRI EH&S hazardous waste program.
6. All compressed gas cylinders have been returned to vendors.
7. All biological materials have been destroyed or transferred to another authorized laboratory.
8. Any select agents have been destroyed or transferred in accordance with DRI Federal regulations.
9. All stocks and media solutions have been decontaminated by autoclaving or a 10% bleach/water solution and disposed via the sink drain.
10. All biological materials have been removed from freezers and refrigerators. The freezers and refrigerators have been decontaminated with a 10% bleach/water solution and biohazard warning signs removed.
11. All solid infectious materials and used supplies have been disposed in an infectious waste container.
12. All sharps have been placed into sharp containers and the sharp containers disposed in infectious waste containers.
13. All radioactive materials and inventories have been compared and balanced to account for all material. Copies of the final radioactive material inventories have been sent to the UNR Radiation Safety Office.

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14. All radioactive materials have been transferred to another authorized user or disposed as radioactive waste in accordance with UNR Radiation Safety Office procedures.
15. Equipment and devices that have internal radioactive sources have had the source removed by Radiation Safety Office personnel prior to transfer or moving.
16. The Radiation Safety Office has conducted an exit survey of the laboratory after the last use of radioactive materials.
17. All unused supplies have been relocated to a new laboratory, sent to surplus or transferred to another research facility.
18. All laboratory surface areas used for chemicals, including hoods, have been washed with soap and water to remove any chemical contamination.
19. Any biological safety cabinets have been emptied and decontaminated with a 10% bleach/water solution. All laboratory surfaces used for infectious materials have been decontaminated with a 10% bleach/water solution. After cleaning biohazard signs and labels have been removed from equipment and cabinets.
20. Any areas that were impacted from a spill of chemicals, biological agents or radioactive materials have been identified to DRI EH&S.
21. Any areas or equipment that could not be cleaned have been tagged with the appropriate warning labels and identified to EH&S.

Responsible Party (i.e., Principal Investigator)

Date

I verify that DRI EH&S staff have conducted the laboratory decommissioning surveys and certify this laboratory to be decommissioned.

DRI EH&S Representative

Date

I verify that Facilities Staff have inspected the laboratory and find the space and installed systems acceptable for reassignment.

Facilities Representative

Date

Copies of this form will be provided to the Responsible Party, the Division/Center Director, the Facilities Department and the original shall be retained by DRI EH&S.