



PUMPS + SYSTEMS

## DECONTAMINATION DECLARATION

ENTIRE FORM MUST BE COMPLETED BEFORE A RMA NUMBER CAN BE ISSUED!

<b>Please identify the KNF Model to be returned:</b>		
<b>Qty to be returned:</b>	<b>Pump Voltage:</b>	<b>Pump Frequency:</b>
<b>Serial Number(s) of the unit(s) to be returned:</b>		
<b>Reason for return – Please describe in detail:</b>		
<b>Please identify the Gases or Liquids used in the pump(s):</b>		
<b>Contact person for repair:</b>		<b>Phone #:</b>
<b>Email:</b>		<b>Fax #:</b>

**Please check one:**

- (1) This piece of equipment has been decontaminated. It is free from chemical, biological, or radioactive contamination and is safe to handle without special precautions, in compliance with OSHA Hazard Communication Standard (HCS) Subpart Z, Toxic and Hazardous Substances, 29 CFR 1910.1200.

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- (2) This piece of equipment has not been decontaminated. It is free from biological or radioactive contamination, but has been exposed to chemicals and requires special handling precautions. The chemicals used are indicated below, and a copy of the respective chemical MSDS sheet/s are attached (OSHA HCS, 29 CFR 1910.1200)

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- (3) This piece of equipment has not been decontaminated and is safe to handle without special precautions. The basis of this statement must be indicated via Pumped Media:

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**I understand that if the equipment arrives contaminated, regardless of the signature on this document, the equipment will be returned for appropriate decontamination.**

<b>Company Name:</b>	
<b>Billing Address:</b>	
<b>Shipping Address:</b> <input type="checkbox"/> Same as Billing Address:	

Authorized Signature of User: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_

Fax back to (609) 890-8323 or **Email back to:** [rma@knf.com](mailto:rma@knf.com)