



SURPLUS PROPERTY

COLORADO STATE UNIVERSITY

6011 Campus Delivery
201 W Lake St
Fort Collins, CO 80523-6011
surplus.colostate.edu

RFLE DEC FORM

Refrigerator, Freezer, and Laboratory Equipment Declaration Form

Please attach this completed form to any refrigerator, freezer, or lab equipment being sent to Surplus Property, **that has been in contact with chemical, biological, or radioactive material.** Surplus Property will not pick up items without this form attached.

Today's Date	<input type="text"/>
Department Name	<input type="text"/>
Location of Equipment	<input type="text"/>
Responsible Party's Name	<input type="text"/>
Responsible Party's Number	<input type="text"/>
EACR/LOT/DOC Number(s)	<input type="text"/>

Item Information (Circle the item Type)

You may list multiple items on this form

Refrigerator	Freezer	Lab Equipment	Serial Number	<input type="text"/>
Refrigerator	Freezer	Lab Equipment	Serial Number	<input type="text"/>
Refrigerator	Freezer	Lab Equipment	Serial Number	<input type="text"/>
Refrigerator	Freezer	Lab Equipment	Serial Number	<input type="text"/>

Our department declares that all of the above listed items have been thoroughly cleaned and are free of all chemical residues, biological material, or radioactive material.

Responsible Party Printed Name

Responsible Party Signature

Date

Please attach signed form to each piece that is being sent to Surplus. If multiple items are listed on one RFLE form, please make copies for each item and attach.