

Division of Facilities Management Laboratory Clearance Form for the Safe Conduct of Building Works

<p>1. Facility details</p> <p>Campus:</p> <p>Building:</p> <p>Room(s):</p>
<p>2. Uses of facility (present / past)</p>
<p>3. Building works to be conducted (brief summary)</p>
<p>4. Decontamination / cleaning undertaken and by whom</p>
<p>5. Any residual hazards</p>
<p>6. Facility Managers declaration</p> <p>Facilities Manager name:</p> <p>Facilities Manager Signature:</p> <p>Date:</p>
<p>7. Further actions to be undertaken:</p> <p>Action:</p> <p>Date:</p> <p>By whom:</p>