

UKAS pipette decontamination declaration.

NOTE THAT NO PIPETTE CAN BE SERVICED / CALIBRATED WITHOUT A COMPLETED AND SIGNED DECLARATION

Company name & address	Contact name	Tel
	Department	Mobile
	Contact email	Tick here to opt in to contact via text/WhatsApp
	PO No.	Quote No.
	VAT exempt? Yes No	Yes If "Yes" please attach certificate
Post Code	Account No.	Grant No.
Upgrade to a FastTrack mail-in service? FastTrack guarantees a 48hr turnaround from date of receipt	Yes No	Please note there is an additional charge of £6 per single channel and £22 per multi-channel for this service.

Pipette Calibration Level UKAS Calibration (in accordance with ISO17025) as detailed on page 2

Make or model of device	Qty	Make or model of device	Qty
-------------------------	-----	-------------------------	-----

A Did the device(s) listed require decontamination?	Yes	No	If "No" go to B
Nature of contaminant			
Method of decontamination			
Decontaminated by	Name		Date
B Are any special handling precautions required?	Yes	No	If "Yes" please specify below
Spare parts (select 1 option only)	I authorize that any spare part(s) required may be replaced up to the value of:		
	£40	£70	£100
	Please tick this box if you do not want any parts to be fitted.		
	We will fit parts to the vales of £40 if no box is ticked		

NOTE: A £15 charge may be applied for pipettes found to be unrepairable or uneconomical to repair due to the time taken to investigate

I CONFIRM THAT THE INFORMATION GIVEN ABOVE IS ACCURATE AND THE DEVICE(S) DETAILED ARE SAFE TO WORK ON.

Name	Date
Position	Signed

UKAS pipette decontamination declaration.

NOTE THAT NO PIPETTE CAN BE SERVICED / CALIBRATED WITHOUT A COMPLETED AND SIGNED DECLARATION

The following are mandatory requirements for all UKAS accredited calibrations, please complete all sections.

Type of calibration A separate form must be completed for each type.	As Found ¹ Please tick if no external clean is required. ¹ If your pipette fails As Found would you like us to perform a Service & Post Calibration? Yes No	Service & Calibration	As Found, Service & Post Calibration
---	---	-----------------------	--------------------------------------

Specification pipettes are to be calibrated to Note: These specifications do not include measurement	ISO8655 (Max. Permissible Error)	Manufacturer's	User defined ²
² If user defined, please specify below or attach your required specifications:			

Calibration level	10 measurements at 3 volumes	5 measurements at 3 volumes* <input type="checkbox"/>
	10 measurements at 2 volumes	5 measurements at 2 volumes*
	10 measurements, fixed volume	5 measurements, fixed volume*
*By selecting 5 measurements per volume I understand that it will not permit a conclusion of conformity with ISO8655		

Due date	Yes No	If "Yes" please specify duration:	months
----------	--------	-----------------------------------	--------

Pipette quantity	Total number of single channel pipettes to be calibrated
	Total number of multi channel pipettes to be calibrated

Pipette tips	Your pipettes will be calibrated using Starlab TipOne® tips, unless tips are supplied with your pipettes
--------------	--

Certificates	A full, detailed certificate including accuracy and precision with statements of uncertainty will be provided for each pipette calibrated. Note: Conformity statements are not made as standard on certificates unless previously requested in writing prior to the calibration being performed.
--------------	---

Comments

Name

Date

Position

Signed

If completing electronically, printed name will be deemed as signing.