



NATA Accredited Calibration Service  
**Pipette**  
 Decontamination Procedure

---

**PREFERRED PAYMENT METHOD**
**Purchase Order Number:**
**EFT Transaction No.**
**OR** **Card Type:**      Visa              Master Card              American Express

**Card Holder Name:**
**Card Number:**
**Expiry:**
**Shipping Address** *\*Mandatory Fields*
**\*Company Name:**
**\*Name:**
**Phone:**
**\*Email Address:**
**\*Address:**
**\*Suburb:**
**\*State:**
**\*Postcode:**
**Invoice Address** *(if different from above)*
**Name:**
**Department:**
**Phone:**
**Email Address:**
**Address:**
**Suburb:**
**State:**
**Notes**

**Standard Calibration** - Includes 5 recorded readings at both the high end and low end of the pipette, using Pathtech's calibration method which is based on the ISO 8655-6 Gravimetric Method

**NATA Accredited Calibration Service** - Includes 10 readings at 3 points (low, middle and high) before (as found) and after calibration for every channel, in accordance with the ISO 8655-6 Gravimetric Method. **Multi-channel calibration and service currently unavailable with NATA accreditation.**



# NATA Accredited Calibration Service Pipette Decontamination Procedure

TO AVOID DELAYS please fill out both sides of this form in its entirety.

Please tick appropriate area

	Product Make / Model	Volume	Serial Number	W	CO	C&S	Description & Comments
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							

W = Warranty    CO = Calibration Only    C&S = Calibration and Service\*

\* Consumable parts such as seals / o-rings will be replaced unless otherwise specified

\*\*Pathtech reserves the right to charge a \$20.00 (ex GST) inspection fee / return freight charge per pipette where customer declines to proceed with repair quote.

**Please indicate below if listed equipment has been used with any of the following:**

Bio-hazardous materials      Radioactive specimens      Hazardous chemicals or solvents

Other \_\_\_\_\_

**Fault Description:** \_\_\_\_\_

Please tick if you would like a quote prior to works being commenced

Please proceed with necessary repairs where economical to do so

**Reminder Period:**    3 months    6 months    12 months    None    Other (please specify) \_\_\_\_\_

**Hard Copies** Please tick if you require hard copies of your service reports. Electronic copies will be emailed to you on completion, by default.

**Decontamination Declaration:** We certify that these pipettes have been carefully cleaned and decontaminated from bacteriological, chemical or radioactive contamination or have not been exposed to any hazardous liquids. Therefore, we can certify that these pipettes are safe for human handling. Upon request we agree to give the necessary information for proof a decontamination method has been appropriated.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_