Research Equipment/Furniture Decommissioning

Contact Ir	nformation	Date of Request:	
Full Name:		-	
Phone Numbe	r:	-	
Email Address	:	-	
Equipmen	t Location		
Building:		Room Number:	
Items to b	e Decommissioned		
Quantity	Item Description	Model	Serial Number

Submit this form to: Department of Environmental Health and Safety@queensu.ca

Next steps: After EHS technician applies Decommissioned sticker, contact Facilities Waste & Recycling Services

https://www.queensu.ca/facilities/services/energy-and-waste-management/recycling