UCF Environmental Health and Safety UNIVERSITY OF CENTRAL FLORIDA	**Effective Date:** 04/27/2018	**Revision: 1**
TITLE: Laboratory Closeout/Transfer Form	**Responsible Authority:** Laboratory Safety Coordinator	

The PI who is closing out or transferring responsibility of the laboratory is required to notify EH&S prior to doing so. The PI must complete this form and submit it to EH&S at least 30 days prior to closing out or transferring his or her laboratory. EH&S will schedule a meeting with the PI (or designated alternate) and provide written feedback to the PI within 15 days after the meeting.

Name of PI relinquishing use of Lab: _____

Name of PI gaining use of the Lab: _____

Expected Closeout/Transfer Day: _____

Department: _____

Department Chair: _____

Laboratory rooms under control of PI: _____

PI Office and Phone at UCF: _____

PI Address and Phone After Departure from UCF (as applicable):

_____

Hazardous Materials in Labs (check all that apply):

☐ Chemicals ☐ Biological Agents ☐ Radioisotopes

☐ Radiation Producing Equip. (x-rays, lasers)

☐ Other (specify) _____

☐ Waste (specify chemical, biological or radiological) _____

_____ _____
Signature of Current PI Date

_____ _____
Signature of New PI Date

_____ _____
Signature of Department Chair or Director Date