

FORM DECLARATION OF NON-OBJECTION FB PV 09

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		of	1
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Issue: 18.05.2022

	Company stamp or:			Order No.:					
Sender:	Company:			Contact person:					
	Street:	eet:			Department:				
	City:				Phone:				
	Country:	-			Email:				
IMPORTANT!	Apparatus		ial-No.						
IMPO	Type of device:								
Characteristics (Please ndicate)	Devices we send for repair/ inspection: were not in contact with hazardous substances were in contact with radioactive substances were in contact with hazardous substances, namely with: (Please attach safety data sheet!)								
	Designatio of substan		toxic	corrosive	flammable	Dangerous	2 90. 0	safe	
						to environ ment	to health		
	Properties of substances which the equipment came in contact:	vith uip-							
	Properties of substances uto clean the equipment:								
Safety measures	Device was cleaned:	s	with water	water high pressure	solvents	other detergent	s blasted	not cleaned	
Safety	The inspection takes place in consideration of the security policy. (safety shoes, protective clothing, working gloves, safety glasses and mask) In case the a.m. PPE is not sufficient, the device cannot be repaired at ARCA.								
We hereby confirm that the devices provided are free from hazardous and toxic substances. The above-mentioned safety precautions are also sufficient in case the device contains small residual deposits.									
Place, Date Signature									