



Returned Equipment Questionnaire

3225 West Old Lincoln Way
Wooster, Ohio 44691
Ph. Ohio 800-421-5141 Fx. 330-262-6678
Ph. Texas. 888-987-4267 Fx. 936-273-2669

Customer: _____

Address: _____

Contact Name: _____

Equipment Type: _____

Serial Number: _____

Reason for Return: _____

Has the equipment been cleaned and any asbestos insulation removed?

Yes No

Never in Service

Method used to clean/de-contaminate: _____

What are the chemicals used in the equipment during the last production sequence:
Please provide MSDS for each chemical listed.

Please provide the name and phone number of your company representative most familiar with the chemicals used in this equipment, and who could be contacted in the event of an emergency related to those chemicals.

Name: _____ Ph. No.: _____

Information in this questionnaire is accurate to the best of my knowledge.
Should any information given be found inaccurate or new information becomes available,
Tricor Industrial, Inc. will be notified immediately.

Name: _____ (print) Ph. No.: _____

Title: _____ Date: ____/____/____

Fax#: _____

Signature: _____

- Tricor Industrial, Inc. will not accept any equipment that arrives on site without a bill of cleaning and all applicable MSDS sheets.