

## FORM 12 (ENG): STANDARD CALIBRATION - Order & Decontamination Declaration

Customer/no.: \_\_\_\_\_ Contact (name): \_\_\_\_\_  
 Address: \_\_\_\_\_ Department: \_\_\_\_\_  
 \_\_\_\_\_ E-mail: \_\_\_\_\_  
 EAN no.: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Service agreement no.: \_\_\_\_\_ PO/order: \_\_\_\_\_

| No. | Pipette manufacturer: | Serial no.: | Customer ID no.: | No. | Pipette manufacturer: | Serial no.: | Customer ID no.: |
|-----|-----------------------|-------------|------------------|-----|-----------------------|-------------|------------------|
| 1   |                       |             |                  | 6   |                       |             |                  |
| 2   |                       |             |                  | 7   |                       |             |                  |
| 3   |                       |             |                  | 8   |                       |             |                  |
| 4   |                       |             |                  | 9   |                       |             |                  |
| 5   |                       |             |                  | 10  |                       |             |                  |

|                                      | 5.2                      | 5.3                      | 6.3                      | 10.2                     | 10.3                     | 10.1                     | 10.1 Fixed vol.          |  |
|--------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--|
| PreCal (As found - before service)*  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <b>Pipetting mode - write P, rP or D</b><br><i>If the box is empty; Pipettes will be calibrated in P-mode and Dispensers in D-mode</i> |
| Calibration(As left - after service) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <b>**Multichannel pipettes</b><br><i>If no X - all channels will be calibrated</i>   |
| ONLY Calibration (No service)        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <b>All channels are calibrated</b>   |
|                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <b>3 channels are calibrated</b><br><b>The outer channels and the middle one.</b>  |

\*) A pre-calibration documents the functionality of the pipette before a service is done.

\*\*\*) For multichannel pipettes where one or more calibration points are ≤ 10 µl, Danddiag uses a 5-decimal multichannel balance instead of a 6-decimal balance as otherwise prescribed in ISO 8655-6. When using a multichannel balance, use of the multichannel pipette is reflected and the uncertainty is approx. 0,07 µl against approx. 0,04 µl for a 6-decimal balance.

### SPECIFICATIONS

*If no X - the ISO 8655 max. errors will be used*

|  |                          |
|--|--------------------------|
| ISO 8655 - Max. errors                             | <input type="checkbox"/> |
| TT Type test - manufac. performance spec.          | <input type="checkbox"/> |
| TT*1,5 Can be use for not new pipettes             | <input type="checkbox"/> |
| Customers own user specifications must be attached | <input type="checkbox"/> |

### TIPS / Tip cone FILTERS

|  |                          |
|--|--------------------------|
| Customers tips -                       | <input type="checkbox"/> |
| should be sent in original packaging   | <input type="checkbox"/> |
| NO thanks to inserting tip cone filter | <input type="checkbox"/> |

### SERVICE, ADJUSTMENT etc.

|   |                          |
|---|--------------------------|
| Service is ordered  | <input type="checkbox"/> |
| NO adjustment   | <input type="checkbox"/> |
| Repair, please write the malfunction                                  | <input type="checkbox"/> |
| Pipettes are purchased with an annual annual free service maintenance | <input type="checkbox"/> |

Remarks: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Please contact me, if the repair price per pipette exceeds: \_\_\_\_\_ DKK (don't include change of battery)

The undersigned hereby declares that the pipettes have been carefully cleaned, decontaminated and **filters are removed**:

70% Ethanol   
  Decontamination liquid   
  Other   
 \_\_\_\_\_  
 The pipettes have been use for?   
 \_\_\_\_\_

The pipettes have been used for radioactive liquids

If the pipette has been used for radioactive liquids, documentation for residual radiation must be sent (attached).

Date: \_\_\_\_\_ Name: \_\_\_\_\_