

**MGS QUALITY PROCEDURE**

Form No MGS/QF/038

ISS. 1

DATE : NOV05

SIG : SKH

**RETURNED EQUIPMENT HEALTH & SAFETY CLEARANCE (MGS)****TO BE COMPLETED BY CUSTOMER**

PLEASE ATTACH 1 COPY TO THE OUTSIDE OF THE CONSIGNMENT

FAX 1 COPY TO MGS (QUALITY) +44(0) 01359 271168

CUSTOMER NAME &amp; ADDRESS

CONTACT NAME + TEL No

EQUIPMENT DESCRIPTION / MODEL TYPE

EQUIPMENT SERIAL No

RETURNS AUTHORISATION NUMBER

**CLEAN COMPONENTS**

This section is to be completed if the equipment has not been contaminated

This equipment has not come into contact with any toxic, hazardous or radioactive substances at any time.

SIGNATURE :(Customer)

**CONTAMINATED COMPONENTS**

This section is to be completed if the equipment has been exposed to any toxic or hazardous materials.

Please list below all contaminants (including gases) and any decontamination process used together with any cleaning materials used.

Contaminants

The dispatch of any contaminated goods will be in accordance with the appropriate regulations covering packaging, transportation and labelling of dangerous substances. I hereby declare that to my best knowledge the information supplied is complete and accurate.

SEND TO

QUALITY DEPARTMENT  
**MARTON GEOTECHNICAL SERVICES**  
**ROUGHAM INDUSTRIAL ESTATE**  
**BURY ST EDMUNDS**  
**SUFFOLK IP30 9ND**  
**UNITED KINGDOM**



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[sales@mgs.co.uk](mailto:sales@mgs.co.uk)      [www.mgs.co.uk](http://www.mgs.co.uk)

SIGNATURE (Customer)

NAME (Customer)

POSITION (Customer)

DATE :

RETURN COMPLETED FORM TO CUSTOMER (1 COPY) : SERVICE DEPT (1 COPY) : QUALITY FILE (1 COPY)