



YSI Recycling Program Product Return Form

If known, please provide your
YSI Customer # _____

Step 1: Provide your contact information

Your Name: _____

Address: _____

Phone: (____) _____

Fax: (____) _____

Email: _____

Step 2: Provide information on your equipment

| Model Number | Serial Number |
|--------------|---------------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Step 3: Complete a Cleaning Certificate for each instrument being returned (additional certificates are available on page 2)

Model Number: _____

Lot/Serial Number: _____

Contaminants (if known):

Cleaning Agents Used:

Radioactive Decontamination Certified
(check only if product has been exposed to radiation and successfully decontaminated)

Cleaning Certified By (sign after printing):
X _____

Date: ___/___/_____

Step 4: Print this form and include with your shipment.

Step 5: Package your equipment and ship to:

YSI Incorporated
Product Recycling Program
1725 Brannum Lane
Yellow Springs, OH 45387
+1 (937) 767-7241

Be sure to clearly mark the package for the
'Product Recycling Program'.

Important:

YSI will **NOT** receive the following items:

- Liquids
- Batteries
- Cadmium column waste
- Reagents

Do **NOT** ship these items to YSI. Please contact your local regulatory agency for proper disposal of these items.



Cleaning Certificate

Model Number: _____

Lot/Serial Number: _____

Contaminants (if known):

Cleaning Agents Used:

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(check only if product has been exposed to radiation and
successfully decontaminated)

Cleaning Certified By (sign after printing):

X _____

Date: ___/___/_____

Cleaning Certificate

Model Number: _____

Lot/Serial Number: _____

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(check only if product has been exposed to radiation and
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X _____

Date: ___/___/_____

Cleaning Certificate

Model Number: _____

Lot/Serial Number: _____

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X _____

Date: ___/___/_____

Cleaning Certificate

Model Number: _____

Lot/Serial Number: _____

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X _____

Date: ___/___/_____