

ReUse Program Instructions

(Download for fillable/printable form)

Items may be functional or repairable and should:

- ✓ Have accessories such as cords, manuals, keys, etc. securely attached
- ✓ Be removed from inventory if applicable. Use the [Capital Equipment Asset Disposal Form](#) when disposing of currently recorded capital equipment assets
- ✓ Be clean and safe:
 - All materials removed from drawers, etc. Including:
 - Trash, files and papers (exception for equipment manuals)
 - Hazardous materials (chemicals, sharps, research samples, etc.)
 - Decontaminated (if applicable) from potential:
If advice is needed for decontamination or disposal of anything below please contact Health, Safety and Risk Management (HSRM) at hsrcm@umn.edu.
 - Chemicals or hazardous materials (if mercury or asbestos contact UHS)
 - Biohazardous materials (remove biohazard stickers when decontamination complete, note: biological safety cabinets must be professionally gas decontaminated and documented)
 - Radioactive materials (Department of Radiation Safety must survey items used with radioactive materials *before* radiation labels can be removed and items can be sent to ReUse, contact UHS)
- ✓ Be clearly marked for **ReUse** by attaching a completed [ReUse Program Asset Pick-up Form](#)
 - Use one form for multiple items, attach additional sheet if needed, clearly mark all items (e.g. a piece of masking tape w/ ReUse written on several items, or on a box of multiple items.)
 - Items **CANNOT** be picked up if they are not marked or are not listed on the completed form
- ✓ Be at your designated [ReUse Route Pickup Location](#) by 6 a.m. of pick up day

This process will ensure all items are going to the proper facility and verifies the items are safe for our drivers to handle.

Thank you for participating in the ReUse program.

ReUse Program Asset Pickup Form

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The form **MUST** be attached to identify University property sent to ReUse

See Reverse for Instructions

Building Name: _____ Building Number: _____ Room: _____

Department: _____ Phone: _____

Contact person: _____ Email: _____

Description of items	If item needs repair please check box and make notes in comments if problem known	Must Check Box to verify items are cleaned out and/or decontaminated	Quantity
Total number of items			

Comments

All items listed are property of the University of Minnesota

ReUse