

# Biosafety Permit Declaration of Decommissioning

**Principal Investigator or Department Head name:**

**Biosafety permit number held:**

**Lab spaces used to store and/or manipulate biological agents risk group 1 and 2:**

My signature below (Principal Investigator/Biosafety Permit Holder or Department Head) declares that all work with biological agents registered by the permit number given above have been concluded.

- All equipment, areas and facilities used in the course of the work have been cleaned and disinfected using a disinfectant which is effective against the biological agents used and according to the [U of M decommissioning procedure](#).
- Any biological hazard warning symbols, signs or stickers have been removed or fully defaced at the time of decommissioning
- I have ☐ **disposed** or ☐ **transferred** (*select one or both as appropriate*) all of the biological materials used in the work according to the University of Manitoba Biosafety Guide or Public Health Agency of Canada / Canadian Food Inspection Agency requirements.
- All disposed items have been marked as such on the individual EHSA database bioagent inventory item.

**For items that have been transferred**, complete the following as appropriate:

**Accepting PI/Permit holder name:**

**Accepting PI/Permit holder Biosafety Permit # (if U of M):**

**New locations (U of M building and room #s):**

If you are transferring bioagent inventory items to a registered user outside of the University of Manitoba append a copy of the [U of M Biohazardous Agent Transfer Notification](#) .

List the **EHSA database biological agent inventory number and description** of the items being transferred.

**NOTE:**

1) The easiest way to make a list may be to generate the bioagent inventory report from the EHSA database and save as an Excel sheet or Word doc/table and then edit the list as required. It can then be appended to this form.

2) EHSO Biosafety Program can facilitate the **electronic transfer** of biological agent inventory items or a whole permit to another permit holder. Please contact the U of M Biosafety officer (BSO) or email [ehso@umanitoba.ca](mailto:ehso@umanitoba.ca) .

Signature \_\_\_\_\_ Date:

Print Name:

Your signature indicates your agreement to abide by the above conditions. Should the principal investigator choose to resume working with risk group 1-4 biological agents at the University of Manitoba they will need to obtain an approved biological safety permit before doing so.