
REQUEST FOR ETHYLENE OXIDE TREATMENT

Date: _____

Business (User) Name: _____

Contact Name: _____

Business Address: _____

Phone Number: _____

Email Address: _____

Description of Goods:

Product code/s: _____

Batch number/s: _____

Product name/s: _____

Additional description: _____

e.g. medical devices, pharmaceutical, packaging, imported goods for Quarantine treatment, etc.

Any special storage conditions required:

Uncontrolled Customer-specific (please specify): _____

Quantity: _____ cartons _____ pallets

Purchase Order No (if applicable): _____

Are the goods intended for import into the US market?

NOTE: If the products are not therapeutic goods, select NO.

No Yes (Supply NDC/510(k) details as attachments)

Ethylene Oxide (EO) Fumigation Treatment Requested (tick one):

Unvalidated (Biosecurity EO Cycle - AQIS 1200mg)

Routine - RPI No: _____

Validation - RPI No: _____

I/we do hereby authorise Steritech Pty Ltd to arrange for the treatment of said goods by Ethylene Oxide (ETO) and further agree ***not*** to hold Steritech Pty Ltd responsible for any damage which may be caused during treatment or carriage of the goods.

Signed: _____ Name: _____

Please return form by email or in person: Email: mcarnell@steritech.com.au