| **Equipment Name:** |  |
| --- | --- |
| **Manufacturer:** |  |
| **Equipment Model:** |  |
| **Serial Number:** |  |
| **Unique ID:** |  |
| **CDC Barcode Number:** |  |
| **IQ Date / OQ Date:** |  |  |
| **Initial Warranty / Maintenance Dates of Service:** |  |
| **Order Confirmation Number (vendor-specific):** |  |
| **Performed By:****(tech/vendor name)** |  |
| **Team Lead Review:****(or designee)** | **Sign:** |
| **Print:** | **Date:** |
| **Quality Assurance Requirement:** | **Equipment added to ID Database?**[ ]  Yes [ ]  No, explain: |
| **Quality Assurance Review:** | **Sign:** |
| **Print:** | **Date:** |

**Note:** Attach documentation provided by the vendor to this coversheet.