**MONTHLY REFRIGERANT INVENTORY AND USAGE FORM**

**FACILITY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MONTH \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**COMPLETED BY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Total number of pieces of equipment which use refrigerants:**

**Beginning of month \_\_\_\_\_\_ / end of month \_\_\_\_\_\_. Change \_\_\_\_\_.**

**Refrigerant inventory in ounces start \_\_\_\_\_\_\_\_\_\_\_\_\_\_ (sum total of all equipment)**

**Refrigerant inventory in ounces end \_\_\_\_\_\_\_\_\_\_\_\_\_\_ (sum total of all equipment)**

**Discrepancy + / - (if any) \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Reason for discrepancy (equipment added or removed?) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Total ounces of refrigerant added for the month (from Form #2) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Total ounces of refrigerant reclaimed/recycled (from Form #2) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Has verification been provided that all leaking equipment has been successfully repaired? Please**

**specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Has any equipment with a refrigeration charge of 50 pounds or more had any leaks that have exceeded the trigger rates established in Section 608 of the Clean Air Act? Y/N (**circle one**)**

**If yes, have repairs been made within the timelines as established in Section 608 of the Clean Air Act? Y/N (**circle one**) If No please explain:**

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**Were repairs made by facility staff\_\_\_\_\_ or outside contractor\_\_\_\_\_?** (please check all that apply)

**Certified Technician’s name and company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Make and Model # of refrigerant recovery equipment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Is refrigerant recovery equipment listed above certified by the EPA? Y / N** (circle one)

**Have signed statements been obtained and kept on file for the disposal of small appliances from which refrigerants have been removed? Y / N** (circle one)

 **A hardcopy of this form is to be kept on file with the refrigerant program for three years.**