

6. * Do all your service technicians have the appropriate certification under Section 608 of the Clean Air Act (e.g. Type I for small appliances, Type II for high or very high pressure appliances, Type III for low pressure appliances and Universal for all types of equipment)? *If no, skip to question # 8. A list of EPA-approved Section 608 certifying organizations can be downloaded from EPA Region 2's website at <http://www.epa.gov/region02/cfc/rshome.htm> or obtained by calling the Stratospheric Ozone Hotline at 1-800-296-1996.*
7. For each service technician, record his/her name, certification level, certification number, testing agency and the type of equipment he or she services (e.g. small, high pressure, low pressure). *See Form B*
8. * Does your facility send used refrigerant to an EPA-approved reclamation facility? *A list of EPA Certified Reclaimers can be downloaded from EPA Region 2's website at <http://www.epa.gov/region02/cfc/rshome.htm> or obtained by calling the Stratospheric Ozone Hotline at 1-800-296-1996.*
- Note: Refrigerant may be returned to the appliance from which it is recovered or to another appliance owned by the same person without being reclaimed.
9. Have you converted any of your equipment to a new refrigerant? *If no, skip to question #12.*
10. * Are the new refrigerant(s) approved under EPA's Significant New Alternatives Policy (SNAP) Program? *A list of acceptable refrigerants under EPA's SNAP Program can be downloaded from EPA Region 2's website at <http://www.epa.gov/region02/cfc/rshome.htm> or obtained by calling the Stratospheric Ozone Hotline at 1-800-296-1996.*
11. * Was a new refrigerant label installed on the equipment?
12. Does any of the refrigerant equipment types checked in question 1 contain more than 50 pounds of refrigerant? *If no, stop.*
13. Record the following for each unit containing more than 50 pounds of refrigerant: the location, company designation, manufacturer, model #, serial # from name plate, refrigerant type, refrigerant charge and method used to determine full charge. *See Form C.*
14. * Does your facility keep service records on all 50+ pound units that document the date and type of service as well as the quantity of refrigerant added?
15. * Does that facility calculate the leak rate on all 50+ pound units? NOTE: The leak rate that triggers mandatory repairs is 15% Comfort & Other and 35% for Industrial Process & Commercial in a 12 month period.
16. * Are leaks above the allowable leak rate repaired within 30 days? or 120 days if an industrial process shut down is required?
17. * If no repairs were conducted or repairs failed, was a retrofit or retirement plan prepared and available for review?
18. * FOR INDUSTRIAL PROCESS ONLY: If leak repairs have been conducted, was
1. an initial verification test conducted?
 2. a follow-up verification test conducted within 30 days of the successful initial verification test?

Note: If you checked any of the boxes that are starred, you may be out of compliance with Section 608 of the Clean Air Act. If you voluntarily disclose to EPA any of the violations found through the use of this checklist, you may eliminate or substantially reduce the penalties associated with these violations. For more information about these potential penalty reductions, call EPA Region 2's Compliance Assistance and Program Support Branch at 212-637-4050.

Disclaimer: The statements in this checklist are intended solely as guidance to aid regulated entities in complying with Section 608 of the Clean Air Act. The checklist is not a substitute for reading the regulation and understanding all its requirements as it applies to your facility. EPA may decide to update this checklist without public notice to reflect changes in EPA's approach to implementing Section 608 of the Clean Air Act or to clarify and update text. To determine whether EPA has revised this checklist and/or to obtain copies, contact EPA Region 2's Compliance Assistance and Program Support Branch at 212-637-4050 or visit our webpage at: <http://www.epa.gov/region02/cfc/rshome.htm>

**FORM A -
Recovery/Recycle Equipment Inventory**

Name of Recovery Equipment:	
Manufacturer:	
Model #:	
Serial #:	
Date of Manufacture:	
Refrigerant types:	

Name of Recovery Equipment:	
Manufacturer:	
Model #:	
Serial #:	
Date of Manufacture:	
Refrigerant types:	

Name of Recovery Equipment:	
Manufacturer:	
Model #:	
Serial #:	
Date of Manufacture:	
Refrigerant types:	

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Model #:	
Serial #:	
Date of Manufacture:	
Refrigerant types:	

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Manufacturer:	
Model #:	
Serial #:	
Date of Manufacture:	
Refrigerant types:	

Name of Recovery Equipment:	
Manufacturer:	
Model #:	
Serial #:	
Date of Manufacture:	
Refrigerant types:	

**FORM B -
Technician Certification Information**

Technician Name:	
Certification Level:	
Identification Number:	
Testing Agency:	
Testing Agency EPA Approval Date:	

Technician Name:	
Certification Level:	
Identification Number:	
Testing Agency:	
Testing Agency EPA Approval Date:	

Technician Name:	
Certification Level:	
Identification Number:	
Testing Agency:	
Testing Agency EPA Approval Date:	

Technician Name:	
Certification Level:	
Identification Number:	
Testing Agency:	
Testing Agency EPA Approval Date:	

Technician Name:	
Certification Level:	
Identification Number:	
Testing Agency:	
Testing Agency EPA Approval Date:	

Technician Name:	
Certification Level:	
Identification Number:	
Testing Agency:	
Testing Agency EPA Approval Date:	

Technician Name:	
Certification Level:	
Identification Number:	
Testing Agency:	
Testing Agency EPA Approval Date:	

Technician Name:	
Certification Level:	
Identification Number:	
Testing Agency:	
Testing Agency EPA Approval Date:	

**FORM C -
Refrigerant Equipment Inventory**

Unit Designation:	
Location:	
Manufacturer:	
Model #:	
Serial #:	
Refrigerant:	
Charge:	
Method Used:	

Manufacturer:	
Model #:	
Serial #:	
Refrigerant:	
Charge:	
Method Used:	

Unit Designation:	
Location:	
Manufacturer:	
Model #:	
Serial #:	
Refrigerant:	
Charge:	
Method Used:	

Unit Designation:	
Location:	
Manufacturer:	
Model #:	
Serial #:	
Refrigerant:	
Charge:	
Method Used:	

Unit Designation:	
Location:	
Manufacturer:	
Model #:	
Serial #:	
Refrigerant:	
Charge:	
Method Used:	

Unit Designation:	
Location:	
Manufacturer:	
Model #:	
Serial #:	
Refrigerant:	
Charge:	
Method Used:	

Unit Designation:	
Location:	