



FORM 4: MEDIUM & LARGE APPLIANCE DISPOSAL INFORMATION

I. Appliance Description- Asset Number _____ or fill out Section I.

- A. Full charge of appliance: ___ lbs. ___ oz.
- B. Current charge of appliance: ___ lbs. ___ oz.
- C. Refrigerant type: _____
- D. Make & model of appliance: _____
- E. Serial Number: _____
- F. Location of appliance: _____
- G. Responsible FSU department: _____
- H. Reason for disposal: _____

II. Refrigerant Description

- A. Date of removal: ___/___/___
- B. Quantity of refrigerant removed: ___ lbs. ___ oz.
- C. Refrigerant type: _____
- D. Responsible party/contractor for removing refrigerant: _____
- E. Method of removal: _____
- F. Equipment used: _____
- G. Accidental release of refrigerant during maintenance? Yes / No
If yes, approximate amount release: ___ lbs. ___ oz.

III. Disposition Description

- A. Date of disposition: ___/___/___
- B. Quantity of refrigerant being dispositioned: ___ lbs. ___ oz.
- C. Method of disposition (circle one): Recovered / Reused / Recycled / Reclaimed / Other disposal method
- D. Location of storage OR company handling disposition: _____

IV. Future Action & Additional Notes:

Technician Name (printed) *Technician Signature* *Company Name* *Date*

Submit completed form to FSU Refrigerant Compliance Manager, Omar Baltodano at obaltodano@fsu.edu or 969 Learning Way, Mendenhall A Building, office 115B, Tallahassee, FL, 32306. Contact (850) 7564362.