



FORM 6: LARGE APPLIANCE RETROFIT/RETIREMENT PLAN

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

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

II. Retrofit/Retirement

- A. Is this a retrofit or a retirement? Retrofit / Retirement
- B. Estimated Start Date for Retirement/Retrofit: ___/___/___
- C. Estimated Date of Completion for Retirement/Retrofit: ___/___/___
- D. If this is a retrofit, complete the following section:
 Type of refrigerant pre-conversion: _____
 Type of refrigerant post-conversion: _____
 Full charge post-conversion: ___ lbs. ___ oz.

III. Plan for Disposition of Recovered Refrigerant

- A. Date of disposition: ___/___/___
- B. Quantity of refrigerant being dispositioned: ___ lbs. ___ oz.
- C. Type of refrigerant: _____
- D. Responsible party/contractor for removing refrigerant: _____
- E. Method of removal: _____
- F. Equipment used: _____
- G. Method of disposition: Recovered / Reused / Recycled / Reclaimed / Other disposal method
- H. Location of storage OR company handling disposition: _____

IV. Additional Required Documentation (to be attached prior to submission)

- Schedule for completion of retrofit or retirement to be executed within one year.
- All records of repair attempts, completed repairs, and leak reports for the previous three years until the date of plan submission (all instances of *Forms 1, 2, and 3* associated with this appliance).
- If applicable, itemized procedure for converting the appliance to a different refrigerant, including changes required for compatibility with the new substitute.

FSU Representative Name (printed)

Representative's Signature

Date