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to the control of the	
I,, do hereby acknowledge that all of our settechnicians have received training on venting, recovery, recycling, and replaceme	
chlorofluorocarbons (CFCs), hydrochlorofluorocarbons (HCFCs), and other refrige	
air conditioning and refrigerant systems, units, and small appliances, and have tal	ken and
passed an EPA-approved test appropriate for the equipment that they service and of.	l/or dispose
I am aware that regulations require that persons servicing appliances normally co	ntaining
refrigerant must provide the owner/operator of such appliances with an invoice of	
documentation, which indicates the amount of refrigerant added to the appliance to provide this documentation.	and I agree
I agree that all of our service technicians will follow procedures for servicing, repa	
disposing of any and all refrigerant-containing devices, units, and systems as outli	•
company policy and federal, state, and local laws and regulations now in effect or enacted which pertain to the Federal Clean Air Act of 1990 (as amended).	hereinafter
I am aware of the significant harm to the earth's atmosphere caused by venting re	efrigerants
into the air. We agree not to willfully vent refrigerants into the air under any circu	
I understand that our organization will be held responsible and liable if I or any of technicians willfully violate the Federal Clean Air Act of 1990 regarding venting of	
and that we are liable for any and all fines associated with violations (currently up	-
per occurrence). Any unintentional venting will be documented in accordance wit policy.	
I understand that if we willfully violate the Clean Air Act of 1990 (as amended), we	e will fullv
protect, indemnify, hold harmless, and defend the Penn State University from and	•
and all liability regarding the handling, venting, and/or disposal of any and all refr	_
We also agree to provide a copy of the Federal Certification numbers for all our so technicians and information regarding recycling and recovery equipment upon re	
Company Representative:	
Printed Name	
Signed Date	
Company Information:	
Name:	
Address:	
Phone Number:	

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