### CUMC Refrigerant Service Order Form

**Service Request – Why dispatched**

- [ ] Isolated Leak
- [ ] Dispose of Unit
- [ ] Minor Maintenance
- [ ] Refrigerant Conversion
- [ ] Major Maintenance

**Recovery Unit used**

- Recovery Vacuum: 0” “10” “15” Inches

- Recovery Vacuum: 28.2”

- Recovery stopped, (Air)

- Transferred to receiver/ condenser, or pump out unit.

- Unit flat at “0” psig could not recover

**Refrigerant**

<table>
<thead>
<tr>
<th>Refrigerant</th>
<th>Cylinder ID</th>
<th>Type</th>
<th>Condition</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recovered</td>
<td></td>
<td></td>
<td></td>
<td>Lbs oz</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Lbs oz</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Lbs oz</td>
</tr>
</tbody>
</table>

- Added

<table>
<thead>
<tr>
<th>No cylinder Id # if Contractor supplied</th>
<th></th>
<th>Lbs oz</th>
</tr>
</thead>
<tbody>
<tr>
<td>New Unit Startup Charge</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Leaks**

- [ ] Leak Found  
  Date: ____________

- [ ] Leak Repaired  
  Date: ____________

- [ ] Initial Leak Verification Test  
  Date: ____________  
  Method: ____________

- [ ] Follow-up Verification Test  
  Date: ____________  
  Method: ____________

- [ ] Trace Gas Used  
  R-Type: _______  
  Cylinder ID _______  
  Quantity _______  
  Lbs _______ oz

- [ ] Accidental Release Occurred  
  Description of accident:

  Estimated Amount Released _______ lbs _______ oz

**Leak Notes:** Exact location of leak and description of how repaired

Forward completed Form to Facilities Operations  
Form Revised 12/08