OZONE DEPLETING SUBSTANCES (ODS) RECORD DATA SHEET

For the Period of:_____ 20___ through:_____ 20___

VIRGIN REFRIGERANT/HALON USAGE OR RECOVERED ODS USAGE

USE ONE SHEET FOR EACH TYPE OF REFRIGERANT

Name of Technician: _____ Certification Number: MB_____ Employer: _____

Date dd/mm/yyyy	Location of Work Performed and/or Customer Address & Contact Name	Invoice or Work Order #	Type of Work Performed (repair/ install) & Type fo Unit/System	Refrig. ODS Type	Amount Recharged
			Refrigerant Type and total recharged		

Under Section 8 "Repair and Serivce Records" of the Manitoba ODS Regulation, you must record the following information. Indicate the date of work, location, bill, invoice, or unit number, short description of the work performed unless the noted invoice# documents this, the type of ODS use separate sheets for different ODS's and/or tanks) the amount of refrigerant of ODS charged/recharged into the system for every work order. You should weight a cylinder for the difference (subtract) before/after each application for accuracy.

Submit a copy of this info by **Feb. 1st** every year for the previous years ODS work records (January 1- December 31). Provide a copy to your employer and maintain a copy for your records for a period of 3 years and mail or fax a copy of the sheets to: **The Manitoba Ozone Protection Industry Association**, 1082 Main St, Winnipeg MB, R2W 5J3, or fax to **(204)338-0810**. If you have any questions please call **(204)338-2222**, visit **mopia.ca** or email **mopia@mymts.net**. Note: Customer's invoice/work order should explain the services provided (on file). Make these records available to an Environmental Officer upon request.

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