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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **REPORTING FORM FOR THE EU F GASES REGULATION**  **Reporting year: Date submitted:** | | | | | | | | |
| **1. Operator name, installation and reporting person:** | | | | | | | | |
| **Telephone number:** | | | | **E-mail:** | | | | |
| **2. Equipment make:**  **Equipment type:** | | | | **Equipment model:**  **Equipment capacity:** | | | | |
| **3. Year equipment installed:** | | | | | | | | |
| **4. Date when the release occurred (known or estimated):** | | | | | | | | |
| **5. Details / likely cause of the release:** | | | | | | | | |
| **7. Type of F gas released:** | | | **8. Quantity released (estimated if necessary)** | | | | | |
| **kg** | | | | **Tonnes CO2e** | |
|  | | | |  | |
| **9. Steps taken to resolve / prevent recurrence of the release:** | | | | | | | | |
| ***For BEIS Purposes Only*** | | | | | | | | |
| **Environmental Inspector:** | | | | | | | | |
| **Inspector’s Assessment:** | | | | | | | | |
| **No Further Action** |  | **Further Information Requested** | | |  | **Further Action Taken** | |  |
| **Additional Details:** | | | | | | | | |
| **Date Completed:** | | | | | | | | |