



# Application form for Replacement Incentive Programme

<b>1.Applicant Details</b>	
<b>Type of Applicant</b>	
Individual <input type="checkbox"/>	National ID No:
Business/Organization <input type="checkbox"/>	Registry No:
Name:	
Address:	
Contact No:	
Email ID:	

<b>2. Proposed Equipment for Replacement</b>				
<b>Type of Equipment</b>				
Split Type AC <input type="checkbox"/>	Deep Freezer <input type="checkbox"/>	Household Refrigerator <input type="checkbox"/>		
VRV (multi split type ) <input type="checkbox"/>	Chest Freezer <input type="checkbox"/>	Household Chiller <input type="checkbox"/>		
Others <input type="checkbox"/>				
<b>Quantity of Equipment</b>				
Total quantity of R-22 used in the company/individual (kg)				
Quantity of HCFC used for the proposed equipment (kg)				
Age of the equipment				
Refrigerant to be used for replacement (Low GWP refrigerant)				