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IIR REFRIGERATION SAFETY — EVENT REPORTER

Please record only public, non-confidential information. The survey includes 20 questions organised in 7 sections. Submit one form per event.

* required question

Type of the event

1. What type of event was reported? (select multiple if applicable) *
Tick all that apply.
☐ Refrigerant release
☐ Pressure burst
\square Explosion (ignition of flammable gas)
□ Fire
☐ Freeze-burn
\square Toxic reaction
☐ Asphyxiation
☐ Electrocution
\square Fall from height
Other:
2. What were the consequences of the event reported? (select multiple if applicable)*
Tick all that apply.
□Death
☐ Major injury
☐ Minor injury, inconvenience
☐ Damage to property
\square Damage to the environment
Other:

3. Please quantify the consequences reported above, if applicable. Location and date of the event 4. Country* 5. City 6. Date of event * E.g. 7 January 2019 Application and life cycle 7. What kind of application was involved? (Select one) Mark only one oval. ☐ Household refrigeration ☐ Household air conditioning ☐ Household heating \square Commercial air conditioning and heating ☐ Data center cooling ☐ Hospitality refrigeration ☐ Retail refrigeration ☐ Food processing ☐ Cold storage ☐ Transport refrigeration ☐ Transport air conditioning ☐ Car air conditioning ☐ Leisure facility ☐ Miscellaneous industrial process Other:

8. What type of equipment was involved? (Select multiple if applicable)
Tick all that apply.
☐ Domestic fridge/freezer
☐ Room air conditioner (split, window, portable)
☐ Heat pump
☐ Chiller
☐ Monoblock refrigeration
☐ Distributed evaporator
☐ Remote condensing unit
☐ Remote compressor pack
☐ Stand-alone cabinet
☐ Blast freezer/icemaker
9. In which stage of the life cycle did the event occur? (Select one)
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Mark only one oval.
Mark only one oval. □ Production
Mark only one oval. ☐ Production ☐ Transport
Mark only one oval. □ Production □ Transport □ Installation and commissioning
Mark only one oval. □ Production □ Transport □ Installation and commissioning □ Intended use (normal operation)
Mark only one oval. Production Transport Installation and commissioning Intended use (normal operation) Maintenance
Mark only one oval. Production Transport Installation and commissioning Intended use (normal operation) Maintenance Service (repairing)
Mark only one oval. Production Transport Installation and commissioning Intended use (normal operation) Maintenance Service (repairing) Dismantling and decommissioning
Mark only one oval. Production Transport Installation and commissioning Intended use (normal operation) Maintenance Service (repairing) Dismantling and decommissioning Working on the system (other than servicing or maintenance, e.g. retrofitting)

Suspected nature and cause of failure

10. What is the suspected nature of failure? (Select multiple if applicable)
Tick all that apply.
☐ Technical – A physical component of the system failed.
\Box Organizational – Procedure, role, and responsibilities did not exist or were faulty.
\square Human – Existing and valid procedure was not duly followed (voluntary or not).
Other:
11. What is the suspected root cause? (Select multiple if applicable)
Tick all that apply.
\square Wrong or bad design – The design was not according to function, constraint, environment expected.
\Box Intrinsic material defect – A component, deemed to be in good condition, set in the system, was initially defective.
\square Bad use – The system was used in violation of existing and valid rules.
\Box Out of scope use – The system was operated outside the constraints and limit provided by design (e.g. retrofitting).
$\hfill\square$ No scheduled maintenance – Nothing was planned as preventive maintenance.
\square Bad maintenance – The scheduled maintenance operation was performed incorrectly or not carried out at all (e.g. due to lack of qualification).
\square Wear - the component had followed a natural wear curve.
☐ External event – The cause of the failure originated outside (fire due to another system, natural event, people outside of the staff, forklift shock, etc.).
Other:

Refrigeration system if details are known

12. Which refrigerant was used in the system? (Enter R-number or trade name)

applicable)
Tick all that apply.
□ Compressor
☐ Heat exchanger
☐ Expansion device
☐ Pressure relief valve
☐ Piping or pressure vessel
☐ Access port
\square Ancillary (cylinder, recovery machine, hoses, manifold set)
☐ Electrical component
☐ Electrical wiring
□ Controls
Other:
Additional information
14. Please can you briefly describe the context of the event and any information missing above?
15. Is your entry a follow-up of an event that you have reported earlier?
\square Yes - In this form, I provide additional information for an event reported earlier.
\square No - It is a first record, as far as I know.
16. What could be done better next time to avoid the event?

Reference and contact details

17. Please provide the link(s) to at least one publicly available source so that we may find more information and verify your report. You can also send a document to refrigerationsafety@gmail.com . *
19. Would you like to provide personal contact details to provide further information?
20. Please enter your email address so that we may contact you for additional questions if necessary. Your address details will remain confidential and will never be published.