OMB Control No. 2060-0528 Approval expires: Pending Approval

Partner Response Form

Instructions

To submit Product Control Measures, complete Sections I, II, III, IV, and V below. Fields highlighted yellow are required. Click on each field for additional instructions. EPA will not accept Partner Response Forms that do not include a representative signature at the bottom.

Save your completed form as "Delisted Product_[Company Name]_[Model Number]" and submit the form to enforcement@energystar.gov. EPA will review your submittal, and notify you once the form is approved or if additional information is neccessary.

This collection of information is approved by OMB under the Paperwork Reduction Act, 44 U.S.C. 3501 et seq. (OMB Control No. 2060-0528). Responses to this collection of information are voluntary (Section103(g) of the Clean Air Act). An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The public reporting and recordkeeping burden for this collection of information is estimated to 1.5 hours per response. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates and any suggested methods for minimizing respondent burden to the Regulatory Support Division Director, U.S. Environmental Protection Agency (2821T), 1200 Pennsylvania Ave., NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed form to this address.

OMB Control No. 2060-0528

Section I: Product and Shipping Information					
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Partner Name (company):		Date Last Manufactured:			
Delisted Model Number (from EPA letter):		Date of Last Sales Shipment (labeled units):			
Delisted Model's Brand Name:		Recipient of Last Sales Shipment (labeled units):			
Original Equipment Manufacturer (OEM):	De	estination of Last Sales Shipment (labeled units):			
Model's ENERGY STAR Product Category:		Units Shipped in Last 6 months (labeled units):			
Delisted Product Notification Date:		Total Units Manufactured (labeled units):			
Is the model promoted by an energy efficiency program and/or utility? (If yes, provide name[s])					

Section II: Contact Information

Environmental Protection Agency Washington, D.C. 20460

Point of Contact at Your Company:	Original Equipment Manufacturer (OEM):	
Title:	OEM Contact:	
Email:	Title:	
Phone:	Email:	
Additional Contacts: Name (Email)	Phone:	

Environmental Protection Agency Washington, D.C. 20460

Section III: Certification of Product Control Measures (PCM)

For the model numbers in Sections I and V, the company named in the Partner Name field of Section I is undertaking the following measures. Note: If you seek to deviate from the proposed measures after EPA has approved them, you must notify EPA prior to making any changes.

1) Inform the distribution chain that the model(s) is/are not ENERGY STAR certified:
EPA requires that you inform all downstream parties to whom you directly sold the model as ENERGY STAR certified in the last two years, including distributors, retailers, consumers, and other affected organizations (e.g., utilities), that the model(s) is/are no longer ENERGY STAR certified. Use the table below to submit a list of these entities. Note: If you need additional rows, please submit along with this form a word document listing the other organizations

Organization Name:	Organi	ization Type:	Proposed or Actual Completion Date:		
e.g., Big Box Store	e.g., Na	e.g., National Retailer		e.g., <i>03/15/12</i>	
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Environmental Protection Agency Washington, D.C. 20460

Section IV: Additional Model Numbers						
Use this section for affected family models. Fill out a new form for any models requiring different actions or estimated completion dates from those entered in Section III.						
Additional Model #:	Units Shipped in Last 6 Months:	of Last Sales Ship				
Additional Model #:	Units Shipped in Last 6 Months:	of Last Sales Ship				
Additional Model #:	Units Shipped in Last 6 Months:	of Last Sales Ship				
Additional Model #:	Units Shipped in Last 6 Months:	of Last Sales Ship				
	Section V (optiona	ıl): Additional Comments				
Use this section to provide EPA with relevant information not included elsewhere in this form.						
Representative Signature						
As a representative of this company, I hereby certify on its behalf as to the actions taken or to be taken by it, as described above. Failure to implement these actions as indicated, or to inaccurately certify as completed, may result in partnership suspension or termination, or the loss of other ENERGY STAR program benefits. I understand that intentionally submitting false information to the U.S. government is a criminal violation of the False Statements Act, Title 18 U.S.C. section 1001.						
	Name (First & Last)	Date	I agree to the above statement			

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