ULT (-80C) FREEZER SUBSIDY PROGRAM

Offered by UC San Diego Facilities Management

PROGRAM DESCRIPTION

The freezer subsidy program offers university labs a chance to save money AND become more energy efficient. If you have a freezer that you need replaced or if you are about to purchase a brand new one, we’d like to encourage your lab to purchase an energy-efficient freezer. If your lab decides to purchase an ENERGY STAR® rated model, our department will offer a $1,600 rebate to help offset the cost. To find an ENERGY STAR rated model, please refer to the following site: ENERGY STAR ULT (-80C) Freezers. The new freezer must be an upright freezer with less than 30 cubic feet capacity.

Please see the detailed steps below in order to participate in this program.

STEP-BY-STEP

1. Contact our department (see email below) to confirm your participation in this program.

2. Purchase a new freezer (using the link referenced above: ENERGY STAR ULT Freezers) through your department. If this isn’t a replacement freezer, skip to Step 6.

3. Defrost your old freezer. Please reference UCSD guidelines for defrosting a research freezer (see attached pdf).


5. Dispose of your old freezer. Fill out a University Movers Request Form (see attached pdf). This will begin the scheduling process to remove the old freezer and transport to surplus sales. Surplus personnel will assess the unit for any re-usable parts and recycle appropriately using UCSD EH&S approved vendors.

6. Send our department a copy of your Marketplace invoice (from your freezer purchase) and we will come by for final documentation of your new freezer.

7. Finally, we will transfer the rebate to your department’s index number.

If you choose to participate in this program, understand that support from our team will be limited to providing funding. Purchasing of replacement/additional freezers, and proper removal of existing freezers, will be the responsibility of the labs. After FM verifies the purchase (packing slip, receipt, and on-site verification) AND verifies that the old unit was properly disposed of (if applicable), we will transfer the rebate to your index.

If you are interested in this program please contact Michelle Perez at mcperez@ucsd.edu.
How to Properly Defrost Your Research Freezer

1. Plan for 2 days of freezer downtime during this process.
   ❏ Never move a freezer to a non-research space (e.g., balcony, corridor, office, etc.) for defrosting.

2. Before thawing, identify hazardous materials stored in the freezer. Follow the steps below for radioactive, biohazardous, and hazardous materials.

   **Radioactive material:**
   ❏ If the freezer has been used to store radioactive material, collect some ice and test the sample with a liquid scintillation counter before relocating any freezer contents.
   ❏ If the melted ice registers greater than 3 times background (using tap water as your control), collect the ice as radioactive waste and label it for pickup by EH&S. If the freezer is contaminated, decontaminate it accordingly.
   ❏ See the Radiation Safety Manual for guidance, or contact the [Health Physicist](mailto:HealthPhysicist@Building) for your building.

   **Biohazardous material:**
   ❏ If the freezer has been used to store biohazardous material, collect the ice and add 1 part bleach to 9 parts melted ice.
   ❏ Allow 20 minutes of contact time before pouring the melted ice down the drain (preferably in a fume hood).

   **Hazardous chemicals:**
   ❏ Wipe down the unit if contamination is suspected or visible contamination is present.

3. Remove the contents of the freezer. Evaluate what to save and what to eliminate.

4. Unplug the freezer in the morning. This allows you to monitor runoff throughout the day.
   ❏ Never use sharp objects to chip at the ice. Freezer walls are easily punctured by sharp objects, allowing coolant to escape and resulting in expensive repairs or replacement costs.
   ❏ Never allow liquid to run directly onto floors creating a slip hazard, or down any outside drain (a potential regulatory violation).

5. Establish a wick and reservoir system to manage the melting ice:
   ❏ Place a piece of bench paper (paper side down, plastic side up) inside the freezer, on the lower level and lead it into a large autoclave pan.
   ❏ Surround the freezer and autoclave pan with paper towels or bench paper.
   ❏ Manage contaminated ice and liquid according to instructions in step 2.

6. Clean the freezer inside and out with a 10% bleach solution (required if the unit was used for biohazard storage). Clean dirt and dust off the exterior coils, if you can access them, to extend the life of the freezer and save energy.

7. Plug in the freezer and wait for the desired temperature to be reached.

Questions? Contact the EH&S [Research Assistance Program](mailto:ResearchAssistanceProgram@Building) specialist for your building.
Instructions
1. Please complete the top portion of the form. Moving Services will assign the Job Number.
   - List all items requiring relocation.
     NOTE: Moving Services jobs are scheduled according to the requested tasks listed on the form. If you realize you need additional items or work performed, please submit a new Moving Services Form. The additional work will be scheduled for a later date.
   - Indicate the date and the time of day you are requesting the items to be relocated.
   - Indicate any special instructions.
     Example: Door to building must be removed, Desks require disassembly and reassembly, etc.
2. Moving Services will contact you to confirm the date and time of the relocation.
3. After reading the statement authorizing work to be completed, sign your name on the Signature Line.
4. Submit the form through BFSupport or email arescobedo@ucsd.edu.

Important Information:
- There is a one hour minimum for each Moving Services staff member performing the task.
- Laboratory Relocations: All laboratory relocations must be cleared by EH&S. Equipment and items must be green tagged before Moving Services can handle them. For more information, contact the Research Assistance Program (RAP) specialist assigned to your area or visit the EH&S web site.
- Insurance: Moving Services is insured through UCSD Risk Management. To obtain or acquire more information on insurance prior to your move, contact UCSD Risk Management, (858) 534-2454 or (858) 534-3820.
- For urgent requests, call the Moving Services Coordinator at (858) 864-3957.
- Lead time for the performance of a relocation job is 5-7 days when school is in session and 7-10 days in the summer.
- Moving Services will pick up Surplus Sales items at the Moving Services recharge rate. To complete the delivery to Surplus Sales, the Surplus Transfer Request process must be complete. If available, provide the Surplus Transfer Request (STR) number on the form in the Job Description.
- Moving Services will not mount any load bearing items on walls. Contact Facilities Maintenance for this task.
IPPS MOVING SERVICE FORM

Phone: ___________________________ Department Contact: (First & Last Name) ___________________________ Today’s Date: ___________________________

Email Address: ___________________________ Department Index: ___________________________ Mail Code: ___________________________

Location of Items: ___________________________ Requested Date of Relocation: ___________________________ Time: ___________________________

Insurance: It is the department’s responsibility to determine and obtain, if necessary, insurance on items being moved. For information on obtaining additional insurance, contact Risk Management EH&S at (858) 534-2454 or 534-3820.

I authorize Moving Services to complete the work indicated on this form. Signature: ___________________________

Job Description (include Special Instructions and Directions):

<table>
<thead>
<tr>
<th>QUANTITY</th>
<th>ITEMS TO BE MOVED</th>
</tr>
</thead>
</table>

Note: If all items do not fit on form, please attach a list.
Submit the form through BFSupport or email to arescobedo@ucsd.edu.

<table>
<thead>
<tr>
<th>LABOR</th>
<th>TIME</th>
<th>LABOR</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>DATE</td>
<td>NAME</td>
<td>Start</td>
<td>Finish</td>
</tr>
</tbody>
</table>

Total Recharge

P.O. Number: ___________________________ Signature: ___________________________ Print: ___________________________