



DUPLICATE CREDENTIALS REQUEST FORM (609)

To obtain a duplicate of your Refrigerant Recovery and Recycling certificate and wallet card, please submit this form with method of payment to:

ATTN: 609 Credential Reprints
ASE
1503 Edwards Ferry Rd. NE, Ste. 401
Leesburg, VA 20176
Fax (703) 669-6127

Name _____

Address _____

City _____ State _____ Zip Code _____

Last 4 Digits of SSN _____ ASE ID Number _____
(example: ASE-0000-0000)

Date of Birth (month/day/year) _____ Daytime Phone Number (including area code) _____

Duplicate credentials cost \$10.00 per person. Please indicate your method of payment. ASE is required to collect sales tax on applicable purchases in AZ, CO, HI, NJ, NM, NY, OH, SC, SD, TX, VA, WA, & WV.

Check _____ Money Order _____ Visa _____ MasterCard _____ Discover _____ American Express _____

Credit Card Number _____

Expiration Date (month/year) _____ Zip Code _____

Name of Cardholder (please print) _____

Signature of Cardholder _____