



Office Use Only

RECYCLED LAMP PICK-UP REQUEST FORM

Revere Electric Supply
2501 W. Washington Blvd
Chicago, IL 60612
Ph: (312) 528-2395
Fx: (312) 738-4047

Order Number: _____

Order Number: _____

GENERATOR PICK UP LOCATION:	
Name:	
Address:	
City/State/Zip:	
Phone:	Fax:

HANDLER LOCATION:	
Name:	
Address:	
City/State/Zip:	
Phone:	Fax:

The material as marked under "DESCRIPTION OF WASTE" is properly identified and prepared for transportation and tender in accordance with all applicable statutes, ordinances, permits, rules and regulations of the Federal, State, and local governments in whose jurisdiction such material originates, passes through, or is tendered for delivery. I certify (or declare) under penalty of perjury that the foregoing is true and correct. Fluorecycle, Inc. upon acceptance and disposal of the above described waste will have rendered a service and, upon submission of an invoice, charges will be due in accordance with contract or, in lieu of a contract, prevailing Fluorecycle, Inc. rates in effect at time of service.

Print Name of Site Contact

Signature and Title of Site Contact

Date

MATERIAL	QUANTITY	DESCRIPTION OF WASTE:															
Fluorescent Lamps:		<input type="checkbox"/> Fluorescent Lamps <input type="checkbox"/> Whole <input type="checkbox"/> Crushed <input type="checkbox"/> HID Lamps <input type="checkbox"/> Ballasts <input type="checkbox"/> Other															
4-ft. or less.....																	
More than 4 ft.																	
U-Bend lamps																	
Circular lamps.....																	
Compact lamps.....																	
Other																	
HID Lamps (mercury vapor, metal halide, high pressure sodium)																	
Drums of whole lamps																	
Drums of crushed lamps																	
Other material:		<div style="text-align: center;">Certification Required</div> <input type="checkbox"/> YES <input type="checkbox"/> NO															
Ballast drums or lbs.....																	
Incandescent lamps																	
<p>Lamp Packaging is in accordance with Fluorecycle, Inc specification sheet. Ballast packaging in sealed DOT APPROVED 55 gal. Steel drums.</p> <table style="width: 100%; border: none;"> <tr> <td style="text-align: center;">Available site attributes:</td> <td style="text-align: center;">Loading Dock</td> <td style="text-align: center;">Lift Gate</td> <td style="text-align: center;">Palletization</td> <td style="text-align: center;">Manual Loading</td> </tr> <tr> <td style="text-align: center;">YES →</td> <td style="text-align: center;">→ <input type="checkbox"/></td> <td style="text-align: center;">→ <input type="checkbox"/></td> <td style="text-align: center;">→ <input type="checkbox"/></td> <td style="text-align: center;">→ <input type="checkbox"/></td> </tr> <tr> <td style="text-align: center;">NO →</td> <td style="text-align: center;">→ <input type="checkbox"/></td> <td style="text-align: center;">→ <input type="checkbox"/></td> <td style="text-align: center;">→ <input type="checkbox"/></td> <td style="text-align: center;">→ <input type="checkbox"/></td> </tr> </table>			Available site attributes:	Loading Dock	Lift Gate	Palletization	Manual Loading	YES →	→ <input type="checkbox"/>	→ <input type="checkbox"/>	→ <input type="checkbox"/>	→ <input type="checkbox"/>	NO →	→ <input type="checkbox"/>	→ <input type="checkbox"/>	→ <input type="checkbox"/>	→ <input type="checkbox"/>
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NO →	→ <input type="checkbox"/>	→ <input type="checkbox"/>	→ <input type="checkbox"/>	→ <input type="checkbox"/>													

Requested pick up date
1st choice _____ 2nd choice _____

Available Loading Hours
Time of date _____