



I.T. Recycle Now
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1. Request Info

Today's Date: _____ Requested Pickup Date: _____

2. General Info

Company: _____ Phone: () _____
 Contact/Title: _____ Fax: () _____
 Physical Address: _____
 City: _____ State: ____ Zip: _____

3. Pickup Location Info

Check If Address Same As Above

Company: _____ Phone: () _____
 Contact/Title: _____ Fax: () _____
 Physical Address: _____
 City: _____ State: ____ Zip: _____

4. Estimated Covered Electronic Waste (CEW)

Palletized CEW Number of Pallets: _____
 Non-Palletized CEW Estimated Number of Pallets: _____

Description of CEW: _____

5. Comments / Instructions

 Authorized Signature

 Date