



# CSI EPC

electronics processing centre

## PICK-UP / DROP-OFF FORM

Pick up and Drop off hours: Monday – Friday 9:00am to 4:30pm

Requested Drop off DATE: \_\_\_\_\_

<b>Client Contact Name:</b>	<b>Client Company Name:</b>
<b>Phone Number:</b>	<b>Billing Address the Same</b> (please circle or highlight one): YES NO
<b>Pickup Address:</b>	<b>If NO:</b>
<b>Email Address:</b>	

<b>Loading Dock Required for pick up?</b>	YES	NO	<b>What Province or State is eWaste located?</b>	
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**Quantities (Please circle appropriate item and count)**

TV 18" and smaller	Monitors (CRT & LCD)	Desktop Printers
TV 19"-29"	CPU's	Combo Printers
TV 30"-45"	Laptops	Keyboards, Mice, Cables, Speakers
TV 46" & Larger	Laptop Cases	Other Accessories
Office Equipment:	Stereo Equipment:	Medical & Testing Equipment:
Cell / Telephone	DVD / CD / VHS player	Household Electronics:
Fax / Scanner	Tuner / Receiver / Amp	Satellite and Digital Receivers:
Photocopier	Turn Table / Tape Deck	Other (specify):
Ups / Servers / Hub	Speaker & Portable Stereo	Other (specify):

Processing to recover metals by various steps (Including crushing, grinding, screening, melting and dissolving) completely destroys the product and all materials are disposed of by environmentally sound methods and in accordance with all applicable environmental standards.

Client Signature: \_\_\_\_\_

**To finalize your pickup or Schedule a drop off, fill out this form and email to xxxx or fax to xxxxxxxx. You will receive a call back during business hours to confirm shipment details!**

**INTERNAL USE ONLY**

<b>Scheduled Pick-up Date:</b>	<b>Scheduled Pick-up Time:</b>
<b>Pallets / Wrap / Dolly/ Pallet Jack Needed:</b>	<b>Account Representative Name:</b>

Time arrived at client pick up location: \_\_\_\_\_ Time departed client location: \_\_\_\_\_

Product Count confirmed by CLIENT to be as stated above: Confirmed by: \_\_\_\_\_

Product Count confirmed by DRIVER to be as stated above: Confirmed by: \_\_\_\_\_

<b>Internal Pick up</b>	YES	NO	<b>Customer arranged shipping</b>	YES	NO
<b>Certificate of Recycle</b>	YES	NO	<b>Certificate of Destruction</b>	YES	NO

Product count confirmed by accounting to be as stated above. Confirmed by: \_\_\_\_\_

**TOTAL WEIGHT:** \_\_\_\_\_ kgs

**Pickup Fee:** \$ \_\_\_\_\_

**GST:** \$ \_\_\_\_\_

<b>TOTAL CHARGED:</b>	<b>Invoice No:</b>	<b>Date:</b>
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