



## E-Waste Recycling Request Form

**Complete and fax to: 603-378-0816 or email to [sales@encorecycles.com](mailto:sales@encorecycles.com)**

<p><b>Generator:</b>          Company: _____          Contact: _____          Address: _____          City: _____          State: _____ Zip: _____          Phone: _____          Fax: _____          E-mail: _____</p>	<p><b>Bill To:</b>          Company: _____          Contact: _____          Address: _____          City: _____          State: _____ Zip: _____          Phone: _____          Fax: _____          E-mail: _____          Purchase Order #: _____</p>
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**Electronic Waste:**

(Circle One)

Computers/CPU's/Peripherals	# of Containers/ Pallets /Items _____	or _____	Lbs.
Monitors/CRT's	# of Containers/ Pallets /Items _____	or _____	Lbs.
Obsolete Electronics (TV's/Copiers/Fax/Misc.)	# of Containers/ Pallets /Items _____	or _____	Lbs.

<p><b><u>Transportation Requirements, Check All That Apply:</u></b></p> <p><input type="checkbox"/> Truck with a lift gate is required to pick up material.  <input type="checkbox"/> Forklift available for loading the material onto truck.  <input type="checkbox"/> Material is stored on the loading dock.  <input type="checkbox"/> Material will need to be manually loaded onto truck.  <input type="checkbox"/> Are there height and/or length restrictions at dock.  <input type="checkbox"/> Full-size tractor-trailer can fit into the loading dock.</p>	<p>Available loading hours: _____ am/pm to _____ am/pm</p> <p>Loading area point of contact: _____</p> <p>Telephone: _____</p>
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