

# Commercial Volumes

## Whole Lamp Pick-Up Services

### Application Form

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Large volume generators in Manitoba, including businesses, contractors, relampers, schools, building managers, etc. can qualify for a free pick-up service to recycle their lamps through Product Care.

### Pick-Up Service for Whole Lamps – minimum of one pallet

Large volume generators are encouraged to consolidate a minimum of one pallet or more of whole lamps (i.e. lamps that have not been intentionally crushed) to qualify for a free pick-up service. A consolidated pallet of lamps should contain approximately:

- 750 4 foot fluorescent tubes, or;
- 1,200 CFLs,
- or combination of other shaped lamps; (i.e. U-shape, etc.)

A combination of lamp types that would equate to the same volume. Note: lamps vary in size. The above estimates are guidelines only.

If you are able to generate a minimum of one pallet of lamps within a reasonable period of time, direct pick-up is a convenient option. Product Care requires the lamps to be safely packaged before picking up, and will supply approved collection containers at no cost if required. Collection containers can be requested in advance. Containers and lamps MUST be protected from the weather and remain dry.

### Complete this Application Form

Please complete this application form to be registered as a large volume generator with the program to receive lamp pick-up services. You can apply to be a repeat generator or a one time only generator.

Once completed, the form can be emailed to [mbdispatchlights@productcare.org](mailto:mbdispatchlights@productcare.org) (preferred option) or faxed to 604 592-2982.

If you have questions on this matter, please contact Wayne at [mbdispatchlights@productcare.org](mailto:mbdispatchlights@productcare.org) or by phone at 1-888-811-6234 (Ext. 216)

Note: Product Care's program also includes recycling locations for consumers with household quantities of lamps (bulbs and tubes) as well as recycling locations designated to accept lamps from large volume generators (contractors etc.) with under one pallet

See [www.productcare.org/products/lights/manitoba](http://www.productcare.org/products/lights/manitoba) for more information.

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## Company Information:

Company name:

Contact email:

Contact person:

Contact phone:

Contact fax:

## Site Information:

Note: if you have multiple sites, please provide requested information for each site (form can be modified as required, or attach a separate list)

Pickup site name:

Pickup frequency:

One-Time	Multiple
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Site address:

Postal code:

Power Tailgate (PTG) required?

Yes	No
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Onsite contact name:

Onsite contact phone:

Shipping location details: (which door to access, etc.)

Operating days + hours:

Monday:	<input type="text"/>	Thursday:	<input type="text"/>
Tuesday:	<input type="text"/>	Friday:	<input type="text"/>
Wednesday:	<input type="text"/>	Weekends:	<input type="text"/>

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## Company Information:

**Company name:**

(please provide again in case pages are separated if faxed)

## Estimated # of Whole Lamps Generated Monthly:

Please estimate the number of whole lamps (i.e. lamps that have not been intentionally crushed) that you expect to generate for pick-up by Product Care on a monthly basis.

**2 and 4 ft fluorescent tubes:**

**8 ft fluorescent tubes:**

**CFL lamps:**

**Various - Shaped lamps:**

U-Shaped or O-shaped tubes  
etc.

## Recycling Information:

**How did you hear about us?**

**Were you receiving lamp pick-up/recycling services prior to January 1, 2020?**

Yes

No

**If yes, which company provided service to your sites(s)?**

Note: this answer is optional and is considered confidential.

**If yes, please describe the type of collection containers (boxes etc.) that you have been using and who has been providing them.**

Send completed form to either:

Email: [mbdispatchlights@productcare.org](mailto:mbdispatchlights@productcare.org)

Fax: 604.592.2982

Or Call: 1.877.592.2972 Ext 223



## LIGHT CONTAINER REQUEST FORM

### 1. Collection Site Details:

<b>SITE NAME:</b> _____	<b>TODAY'S DATE:</b> _____
<b>PHONE:</b> _____	<b>FAX:</b> _____
<b>YOUR NAME</b> (Please Print): _____	<b>EMAIL:</b> _____
<b>SIGNATURE:</b> _____	

Indicate collection site type:  
(Click only one box)

<input type="checkbox"/> Residential Only	<input type="checkbox"/> IC&I / Large Volume Generator
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### 2. Shipping Hours:

SUN	MON	TUES	WED	THURS	FRI	SAT

### 3. Collection (add quantities to be collected):

_____ # of CFL / Bulb BOXES	_____ # of 8ft TUBE BOXES
_____ # of 4ft TUBE BOXES	_____ OTHER

### 4. Supplies Needed (add quantities required):

_____ Empty Boxes CFL / Bulb	_____ Counter Cards (bundles of 50)	_____ Spill Kit
_____ Empty Boxes 4ft	_____ Posters	_____ Tape (for boxes)
_____ Empty Boxes 8ft	_____ Pallets	_____ Other

### 5. Other (please provide any additional comments or special shipping instructions):

**Please Note: The pickup of full boxes and the drop off of new empty boxes is not done at the same time. Supplies may also be delivered at a separate time.**

Forms may not be current due to changes in processes, regulations and procedures. Updates will be provided to your collection site as required and posted on [www.productcare.org](http://www.productcare.org). Please ensure you are using the most updated version of this form.