



Pickup Request Form

Site Details		
Site Name:		
Address:		
City:		Postal Code:
Contact Name 1:		Tel #:
E-mail:		
Contact Name 2:		Tel #:
E-mail:		
Site Hours for Pickups and Drop-offs	From:	To:
Is there a loading dock?	Yes:	No:
If no loading dock, is there parking available for a 26ft straight truck?	Yes:	No:
Pallet Jack on site	Yes:	No:
Forklift on site	Yes:	No:
Drum dolly on site	Yes:	No:
Quantities for Pickup		
Paint <input type="checkbox"/>	Lighting <input type="checkbox"/>	Recycling Certificate Needed for Lighting? <input type="checkbox"/>
# of full Gaylords:	# of full skids:	
# of full drums:	# of full 8' boxes:	
# of full tubskids:	# of other (please specify):	
Replacement Supplies		
Paint <input type="checkbox"/>	Lighting <input type="checkbox"/>	
# of Gaylords, Liners & Skids:	# of Gaylords, Liners, Dividers & Skids:	
# of Steel Drums:	# of Fiber Drums:	
# of Tubskids:	# of 4ft Lamp Boxes:	
	# of 8ft Lamp Boxes:	
	# of Bulb Boxes:	

The completed form **MUST** be submitted to ONpickup@productcare.org.

Phone: 1.877.592.2972 Ext 362 | Website: <https://www.productcare.org>

Additional Notes: