|  |  |
| --- | --- |
| Date |  |
| Department |  |
| Name |  |
| Phone number |  |
| Full Address  *(If your collection point is on Main Campus, please still include the full address).* |  |
| Backup contact information |  |
| Campus map reference |  |
| Access issues/times |  |
| Budget code/Internal order |  |
| Is a quote required? |  |
| Please confirm if there is help onsite to assist with loading the vehicle. |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Type of white goods  *Please include a photo when submitting the form to Waste Services* | Domestic or Industrial Item | Dimensions | Please confirm if the item has been decontaminated? |
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