**IDS CYLINDER COLLECTION REQUEST NOTE**

**Customer …………………………………………………………………………..**

**Office Use**

**IDS COLLECTION NUMBER:**

**Site To Collect From .…………………………………………………………..**

**Address ……………………………………………………………………………**

**………………………………………………………………………………………..**

**………………………………………………………………………………………..**

**\*\* PLEASE USE THIS FORM FOR ALL COLLECTION REQUESTS\*\***

**PLEASE SEND BACK VIA EMAIL TO :-** [**collections@climalife.dehon.com**](mailto:collections@climalife.dehon.com)

**Postcode …………………………………………………………………………...**

**Contact(s) on site ……………………………………………………………..**

**Contact Tel. Number..……………………………………………………………**

**Preferred Collection Date ………………………………………………………**

**Special Requirements …………………………………………………………..**

**(i.e.Tail lift reqd. (if no forklift on site), height/weight restrictions, time restrictions etc.)**

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| --- | --- | --- | --- | --- | --- | --- |
| **\*\*PLEASE ADVISE IF CYLINDERS ARE:** | **LOOSE**  **(not secured to a pallet or in an IDS cage)** | **IN AN IDS CAGE** | **SECURED TO A PALLET** | **\*\*Please ensure this is filled in as we will need to ensure there is adequate space on the vehicle\*\*** | | |
| **(PLEASE TICK AS APPLICABLE)** |  |  |  | **\*\*Qty of cages / pallets (if caged / palletised)** | |  |
|  | **Large Refrigerant**  **Cylinders (49kg to 60kg)** | **Small**  **Cylinders**  **(9kg to 13.6kg)** | **Frioplus**  **Cylinders**  **(17kg to 20kg)** | **Drum’s / IBC’s /**  **Nitrogen** | **\*Reclaim Cylinders**  **(Yellow/Green tops)**  **Please note: we require the cylinder numbers for these plus what product and quantity is in each.** | |
| **CYLINDER QTY:** |  |  |  |  |  | |
| **Cylinder Numbers: (8 digit barcode number on neck and base of cylinder)** | | | | | | |
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**\* Note; any recovery / receiver cylinders need to be detailed with Cylinder Number, Product & Weight this is a legal requirement for Hazardous Waste notes\***

**Both the customer and the driver MUST PRINT, SIGN & DATE WASTE NOTES. If this is missing or the waste note is incorrect it may incur additional charges.**

**Please allow 2-3 days for collection**

**Name & Contact number of person requesting collection:**

**Date Requested:**

Please note: If incorrect information is given failed collection charges may be incurred.

**E-mail to:** [**collections@climalife.dehon.com**](mailto:collections@climalife.dehon.com)