



BULKY ITEM PICK-UP REQUEST

Fax completed form to: (949) 916-9474

Service: (949) 444-9009

Property Name: _____

City: _____

Submittal date: _____

For trash-out or Resident, Apartment No.: _____

<input type="checkbox"/>	Mattresses/Box Springs	<input type="checkbox"/>	Refrigerators	<input type="checkbox"/>	Sinks/Vanities	<p><u>Please check one box</u></p> <p><input type="checkbox"/> Pickup only checked items</p> <p><input type="checkbox"/> Pickup checked items AND other bulky items found</p> <p>Cost is "per item" plus trip fee(s)</p> <p>E-WASTE</p> <p><input type="checkbox"/> TV's</p> <p><input type="checkbox"/> Stereo Systems</p> <p><input type="checkbox"/> Computers</p> <p><input type="checkbox"/> Other Electronics</p>
<input type="checkbox"/>	Day Beds/Foutons	<input type="checkbox"/>	Freezers	<input type="checkbox"/>	Toilets	
<input type="checkbox"/>	Bed Frames/Headboards	<input type="checkbox"/>	Stoves/Ovens	<input type="checkbox"/>	Showers/Tubs	
<input type="checkbox"/>	Bookshelves	<input type="checkbox"/>	Microwaves	<input type="checkbox"/>	Garage Door Motors	
<input type="checkbox"/>	Cabinets	<input type="checkbox"/>	Dishwashers	<input type="checkbox"/>	Shopping Carts	
<input type="checkbox"/>	Dressers/Credenzas	<input type="checkbox"/>	Trash Compactors	<input type="checkbox"/>	Trash Containers	
<input type="checkbox"/>	Chests	<input type="checkbox"/>	Washing Machines	<input type="checkbox"/>	Playground Equipment	
<input type="checkbox"/>	Armoires/Wardrobes	<input type="checkbox"/>	Clothes Dryers	<input type="checkbox"/>	Gym Equipment	
<input type="checkbox"/>	Entertainment Centers	<input type="checkbox"/>	Air Conditioner Units	<input type="checkbox"/>	Tires	
<input type="checkbox"/>	Mirrors	<input type="checkbox"/>	Hot Water Heaters	<input type="checkbox"/>	Pallets/Wood/Lumber	
<input type="checkbox"/>	Sofas/Love Seats	<input type="checkbox"/>	Bicycles	<input type="checkbox"/>	Christmas Trees	
<input type="checkbox"/>	Chairs/Recliners	<input type="checkbox"/>	Barbeque Grills	HAZARDOUS WASTE LIQUIDS		
<input type="checkbox"/>	Desks/Hutches	<input type="checkbox"/>	Windows/Glass	<input type="checkbox"/>	Gallons of paint	
<input type="checkbox"/>	Tables	<input type="checkbox"/>	Doors	<input type="checkbox"/>	Gallons of oil	
<input type="checkbox"/>	Filing Cabinets	<input type="checkbox"/>	Carpeting			

Signature

Title

Total number of items to be picked up
A STRATEGIC representative will call with your pick-up date

By signing this form, client agrees to hold harmless STRATEGIC and all its affiliates with respect to any claims arising out of, or resulting from the loss or damage of property as a result of the requested bulky item pickup.
