

Bulk Item Collection Request Form

Name:						
Address:						
Phone:						
Email:						
I reque	st the f	llowing items be	collected:			
1.						
Additional Items:						
_						
6						
The City will:						
 Only collect those items included on this form: Example: (Dining table and 4 chairs = (1) Item; Mattress/box spring with frame = (1) Item: 3-piece bedroom suite = (3) Items.) 						
 Only collect items placed at the end of driveway or within the tree lawn area next to the driveway. Items will not be collected if stored in a garage, shed or other out-building, or if obstructed by vehicles or other barriers. 						
Method of payment:						
	Check	: in the a	mount of \$	made payable	to "City	of Delaware"
	Cash p	iid at Public Works	in the amount of \$_	(Exa	ıct chanç	ge is required)
□ Visa □ Mastercard □ American Express □ Discover □ in the amount of \$						
Office Use						
Sta	aff Initia	::	Date:			Receipt Provided
Your Scheduled Collection date is:						

Have items to the curb by or before 7 a.m. the day of collection.