

Recycle 1 Plant Address

3209 S 36th St
Phoenix, AZ 85040
602-220-9200
http://recycle1usa.com



Start Date: _____

New Supplier/Vendor Form

Pickup Frequency: Weekly Monthly Other

Pickup Location Information

Account Type

Account Name: _____
Service Address: _____
City: _____ **State:** _____
Zip Code: _____
Phone # : _____
E-Mail Address: _____
Contact: _____
Hours of Ops: _____

Check One:

Corporation
Individual
LLC
Partnership

Billing / Payment Information

Bank Information

Billing Name _____
Billing Address _____
City: _____ **State:** _____
Zip Code: _____
Phone #: _____
Email Address: _____
Contact: _____
Tax ID/SSN #: _____

Bank Name: _____
Bank Address: _____
Account Number: _____
Routing Number: _____

Method of Payment

Check One: _____ EFT/ACH

Wire (wire fees TBD)

Check / Regular Mail

Payment Terms

Check One: _____ Net 30

1%, 10 Day

Other

PLEASE ATTACH A W-9 WITH COMPLETED VENDOR FORM.

Warehouse Information

Indicate Yes or No:

Dock: _____
Forklift: _____
Palletjack: _____

Additional Notes: _____

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BELOW TO BE FILLED IN BY RECYCLE 1 PERSONNEL

Container Information			Trailer Information	
	<u>#</u>	<u>Locking?</u>		
275 Gal totes	_____	_____	Box Truck	_____ Flatbed _____
3 yard bin	_____	_____	Trailer	_____ Size _____
4 yard bin	_____	_____	Door Type	_____
300 Gal	_____	_____	Take Pallets	_____ Take Shrink Wrap _____
Gaylords	_____	_____	Rolloff/Compactor/Frontload Information	
Polys	_____	_____	Hauling Company:	_____
Pallets	_____	_____	Bin Type:	_____
Cages	_____	_____	Product:	_____
95 Gallon	_____	_____	Pull Charge to Us:	_____ per haul
64 Gallon	_____	_____	Pull Chrg to Cust:	_____ per haul
			Landfill Fee:	_____ per ton

Pricing Information

Enter product and price per ton in this area.	OCC (B / L) _____ per ton	PRINT MIX(B / L) _____ per ton	MWL (B / L) _____ per ton
	SOP (B / L) _____ per ton	NEWS (B / L) _____ per ton	A Film (B / L) _____ per ton
	BOOKS _____ per ton	SWL (B / L) _____ per ton	B Film (B / L) _____ per ton

Misc. and Pricing Info: _____

Salesperson: _____ Date: _____

Approved By: _____ Date: _____