

SYRACUSE UNIVERSITY ELECTRONICS/COMPUTER RECYCLING FORM

| | | |
|--------------------|-----------------------|------------------------------|
| DEPARTMENT _____ | BUILDING / ROOM _____ | DATE _____ |
| CONTACT NAME _____ | EMAIL _____ | PHONE _____ CELL PHONE _____ |

PICK-UPS ON THURSDAYS

**USE THIS FORM TO RECYCLE OBSOLETE AND NON-WORKING COMPUTER AND ELECTRONIC EQUIPMENT.
TO HONOR THIS DISPOSAL REQUEST AND MEET REGULATORY REQUIREMENTS, PROVIDE ALL INFORMATION REQUESTED.**

Indicate if item needs to be physically destroyed or sanitized (wiped clean)

| ITEM # | ITEM TYPE | QUANTITY | S/N and/or PROPERTY TAG # | PHYSICAL DESTRUCTION | SANITIZATION (WIPED) |
|--------|-----------|----------|---------------------------|----------------------|----------------------|
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
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| 8 | | | | | |
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| 11 | | | | | |
| 12 | | | | | |

Provide ITEM TYPE, QUANTITY, SERIAL NUMBER and/or SU PROPERTY TAG NUMBER, if any, and indicate if physical destruction or sanitization is needed for EACH ITEM on this form, and email or fax it to Purchasing Office - Email: surplus@syr.edu / Fax: 443-4932
If you have questions, contact Penny Letcher (pkletche@syr.edu) Phone: 443-2288 / Our eWaste contact is Peter Bennison (pbennison@ewaste.com)