Buena Vista Arbor Care Co., Inc.

and Consulting Services

Convenient Free Dump List Request Form

Date: _____

Name: _____ Phone Number: _____ Email Address: _____

Address: _____

Where to dump (please give **SPECIFIC** instructions so the crew knows where you want them):

Weather Condition dumping (please note if the area you want us to dump is weather dependent, give instruction on where to dump in winter(wet) versus summer(dry). The trucks are heavy and WILL get stuck if you have them dump in a field during the soggy months):

Any other specifics, requests or any other thing else that we need to know

(Types of chips you don't want, seasons you want chips and don't want etc.):

We try to honor all specifics, requests or anything else; however there is no guarantee to what chips will be delivered

We use this list for the crew to dump when they need to empty the truck to continue chipping to finish a job, can we dump anytime at your address or do you want to be notified first and approve the chip dump?

_____ Dump anytime! _____ No, please call me first

If you mark dump anytime, it will increase the likelihood that you receive chips, however if you mark this box, we will dump with no notification and ***you will be responsible for the chips you receive whether you need them or not***. We do not remove people from our list unless requested.

By clicking "Dump anytime", I acknowledge that if I refuse the chips, I will be charged a $50 refusal fee. Initial: _____

By electronically signing this, I assume full responsibility for any chips dumped on my property. I understand that by marking "Dump anytime", I will receive no notification and chips can/will be dumped anytime at my address. I understand that all requests will be honored by the best of Buena Vista Arbor Care's ability but there is no guarantee that they can be met. I assume all responsibility for any damages done if the crew has issues with the location I choose to have them dump. I understand that by being placed on this list it is not a guarantee of chips. I understand that I will remain on this list unless I request to be removed.

Sign: _____

Please email form to our office: info@buenavistaarborcare.com

If you have any questions, please call:

Salem 503.364.TREE (8733) | Independence/Dallas 503.838.1644 | Corvallis 541.757.TREE (8733) | Albany 541.967.TREE (8733) | Lincoln City 541.994.TREE (8733) | Newport 541.265.9193