



Concessionaire/Tenant Vendor Pick-up Request

Concessionaire/Tenant Store Name & Location			
Concessionaire/Tenant Contact Name and Phone Number		Printed Name:	Contact Number:
Today's Date		Requested Pick-up Date & Time	
<ul style="list-style-type: none"> ○ Please note: Bradford will not accept return product until this form is completed, nor will our teams pick-up product not listed on the original faxed form. ○ Separate form to be used for each Supplier/Vendor ○ Please call the RDC to create your request. ○ Please attach a copy of this form to the properly wrapped product to be picked up. ○ Product picked-up and not taken by the designated Vendor within four (4) working days will be returned to the Concessionaire/Tenant 			
Product Name	Product Number	Number of Cases	Storage Requirements D=Dry; R=Refer; Z=Frozen
Vendor Name	Vendor Contact	Vendor Phone #	Vendor Pick-up/RMA
Printed Name BAL staff member collecting Pick-up			
Date and Time of Pick-up			
Does the Pick-up Request exactly match products being collected?		<input type="checkbox"/> Yes	<input type="checkbox"/> No – if checked, refuse pick-up and contact BAL mgmt