

Request for National Account Jobsite Closure

**Required fields are highlighted in red*

SUBMITTED BY

Company:

First Name:

Last Name:

Title:

Division:

Billing
Address:

City:

State:

Zip:

Telephone:

Email:



Need help?

Give us a call or submit this form.

To: **Central Service Team**

Airgas National Sales Support

Germantown, WI

1-888-453-9832 (office)

1-800-470-8088 (fax)

central.service@airgas.com

CYLINDER PICKUP

Date of Requested Cylinder Pickup:

Acetylene:

Argon:

CO₂:

Helium:

Nitrogen:

Oxygen:

Propane:

Other:

(input number of cylinders to pick-up)

JOBSITE INFORMATION

Job #:

PO#:

(or other internal project specific reference)

Name of
Jobsite:

Onsite Contact Name:

Telephone:

Email:

Address:

City:

State:

Zip:

Airgas Central Service & local Branch Manager:

Customer will be completing the work at the above location on the indicated date.

1. Prior to the departure from the jobsite, all cylinders must be audited and accounted for. Would you please have the appropriate account manager, or branch representative make contact with the site supervisor, complete this task and balance the cylinder inventory prior to the indicated date.
2. If cylinder discrepancies exist, resolve the issue with the site supervisor prior to departure from site and account closeout.
3. Airgas Personnel: Upon completion of cylinder audit/balance, please arrange for the account to be closed and marked as **DO NOT USE** and **add an order block to the account**.

Additional Comments or Instructions: