



CUSTOMER NAME: ABC Industries, LLC
CUSTOMER NAME: ABC Industries, LLC
CUSTOMER NUMBER: 123456
POC NAME: Yaswanth

Customer Update Addendum

CUSTOMER CONTACT: John Doe _____
CUSTOMER CONTACT: John Doe _____
POC EMAIL: john.doe@example.com
POC PHONE: (555) 123-4567

PRODUCTS

Products	Amount Per Unit	Dispensers	Qty	Warranty Rate	Replacement Rate/Install	Products	Qty	Amount	Frequency of Service
EM Proprietary JRT Tissue	\$	EM Proprietary Twin JRT		\$	\$	EM Urinal Mat		\$	
EM Proprietary JRT Tissue	\$	EM Proprietary Twin JRT		\$	\$	EM Urinal Mat		\$	
EM Proprietary Hardwound Natural	\$	EM Proprietary Towel Mechanical		\$	\$	EM Commode Mat		\$	
EM Proprietary Hardwound White	\$	EM Proprietary Towel Hybrid		\$	\$	Bowl Clip		\$	
Center Pull Towels	\$	Center Pull Towel Dispenser		\$	\$	Wave 3D Urinal Screen		\$	
Multi-Fold Natural	\$	Multi-Fold Dispenser		\$	\$	Splash Hog Urinal Screen		\$	
Multi-Fold White	\$			\$	\$				
	\$	EM Proprietary A/F Dispensers		\$	\$	Surefoot EZ		\$	
	\$	EM Proprietary Soap Dispenser		\$	\$	Daily		\$	
Seat Cover Sleeve	\$	Seat Cover Dispenser		\$	\$	Dish Detergent		\$	
	\$	Hand Sanitizer Dispenser		\$	\$				
Grit Soap	\$	Grit Soap Dispenser		\$	\$				
	\$	SaniPod Receptacle		\$	\$				

SERVICES

RESTROOM & HYGIENE	FOAMING DRAIN	SCRUB SERVICE	HAND SANITIZER
Restrooms 5	Kitchen 2	No. of Rooms 4	No. of Sanitizers 12
Bowls 3	Restrooms 3	Square Footage 2500	Sanitizer Charge \$ 90
Urinals 4	Bar Area 1	Tiles (Small/Large) Small	Frequency Weekly
Sinks 6	Total Drains 6	Sani-Scrub Charge \$ 320	
Total Sani Charge \$ 250	Foaming Drain Charge \$ 180	Sani-Scrub Charge \$ 320	
Frequency Weekly	Frequency Weekly	Frequency Monthly	
Total Sani Charge \$ 250			
Frequency Weekly			

MICROMAX FLOOR	RPM WINDOW	SANIPOD	TRIP CHARGE
No. of Rooms 3 @ 100=\$ 300	No. of Windows 10 @ 15 =\$ 150	No. of Fem Bins 8 @ 12 =\$ 96	Trip Charge \$ 45

FOAMING DRAIN
Kitchen 2
Restrooms 3
Bar Area 1
Total Drains 6
Foaming Drain Charge \$ 180
Frequency Weekly

REFRESH POWER SCRUB					
Dumpster \$ _____	Patio \$ _____	Walkway \$ _____	FOH \$ _____	BOH \$ _____	Other \$ _____
Freq _____	Freq _____	Freq _____	Freq _____	Freq _____	Freq _____

SERVICE NOTES