Customer Update Addendum

CUSTOMER NAME: ABC Industries, LLC   **CUSTOMER CONTACT:** John Doe

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CUSTOMER NUMBER: 123456   **POC EMAIL:** john.doe@example.com

POC NAME: Yaswanth   **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
Restrooms _____
Bowls _____
Urinals _____
Sinks _____
Total Sani Charge $ _____

Frequency _____

FOAMING DRAIN
Kitchen _____
Restrooms _____
Bar Area _____
Total Drains _____
Foaming Drain Charge $ _____

Frequency _____

SCRUB SERVICE
No. of Rooms _____
Square Footage _____
Tiles (Small/Large) _____
Sani-Scrub Charge $ _____

Frequency _____

HAND SANITIZER
No. of Sanitizers _____
Sanitizer Charge $ _____
Frequency _____

MICROMAX FLOOR
No. of Rooms _____ @
MicroMax Frequency _____

RPM WINDOW
No. of Windows = $ _____ @
RPM Frequency _____

SANIPOD
No. of Fem Bins = $ _____ @
SaniPod Frequency _____

TRIP CHARGE
Trip Charge $ _____ = $ _____

REFRESH POWER SCRUB

Dumpster $ _____	Patio $ _____	Walkway $ _____	FOH $ _____	BOH $ _____	Other $ _____
Freq _____	Freq _____	Freq _____	Freq _____	Freq _____	Freq _____

SERVICE NOTES