



Disinfecting and protecting your environment

Application Location Data

1. Company Name: _____
 Street Address: _____
 City, State & ZIP: _____
 Phone Number: _____
 TAX ID #: _____

2. AP Contact: _____
 Phone: _____
 Email: _____

3. Manager Contact: _____
 Phone: _____
 Email: _____

4. Location Type: _____
(i.e. office, warehouse, etc)
 Street Address: _____
 City, State & ZIP: _____

Total Square Feet:		
<i>Type of Space</i>	<i>Square Ft</i>	<i>Hours of Operation/Comments</i>
Open Office Space		
Private Offices		
Closets		
Bathrooms		
Doors		
Warehouse		
Kitchen (s)		
Bar (s)		
Restaurant (s)		
Banquet Hall (s)		
Seating Area (no.)		
Additional Comments		

Thank you for your business!