Additional Services Price Sheet

| TASK | PROPOSED RATE | UNIT (e.g. per hour, job, etc.) |
|---------------------------------|---------------|------------------------------------|
| Custodial Hourly Rate | | |
| Day Porter Hourly Rate | | |
| Window Cleaning | | |
| Upholstery Cleaning | | |
| Carpet Cleaning | | |
| Pressure Washing | | |
| VCT/Tile Cleaning | | |
| High Work – Greater than 10': | | |
| a. Window Cleaning | | |
| b. Dusting & De-webbing | | |
| c. Pressure Washing | | |
| Decontamination Services | | |
| Other Services (please list): | | |
| | | |
| | | |
| | | |
| _ | | |

Contractor-Supplied Consumable Materials

(Use additional sheets, if needed.)

| (ose additional sheets, if needed.) | | | |
|---------------------------------------|-------|-----------|--|
| CONSUMABLE | PRICE | UNIT TYPE | |
| Toilet Tissue | | | |
| Toilet Seat Covers | | | |
| Paper Hand Towels | | | |
| Liquid Hand Soap | | | |
| Restroom Air Fresheners | | | |
| Urinal Blocks/Deodorizers | | | |
| Bags/Containers for Sanitary Waste | | | |
| Liquid Hand Sanitizer | | | |
| Additional Consumables (please list): | | | |
| | | | |
| | | | |
| | | | |
| Contractor's Markup Percentage: | | | |