

DON'T MISS OUT ON THE DISCOUNT RATE, ORDER EARLY! www.mtccc.com/order

Booth Cleaning Service Order Form

The Metro Toronto Conve	ention Centre is the ex	clusive provide	er o	of all cleaning s	serv	ices.			
In order to arrange for jar	•	•							
SHOW:					SHOW DATES:				
CONTACT NAME:					_ BOOTH #:				
COMPANY NAME:									
ADDRESS:					_CITY:				
PROVINCE / STATE:	ROVINCE / STATE:					_ EMAIL:			
POSTAL CODE / ZIP:	PHONE #:				FAX #:				
CREDIT CARD #:	EXP. DATE: / NAM				ME ON CARD:				
	CARD HOLDER'S EMAIL:								
VISA MASTERCARD AMERICAN EXPRESS									
RATES (includes vacuuming, dusting, cleaning of tables and emptying wastebaskets) Rates are subject to change without notice. The rates are based on gross booth area. Prices are in Canadian funds. Advanced Rate "Early Bird" Discount END: NOTE: cleaning will be done prior to show opening on the dates required.									
Rate Type	Advanced Rate "Early Bird" Discount	Regular / On-site Rate		Total sq ft		Total Days	Cost (\$)	Required Dates	
ONE Clean Only (minimum charge \$42.00)	25 ¢/sq ft	32 ¢/sq ft	Х		х	1 Day =	\$		
Daily Cleaning (must be more than one clean)									
under 1000 sq ft	19 ¢/sq ft	23 ¢/sq ft	Х		х	Day(s) =	\$		
1001-2500 sq ft	18 ¢/sq ft	22 ¢/sq ft	Х		x	Day(s) =	\$		
2501-5000 sq ft	16 ¢/sq ft	19 ¢/sq ft	Х		х	Day(s) =	\$		
5001-10,000 sq ft	15 ¢/sq ft	18 ¢/sq ft	Х		х	Day(s) =	\$		
10,001 sq ft + over	14 ¢/sq ft	17 ¢/sq ft	Х		x	Day(s) =	\$		
Steam Cleaning	23 ¢/sq ft	29 ¢/sq ft	Х	••••••	х	Day(s) =	\$		
Large Waste Recepta	icle			\$15/day	Х	Day(s) =	\$		
Additional waste removal available on request									
Please provide details below under "Special Requirements" (including number of pickups and booth size) and a quote will be sent to you.									
Additional exhibit cleaning is available \$55.00/hr x hrs = \$ (minimum 4 hours)									
Additional charges would be pending for carpet in need of special attention due to food sampling demonstrations, hair, wood, metal shavings, grease or oil. Special Requirements:									
ALL ORDERS MUST BE PREPAID IN FULL									
SUBTOTAL									
AUTHORIZED CUSTOMER SIGNATURE:					SUB-TOTAL:				
DATE:					TOTAL PAID:				
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HST# 12140 3141 RT0001