

Or telephone **0800 612 9288** or complete online at **www.directhygiene.com**
Or please post: Direct Hygiene, Windgate House, Windgate, Tarleton PR4 6JF

We are interested in the following services:

✓ *Please tick all that are applicable*

- | | | |
|---|-----|-----------------------|
| <input type="checkbox"/> Feminine Hygiene Disposal (Sanitary Bins) | Qty | <input type="text"/> |
| <input type="checkbox"/> Vending Machines | Qty | <input type="text"/> |
| <input type="checkbox"/> Nappy and Clinical Waste | Qty | <input type="text"/> |
| <input type="checkbox"/> Air Freshening Systems | Qty | <input type="text"/> |
| <input type="checkbox"/> WC and Urinal Sanitising | Qty | <input type="text"/> |
| <input type="checkbox"/> Soap Dispensers | Qty | <input type="text"/> |
| <input type="checkbox"/> Sharps Box | Qty | <input type="text"/> |
| <input type="checkbox"/> Hygiene Bags (for sanitary, nappy, and incontinence) | Qty | <input type="text"/> |
| <input type="checkbox"/> Other _____ | | <i>please specify</i> |

We are currently under contract but please contact us at a later date

Currently contracted with _____

Expiry date of contract _____

Notice period required _____ (typically 3 months)

Leave it with us and we will contact you in the month before you need to give notice

Our contact details are as follows:

Contact Name _____

Position _____

Business Name _____

Type of Business _____

Address _____

Town / City _____

County _____

Post Code _____

Telephone _____

Facsimile _____

Email _____

Is there a best time to contact you?

Day of week _____

Time am/pm _____