Johns Sanitation Toilet Order Form

Fax this form to: 248-437-0130

You must call our office at **248-437-0841** with payment information before your order can be processed. **Payment must be received prior to delivery.**

| day's Date: | |
|--|--------|
| te Needed: | |
| ur Name: | |
| livery Address: | |
| ling Address, (if different then above): | |
| yment:Credit CardCheck | Other. |
| it Placement: | |
| me Phone: Cell Phone: | |
| nail Address: | |
| ilet Type:Regular with Hand Sanitizer, Handicap with Hand Sanitizer. | |
| Green Deluxe Flush, White Deluxe Flush, Construction | n. |
| Regular with hand sink in the unit. | |
| cessories: 2 Person Hand Washing station, (Sink) Hand Sanitizer Star | nd. |
| (Please write the number of toilets needed next to the toile type). | |

Orders must be faxed 48 hours before delivery. Orders must be faxed to us no later than 2 PM to be processed for the next business day.