### Indoor Janitorial

**Total Overall Monthly Contract cost**  
(including all floor burnishing)  
$____________________  x 12 mo. = $__________Annually

**Grout Cleaning** (Tile) – Semi-annually  
$____________________  x 2  = $__________Annually

**Full Building Floor Cleaning (VCT, Terrazzo)** excluding LV 2 and 3 VCT Labs – Annually, billed separately as needed  
Price per sq ft for Terrazzo cleaning  
$_____ per sq ft x 14,107 sq ft x 1 = $__________ Annually

Price per sq ft for VCT cleaning (excluding Labs)  
$_____ per sq ft x 7,507 sq ft x 1 = $__________ Annually

**Full Building Floor Cleaning (Carpet)** – Annually, billed separately as needed  
Price per sq ft for Carpet cleaning  
$_____ per sq ft x 26,954 sq ft x 1 = $__________ Annually

**Level 3 Lab Floor Cleaning** – Annually  
$____________________ x 1 = $__________Annually

**Level 4 Lab Floor Cleaning** – Annually  
$____________________ x 1 = $__________Annually

**Interior Window Cleaning** – Annually  
Internals Windows on 4-floor building  
$____________________ x 1 = $__________Annually

North, east, and west Windows of  
4-floor building  
$____________________ x 1 = $__________Annually

South Windows on the west side (academic)  
and main stairwell only  
$____________________ x 1 = $__________Annually

Southside Windows on the east building  
on Level 1 only  
$____________________ x 1 = $__________Annually

**West Sunshade Cleaning** – Annually  
$____________________ x 1 = $__________Annually

**Total Lot 1**  
$__________ Annually

### Please provide the hourly rate for additional work and special events:

1. **Additional Work** (e.g., general day porter and night porter duties, VCT cleaning, etc.).

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<th>Additional Work</th>
<th>Hourly Rate</th>
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2. **Special Events**  
   $____________________/Hr.

Saturday, Sunday, After 5:00 PM M-F  
(to be paid by 3rd party); Anticipated number of hours per year: 100-150.