



# Americhem Free Dispenser Agreement

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**CUSTOMER INFORMATION**

Customer Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Business Phone \_\_\_\_\_

This Dispenser Agreement is subject to the following Terms and Conditions. Each signed Dispenser Agreement is acknowledgment of the Terms and Conditions.

**Terms and Conditions- Dispenser Agreement Program**

- A. **Dispensers:** Americhem will supply the dispensers at no cost to the customer.
- B. **Dispenser Installation:** Americhem and/or the customer will be responsible for installing dispensers.
- C. **Title to Dispenser:** Title will remain with Americhem for the life of the dispenser.
- D. **Dispenser Malfunctions:** Americhem will repair or replace dispensers that fail to work properly during the life of the dispenser as long as the dispenser was not abused. Americhem reserves the right to determine abuse.
- E. **Term:** The customer agrees to purchase product for dispensers from Americhem for the full term.

If for any reason, the customer discontinues use of Americhem products for these dispensers, the dispensers must be returned in usable condition within 30 days of last purchase.

Costs incurred from removal of dispensers and/or restoration of property to its original condition will be the customer's responsibility.

| Dispenser Type | Dispenser Item # | Cost of Dispenser | Quantity | Total cost | Cost to Customer |
|----------------|------------------|-------------------|----------|------------|------------------|
|                |                  |                   |          |            | <b>Free</b>      |
|                |                  |                   |          |            | <b>Free</b>      |
|                |                  |                   |          |            | <b>Free</b>      |
|                |                  |                   |          |            | <b>Free</b>      |
|                |                  |                   | Total    |            | <b>Free</b>      |

Dispenser Agreement Authorized Personnel:

X

\_\_\_\_\_

\_\_\_\_\_ Date