

# Restroom Agreement

## Shaved Ice establishment information

Shaved Ice Establishment name \_\_\_\_\_

Address \_\_\_\_\_

Establishment Owner name \_\_\_\_\_

I agree to utilize the facility below for restroom needs. I understand that in order to operate, the restroom must be available. I agree to adjust my business hours if necessary to ensure a restroom is available for my employees.

Signed \_\_\_\_\_ (establishment owner)                      Date \_\_\_\_\_

## Restroom information

Restroom establishment name \_\_\_\_\_

Address \_\_\_\_\_

Establishment owner name \_\_\_\_\_

I agree to allow the employees of the above referenced shaved ice establishment to use my restroom facilities.

Signed \_\_\_\_\_ (establishment owner)                      Date \_\_\_\_\_