

EcoRooms® and EcoSuites™ International Application

(rev. 03/09)

Property Name:			
Contact Name:			
Street Address:			
City, Country, Postal Code :			
Phone:			
Fax:			
E-Mail:			
Property Website:			
Number of Rooms or Suites:			
Today's Date: day month year			
Year Property was built:			

Section 1 – Cleaning Products

Please provide a list of the Cleaning and Carpet Care Products used in the Guest Rooms and/or Suites:

Name of Product	Manufacturer

Please attach an MSDS for each of the products listed above.

Please have your Supplier of each of these Cleaning and Carpet Care Products sign and date the following statement.

_____ (name of company) Provide the following

Cleaning and/or Carpet Care products to the _____ (name of lodging property). We have reviewed the criteria listed below and certify that our products meet these criteria.

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Signature

Name

Company

Date: _____

Cleaning Products – General Purpose, Bathroom, Glass and Carpet Cleaning

- A. Must be Less than 10% VOC's by weight.
- B. Must Be Diluted at least 8 to 1.
- C. The Undiluted product shall not be toxic to Humans.
- D. The Undiluted product shall not contain carcinogens or any ingredients that are known to cause reproductive toxicity.
- E. The Undiluted product shall not be corrosive to the skin or eyes
- F. The Undiluted product shall not be a skin sensitizer
- G. The Undiluted product shall not be combustible
- H. The product as used shall not contain substances that contribute significantly to the production of photochemical smog, Tropospheric ozone, or poor indoor air quality.
The Volatile Organic Compound as used shall not exceed the following:
 - .1% by Weight for Dilutable Carpet Cleaners
 - 1% by Weight for General Purpose and Bathroom Cleaners
 - 3% by Weight for Glass Cleaners
 - 3% by Weight for Ready to Use Carpet Cleaners
- I. The Product as used shall not be toxic to aquatic life
- J. Each of the organic ingredients in the product as used shall exhibit ready biodegradability
- K. The product as used shall not contain more than 0.5% by weight of total phosphorus
- L. The product containers shall be recyclable or Manufacturers may provide for the returning and refilling of their packaging.
- M. Prohibited Ingredients include the following:
 - Alkylphenol ethoxylates
 - Dibutyl Phthalate
 - Heavy metals including arsenic, lead, cadmium, cobalt, chromium, mercury, nickel, or selenium
 - Ozone-depleting compounds
 - Optical Brighteners
- N. Training – The Product Manufacturer, its distributor, or a third party shall offer training or training materials in the proper use of the product.
*These shall include step-by-step instructions for the proper dilution, use, disposal, and the use of the equipment.

Section 2 – Paper Products

List is the Brand Name of each of the Following Paper Products:

Facial Tissue	
Bathroom Tissue	
Napkins	
Paper Towels	

Please provide documentation that meets the following minimum post-consumer content for each of these products:

Bathroom Tissue: 20%, Facial Tissue: 10%, Napkins and Paper Towels: 40%

Section 3 – Amenity Products

Property shall use refillable amenity dispensers or individual containers for shampoo, conditioner, soap, lotion, etc. Individual products shall be the smallest practical size for the length of stay and minimally packaged in recycled and/or recyclable materials. Used amenities are collected for donation to charity or for recycling where practical.

Please provide the name of the Supplier of the Amenity products provided for Guest use such as Shampoo, Conditioner, Soaps, Lotion, etc.

Please describe how the amenity program meets the criteria:

Section 4 – Linen and Towel Reuse Program

Please provide samples of the information provided in the Guest Room or Suite that Informs the guest of this program

Section 5 – Recycling Program

1) Please provide the name of the person in charge of this program for the guest rooms:

2) Please provide a picture of the Guest Room Recycling Receptacle.

3) Please provide the name of the company or organization that collects and processes the recyclables (paper, Newsprint, Plastic, Aluminum, Glass)

If more than one please list all companies or organizations with contact information below:

Company Name	Contact Information

Section 6 – Energy Efficient Lighting

Please list all Lighting Fixtures in the Guest Room and Guest Bathrooms below with the type of lamp and the wattage of the Compact Fluorescent or Linear Fluorescent Lamp used in that fixture:

Fixture	Type of Lamp	Wattage

Section 7 – High Efficiency Plumbing Products

Please provide the following:

Showerhead - _____GPM (Gallons per minute)

Toilet - _____GPF (Gallons per flush)

Sink - _____ GPM (Gallons per minute).

Section 8 – Smoke-Free Hotel

I certify that my property, all guest-rooms, restaurants, and indoor public areas are 100% smoke-free.

Please sign and date the following:

I submit that I have completed this application to the best of my knowledge. Enclosed is my non-refundable application fee of \$150.

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Signature

Name

Title

Date

Please submit completed application to:

**Pineapple Hospitality, Inc.
5988 Mid Rivers Mall Drive
St. Charles, MO 63304
USA**

Attn: EcoRooms/EcoSuites Review

Each application should be submitted with a check made payable to Pineapple Hospitality, Inc. for \$150 (US). This is a non refundable Application fee.

Once accepted for the EcoRooms/EcoSuites Directory Listing an additional invoice for \$200 (US) will be due.