

Customer & Home Information

Customer Information

Homeowner Name: _____

Phone 1: _____ Phone 2: _____

Email 1: _____ Email 2: _____

Contractor Info: _____

Job Address: _____ Billing Address: _____

Bill to (check one): Customer Contractor

Appliance & Fixture Information

Please note N/A if not applicable

Sink Type & Size: _____

Refrigerator Model: _____

Range Model: _____

Cooktop Model: _____

Oven Model: _____

Microwave Model: _____

Microwave Trim Kit Model: _____

Dishwasher Model: _____

Hood /Liner/Vent Model: _____

Undercounter Appliance (Specify Type): _____

Other Appliance (Specify Type): _____

Home Information

Flooring Type (Please specify if more than one): _____

Ceiling Height (Please specify if more than one): _____

Other / Special: _____

Estimated of Preferred Install Date (this does **NOT** reflect an install date, but only when the space will be ready): _____

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Customer Signature: _____ Date: _____

***Please notify us ASAP of any changes to the information listed here. Any changes after the signing of the purchase agreement may affect the cost and timeline. ***