



CUSTOMER INFORMATION

| Name: | | | |
|-------------------------------|-----------|-----------|------------|
| Date: | | | |
| Order Timeline (please ci | rcle) | | |
| 1-2 WEEKS | 2-4 WEEKS | 1 MO NTH+ | 3 MON TH S |
| Address: | | | |
| City: | | | |
| State: | | | |
| Zip Code: | | | |
| (Required for shipping quote) | | | |
| Primary Phone: | | | |
| Primary Email: | | | |
| Cabinet Style(s): | | | |
| Additional Information: | | | |
| | | | |



ME ASURING YOUR KITCHEN

Please use the attached graph paper & measurement charts to mark down your dimensions. Doublecheck your work. These measurements must be 100% correct for your new cabinetry to fit perfectly.

Room

- Measure the room wall-to-wall.
- Measure from the floor to ceiling.
- Measure all walls even if you do not plan to put cabinets on them as this is important for us to present you with approper design.

Walls

- Make a rough drawing of the shapeof the room showing any walls, doors, windows, protrusions or recessed areas.
- Measure each wall section and record the dimensions on the drawing. A wall section is from one corner to a doorway orwindow.

Doors

- Measure each door/path and record the width.
- Please indicate on your sketch if a door swings in or out of the room and which side the hinge is on

Windows/Walls

- Measure the height from the floor to the bottom of your windows and mark it down.
- Measure the height from the top of the window to the ceiling and mark it down.

Windows

- Height Measure from top to bottom
- Width measure across window, from right to left.
- Windows are measured from outsideedge to outside edge of casing or trim.

Utilities

- Mark on your sketch the exact location of the sink, water & gas lines, wall switch & receptacles, and any other obstructions in the room.
- Measure from the end of the wall the utility is on to the middle of the pipe/switch,etc. to note its exact location in the room.

Appliances

- Mark the location of where appliances will go.
- Record the dimensions of each appliance height, width, and depth.
- **Note:** if you are putting in new appliances, make sure to have the height, width, and depthsof any new stoves, dishwashers, and refrigerators ready at the time of design. If you will be getting new services such as a water line for an icemaker, or under cabinet outlets for water filters, wine keepers, or garbage disposal, please indicate that as well.



Total Dimensions (+ - variations)

| Wall #1 | |
|------------------|--|
| Wall #2 | |
| Wall #3 | |
| Wall #4 | |
| Floor to Ceiling | |

Window/Doorway Dimensions (if applicable)

| W + H of window Wall # | |
|---------------------------|--|
| W + H of window Wall # | |
| W + H of window Wall # | |
| W + H of window Wall # | |
| Doorway Width Wall | |
| Doorway Width Wall | |

^{*}Please note distance from left and right corner of room to edge of window on next page.

Please Circle Applicable Answer

Wall Cabinet Height

30" 36" 42"

Do you have a soffit?

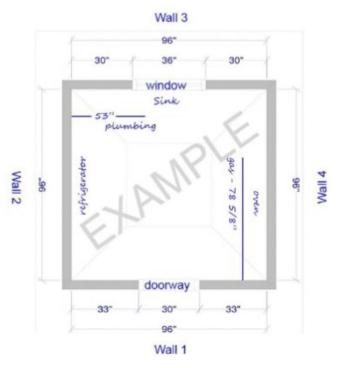
YES NO Wall #_____How tall (in.) _____

Cabinet Height Above Refrigerator

12" 15" 18" 21" 25" NONE

Cabinet Height Above Range

12" 15" 18" 21" 25" NONE



Measurement of Appliances

| Refrigerator | W | H | D | |
|-------------------|---|----|---|--|
| Stove | W | _H | D | |
| Dishwasher | W | _H | D | |
| Microwave | W | H | D | |
| Range | W | H | D | |
| Range Hood | W | H | D | |
| Oven (wall mount) | W | Н | D | |
| Sink | W | H | D | |
| Other: | | H | D | |
| Other: | W | H | D | |
| Other: | W | Н | D | |



Please use this space to indicate measurements of all walls, windows, doorways, appliances and obstacles. Be sure to note the location of any gas and plumbing lines that need to be taken into consideration for your layout.



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