

# DISTINCTIVE CABINETS & COUNTERTOPS

0 1 2 3 4 5 6 7 8 9 10 11 12 13 14  
NAME: \_\_\_\_\_ E MAIL / FAX : \_\_\_\_\_

0 ADDRESS: \_\_\_\_\_ CITY / ZIP \_\_\_\_\_ PHONE: \_\_\_\_\_  
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Material: brand / color \_\_\_\_\_

14 Edge style: Mark edges with an X \_\_\_\_\_

Backsplash: Mark as B: \_\_\_ None \_\_\_ std 4" \_\_\_ full height

15 Sink: sketch in location: \_\_\_ under mount \_\_\_ top mount \_\_\_ solid surface

Stove: sketch in location: \_\_\_ cooktop \_\_\_ free standing stove \_\_\_ slide in

16 Quote for removal of old tops. Yes or no. Include dimensions on your drawing.

