

**ATTENTION: DESIGN SERVICES!
NEED HELP? CALL 866-855-0345.**

DESIGN REQUEST CHECKLIST:

1. Complete **ALL** store and customer information below.
2. Complete pages 2 and 3 as detailed as possible.
3. Attach accurate room measurements or cabinet layout. Please use a ruler.
4. Ensure all dimensions are clearly marked in inches and all notes are legible
5. Fax or email this form back to the TimberPro Design Center. Fax#: **866-855-6785**
Email: **designservices@cabinets.flooranddecoroutlets.com**

Date:

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CUSTOMER INFO

Name: _____

Address: _____

Email Address: _____

Phone #: _____

Best Time To Call: _____

STORE INFO

Store #: _____

Location: _____

Associate: _____

Email Address: _____
@flooranddecoroutlets.com

Phone #: _____

Best Time To Call: _____

PROJECT

Kitchen Bath Other: _____

Preferred Door Style: Hartland Lakemore Legend Laudén Kingston
 Heston Hampshire

SPECIAL NOTES: _____

ABOUT CUSTOMER'S HOME

How many family members live there? _____

Age/s of children if any: _____

Do they do homework in the kitchen? yes no

How many cooks? _____

What is the primary cook's height? _____ Right or left handed? _____

How much cooking do you do? a lot some none

How much baking do you do? a lot some none

How much entertaining do you do? a lot some none

Are there any special needs to consider? If yes, please explain. _____

ABOUT CUSTOMER'S KITCHEN OR VANITY

Floor to ceiling height: _____ Straight Vaulted Soffit

If there is a soffit, will it remain? yes no

Wall Cabinet Height: 30" 36" 42"

Flooring type: tile wood linoleum laminate Other: _____

Are there any obstructions such as a chimney chase or radiators? _____

Is there an eat-in kitchen? If yes, seating for how many? _____

Does home have an accessible basement? _____

APPLIANCES & PLUMBING FIXTURES

To help us lay out your new kitchen, please provide the appliance dimensions that are or will be installed. If you know the brand and product numbers, please list them here.

APPLIANCE	DIMENSIONS W x D x H (in.)			NOTES/MODEL#
Freestanding Range	w:	d:	h:	
Wall Oven	w:	d:	h:	
Cooktop	w:	d:	h:	
Refrigerator	w:	d:	h:	
Dishwasher	w:	d:	h:	
Microwave	w:	d:	h:	
Sink	w:	d:	h:	
Other:	w:	d:	h:	

NEW KITCHEN WISH LIST

Check those items which you want to incorporate in your new design:

- Soft Close
- | | | |
|---|--|--|
| <input type="checkbox"/> Full Extension Drawers | <input type="checkbox"/> Kitchen Center Island | <input type="checkbox"/> Lazy Susan Corner |
| <input type="checkbox"/> Soft Close Doors | <input type="checkbox"/> Peninsula Island | <input type="checkbox"/> Pot & Pan Drawers |
| <input type="checkbox"/> Roll-Out Trays | <input type="checkbox"/> Crown Molding | <input type="checkbox"/> Wet Bar |
| <input type="checkbox"/> Wastebasket Pull-Out | <input type="checkbox"/> Mullion Doors for Glass | <input type="checkbox"/> Decorative Hardware |
| <input type="checkbox"/> Pantry with Roll-Out Trays | <input type="checkbox"/> Computer Desk Area | <input type="checkbox"/> Vanity Make-Up Area |
| <input type="checkbox"/> Decorative Wine Rack | <input type="checkbox"/> Built-In Oven | <input type="checkbox"/> Vanity Linen Tower |