

DISTINCTIVE CABINETS & COUNTERTOPS

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

ADDRESS: _____ **CITY / ZIP** _____ **PHONE:** _____

0
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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.**

