

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



Date:

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**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**

**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     Lauden     Kingston  
 Heston     Hartford     Wellington     Villa     Hampshire     Winslow

**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  |