

Cabinet Order Form



1 100	JOU									
					ORDER DE	TAILS				
Client Name: Phone Number: Email:					Job Name: Date Required: Other Notes:					
Doors Requ	uired:	☐ Yes		No	Door TI Colour:	nickness:	☐ 16mm	_	18mm ish:	
Door Edging Colour:				Thickness:		1mm		2mm	Other:	
Carcass Edging Colour:					Thickness:		☐ 1mm ☐ 2mm		Other:	
Adjustable Softclose H Drawer Bra Hardware S	linges: nd:	☐ Yes☐ Yes☐ Metabox☐ Yes☐	: 🗆	No No No	Deliver Antaro: Flat-Pa			Titu	k-Up: us: sembly:	
Cabinet: Drawers:	☐ B (Base	e) 🔲 W (1 shallow	. ,	☐ 3S 1	Corner) ID (3 sh. 1 dp	•		☐ P (Par		☐ DR (Drawers) ☐ 4E (4 equal)
				CA	RCASS SIZ	EONLY				
Cabinet	Quantity	Width	Height	Depth	Adj. Shelf		R or Pair	Drawers		al Requirements
В	2	600	720	580	2	Pair		N/A	Drill H	landles

Cabinet	Quantity	Width	Height	Depth	Adj. Shelf	Hinge L, R or Pair	Drawers	Special Requirements	
В	2	600	720	580	2	Pair	N/A	Drill Handles	
			-						