

Order form

Please complete an order form for each different unit.

Unit selected

- 24" wide
- 30" wide
- 40" wide
- 48" wide

Number of shelves

- 1 shelf
- 2 shelves
- 3 shelves
- 4 shelves

Quantity of identical units: _____

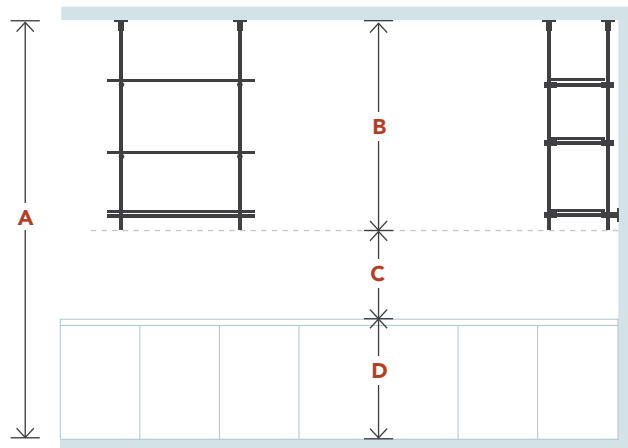
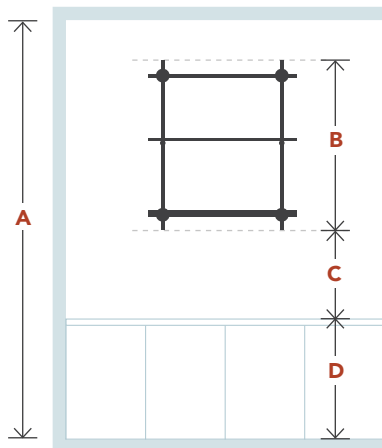
- Check here if you plan to source your own shelves

MOUNTING STYLES

WALL MOUNTED

CEILING MOUNTED

CEILING MOUNTED + WALL SUPPORTED



DIMENSIONS

Ceiling height (A): _____ "

Minimum height between unit and top of surface below (C): _____ "

Unit height (up to 60" high) (B): _____ "

Height of counter or surface below unit (D): _____ "

(whole inch increments only)

MOUNTING DETAILS (check all that apply)

Unit will hang above

- Kitchen counter
- Kitchen island
- Sink
- Bar counter
- Other: _____

If ceiling mounted (check all that apply)

- You have crown molding
- Your ceiling is angled
- Your unit is in front of a window

Blocking + mounting confirmation

- You have blocking in your walls (for wall mounted or ceiling mounted and wall supported units)
- You have blocking in your ceiling (for any ceiling mounted units)
- You plan to add proper blocking (for your wall or ceiling mounted units)
- You do not have blocking and do not plan to add any

If mounting to stone, tile, glass, or brick

- The material surface is smooth / polished
- The material surface is textured / rough

Order form

2 of 2

Are you a/an: Architect / Designer Homeowner Contractor

This project is: Residential Commercial

CONTACT DETAILS

CUSTOMER NAME

INTERIOR DESIGNER (if different from left)

PHONE

PROJECT REFERENCE

EMAIL

INSTALLATION CONTACT

SHIPPING ADDRESS

BILLING ADDRESS

SHIPPING ADDRESS (continued)

BILLING ADDRESS (continued)

SHIPPING ADDRESS (continued)

BILLING ADDRESS (continued)

Is there anything else we should know about your project? Photos or drawings are welcome.

DISCLAIMER

To ensure your installation is a success, we are here to answer any questions you may have. By signing this form, you acknowledge that Amuneal is not responsible for site measurements, and agree that the information you have provided is accurate and approved for production.

CUSTOMER NAME (PRINT)

CUSTOMER SIGNATURE

DATE