KOCH CABINETS PROJECT APPROVAL FORM

DATE: _____

***APPROVAL #** _____
For office use only

PRODUCT LINE: -SELECT ONE OF THE FOLLOWING- Required Field

Please complete this form for any apartment projects or multi-unit structures of 150 cabinets or more.

DEALER: _____ **PHONE:** _____

JOB NAME: _____ **WAREHOUSE OR JOBSITE:** _____

SHIP TO: _____ **JOBSITE ADDRESS (If Applicable):** _____

_____ **ADDITIONAL JOBSITE SHIPPING CHARGE:** _____

***ALL PROJECT JOB SITE DELIVERIES MUST BE PRE-APPROVED BY SHIPPING DEPARTMENT**

START DATE: _____ **COLOR:** _____

END DATE: _____ **HINGE TYPE:** _____

TOTAL CABINET QTY: _____ **DRAWER OPTION:** _____

DOOR STYLE: _____

CABINET PER SHIPMENT QTY: _____ **WOOD SPECIES COLOR:** _____

Please Note Any Additional Information Below:

_____

_____

_____

_____

_____

PLEASE DO NOT HAND WRITE OR SAVE AS PDF. COMPLETE AND USE SUBMIT BUTTON AT THE BOTTOM OF THE FORM.

It is particularly important that information is submitted when you quote a project. If you are awarded the project, please let us know. This will provide the information needed to prepare for high demand and ensure that we can fulfill your order.

Project approval does NOT hold pricing through the duration of the project.
Please reach out to Amy Burgess (amyb@kochcabinet.com) for any special pricing needed.

Please hit the submit button after it is filled out or e-mail the form to amyb@kochcabinet.com

SUBMIT

OFFICE PH: 877-540-5624
OFFICE FAX: 785-336-2348