



DESIGN APPOINTMENT REQUEST

Use this form to arrange an obligation-free, in-home or showroom appointment. All information you provide is treated in strictest confidence.

By Facsimile

Print, complete and fax it to us at
03 9739 8040

By Mail

41 Holloway Drive
BAYSWATER VIC 3153

Last Name First Name

Home Phone Work Phone

Mobile Phone E-mail

Last Name First Name

Home Phone Work Phone

Mobile Phone E-mail

Home Address

Suburb Postcode Melway Ref.

Site Address (if different from home address)

Suburb Postcode Melway Ref.

How did you learn about us?

Project Type Kitchen Bathroom Laundry Other

Planning on... New home Renovation New extension Other

Have you received any designs yet? Yes No Waiting

When would you like your new kitchen? ASAP 3 months 6 months 12 months

Best time for **BOTH partners** to be present for the appointment? (2-3 hours) *(BOTH partners should attend*)*

Are you planning on new appliances for your kitchen? Yes No Undecided

Preferred Door Finish Laminate – square Laminate – round Vinyl Timber 2PAC

Benchtops Laminate Granite Timber Engineered Stone

Splashback Laminate Tiles Stainless Steel Glass Other

Structural work? Yes No

Trades required Plumbing Electrical Plastering Tiling Other

Do you prefer a daytime or evening appointment? Daytime Evening

Comments

OFFICE USE ONLY				
Confirmed:	Date	Time	Both? Y/N	Designer