

Customer requesting custom range hood specification to fill out fields in sections 1, 2 and 3.  Please note that customization is only allowed on existing range hood designs.				
Section 1 Contact Information			•	
Customer Name:		_	Shipping Address (if different):	
Street Address:				
City, State, Zip Code:				
Email Address:				
Contact Number:				
PO/JOB Number:				
Section 2 Rai	nge Hood	]		
Model Number:		J	Wood Species:	
Requested Width:			Customer Notes:	
Requested Depth:				
Requested Height:				
Section 3 Ventil	lator/Insert	1		
Ventilator Brand:	,	_		
Model Number:				
Liner Brand:				
Model Number:				
TERMS AND CONDITIONS  Please note that customization is only allowed on existing range hood designs.  • Customer must complete all required fields before form will be accepted.				
<ul> <li>Authorized Castlet</li> <li>Customization fees</li> <li>Custom Range Hoo</li> <li>Advanced deposits</li> <li>Customer assumes</li> <li>Spec drawings for o</li> <li>Submit completed</li> </ul>	wood representative is will apply and be based sales are final. Notes may be required. It is responsibility for in alternate ventilators/form via fax to 205-4	must approve changes be ased on modifications requesturns are allowed.  naccurately supplied information of the comment of the	fore work can begin. uired. nation. ired.	d and
Customer Signature:			Date:	
Section 4 to be filled out by Castlewood Representative				
Authorized by:			Date:	
Signature:			Fee:	

