

Date: ___/___/___

Total Pages Sent: _____
Including Cover Sheet

KITH KITCHENS™

Order Cover Sheet

Office Use Only

DPP? ☐ Yes ☐ No

SD: _____

Dealer: _____

Dealer Contact Name: _____

Dealer Address: _____

City: _____ State: _____ Zip: _____

Dealer Phone #: _____

Dealer Email: _____

Ship To: _____

Shipping Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____

Select Product Line:



KITH



EUDORA



KITHONE-
FRAMED



KITHONE-
FULL ACCESS



Check here for EXPEDITE ORDERS -ADDITIONAL FEE APPLIES
(8 ITEMS OR LESS - ONLY 2 CAN BE CABINETS)

Dealer PO: _____
(must be unique for each order)

Job Name/Tag: _____

Original Sales Order #/PO (if applicable): _____

Shipping Method:

- ☐ Our Truck
- ☐ Home Delivery
(additional fees apply)
- ☐ Common Carrier
(Ground or LTL)
- ☐ Customer Pick-Up
(Haleyville, AL)

Is this a residential address?

☐ Yes ☐ No

- If yes, please select Home Delivery for ship method.
- Common Carrier may be selected if eligible for Expedite.

Please select: ☐ New Construction ☐ Remodel

Deluxe Plywood Construction includes:

Birch UV Finished Interior with Maple Full Extension Soft Close Drawers and Blum Soft Close Hinges

Select Wood Species: ☐  Maple ☐  Oak ☐  Cherry

Please note: Oak and Cherry are only available on certain door styles and in certain product lines. Please refer to your spec book for further details.

Door Style: _____

Finish Color: _____

Finish Enhancement (if applicable): _____

- Attach an appropriate order form or computer generated item list with this cover sheet.
- Please make sure ALL orders are submitted to: **ORDERS@KITHKITCHENS.COM**
- Orders shouldn't be emailed to any individual as this may cause duplications and delays.
- Feel free to call with questions: 205-485-2261

Select Product Line:



KITH



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FULL ACCESS**

Order Form Must Be Accompanied by Order Cover Sheet

DEALER:	DEALER P.O.#
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[illegible]

Authorized Signature: _____

Select Product Line:



KITH



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**KITHONE-
FRAMED**



**KITHONE-
FULL ACCESS**

Order Form Must Be Accompanied by Order Cover Sheet

DEALER:	DEALER P.O.#
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[illegible]

Authorized Signature: _____