

L.E. Smith Laminate Countertops

PERFECT ORDER FORM

(Fax to: 419-636-3744)



Our goal is to make your customer's experience great! We know this depends on communication with you, getting the details right from the beginning, and delivering on time. This form helps you double-check that you're sending us complete & accurate job specifications. ***Please submit this with every order you send us.***

Designer's Name: _____

Company & Store #: _____

Designer's Email Address: _____

Fax Number (if different than the one on record): _____

Customer/Project Name: _____

L.E. Smith Quote Number: _____

☐ Furnish & Delivery ☐ Furnish & Install

Profiles (Circle One):

Amore	ETOP-1500	Ultra Top No-Drip	Self-Edge
Caspian	ETOP-2000	Ideal Edge	Bevel Edge
Dura Top	Ultra Top Waterfall	Crescent Edge	

Total # of Tops on Order: _____ Color & Finish Code: _____

Countertop Depths: _____ Sink Brand, Model#, Centerline: _____

Backsplash: ☐ Coved ☐ No Back ☐ Set on Loose ☐ Set on Attached ☐ Bar

Miter: ☐ Assembled ☐ Unassembled **(Unassembled is required if your top exceeds x by x)**

Endsplash: ☐ Flush Mount ☐ Butted ☐ Contour ☐ Self-Edge

☐ Caspian Adjustable ☐ Amore Adjustable ☐ Dura-Top Adjustable ☐ Dura-Top Set On

☐ E-TOP Adjustable ☐ No-Drip Adjustable ☐ Set On Oven ☐ Waterfall Adjustable

☐ Amore Full Wrap ☐ E-TOP Full Wrap

☐ I've confirmed that the **SHIP TO** address is correct.

Special Instructions: _____

By signing, I'm authorizing The L.E. Smith Company to fabricate this order based on the information I've provided.
I understand that my order may be delayed if information is incomplete or inaccurate.

Designer's Signature _____ Date: _____