Final Release Approval v03 (5/14/2019)



DEMETRA DESIGNER USE ONLY:	***	REQUIRED ***	
$^{>\!\!\!>}$ $_{\square}$ Signed $_{\square}$ Pending		Terms & Conditions with Liability Waiver	1
		** Not required if this policy has been signed on the 2nd step **	
□ Signed □ Pending		Design Checklist	2
> □ Provide Hardcopy or Atta	ached E-Copy	Demetra Installation Guideline Booklet Scan this QR code for the link to our Installation Guideline	3
🕦 🗆 Signed & Attached 🗆	Pending	Invoice	
≥ □ Signed & Attached □	Pending	Floor Plan with perspective views	
	*** J(OB SPECIFIC ***	
Please apply check mark ($$) on	below documents if it's	applicable to the job, attachment is required if applicable.	
> □ Applicable □ Not Appli	icable Attached * (* if applicable)	Appliance Worksheet (applied for kitchen order only)	
🕦 🗆 Applicable 🗆 Not Appli	icable attached * (* if applicable)	Double Oven Worksheet (applied for kitchen order only)	
🔈 🗆 Applicable 🗆 Not Appli		Single Oven Worksheet (applied for kitchen order only)	
🕦 🗆 Applicable 🗆 Not Appli		* Microwave Cabinet Worksheet (applied for kitchen order onl	
🕦 🗆 Applicable 🗆 Not Appli		CMC worksheet	
🕦 🗆 Applicable 🗆 Not Appli		Delivery Contract	
CUSTOMER USE ONLY:		der Release Approval:	
orders product based on the measurany way for the size or fit of my cabi	orements confirmed by myse inets. I acknowledge that D etra Cabinetry's affiliates ar	rate to my needs. I fully understand that Demetra Cabinetry builds an elf or my installer. I agree that Demetra Cabinetry will not be responsible bemetra Cabinetry, Inc., its employees, representatives, agents, supplied subsidiaries are not liable for any errors, miscalculations, or other issues.	ble in iers,
This Release contains the entire agree contained herein, shall be any force		es and no representatives, verbal or written, between the parties, not	
		nade to me except as set forth herein. I have read this Release and and with full knowledge of its significance.	
l understand that NO MO F	<mark>RE CHANGES</mark> are per	mitted after this point!	
Signature: X	Print Name:	Invoice#: Date:	_

Design Checklist _ v02 (12/07/2017)

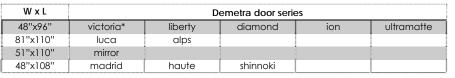


(apply v if applicable)

- 1 Door confirmation: □ Client's sign-off in invoice □ Picture emailed to client
- 2 Confirm Storage System Options installed in the corresponding cabinet with client? □ Not applicable □ Yes □ Not applicable
- 3 Check Grain Limit? Effect on Door Sizes | Tall panels | Tall fillers | TK | CMP (island panel)

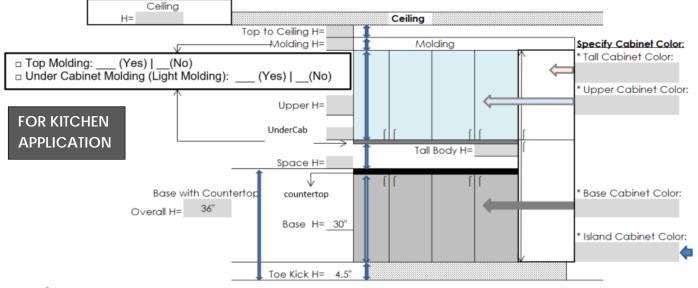
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W	long gr	ain



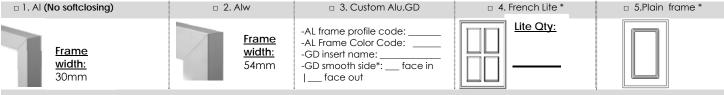


Client's Initial

1 Specify Cabinet Height & Color (Please indicate in the grey fields of below)



- 2 Confirm Toe Kick Option (apply √ on the option)
- □ Matching Toe Kick □ Aluminum Toe Kick □ Other Supporting feet
- 3 Glass door: □ Not applicable □ Applicable (apply v on the option)



Note: #4, #5 GD options only applies for IMPRESSIONS & CLASSICS collections



Images shown on left are taking examples of Adobe 3/4 (830) & Revere Mitered 7/8 (148)

- Standard w/ Reduced Top & Bottom Rail on Cope & Stick drawer front
- Standard w/ Reduced Frame on Mitered drawer front

1 - One	Drawer	2- Two E	Orawers		3- Three Drawe	rs		4- Four Drawe	ers
84.2	28			,					
□ 1-a	□ 1-b	□ 2-a	□ 2-b	□ 3-a	□ 3-b	□ 3 -c	□ 4-a	□ 4-b	□ 4-c

- **6** Wood Door Specification: □ Not applicable
- Wood species □ Cherry □ Maple
- Center panel

 Solid wood inverted raised panel (P1)
- □ Applicable (apply **v** on the option)
 - □ Other □ Alder
 - □ Solid Wood Raised Panel □ Plywood Veneer Flat Panel

Customer:	Date:
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Appliance Worksheet

Attach all supporting documents to this worksheet!

Required Clearance / Cutout Cooking **Brand / Model Number** W Н D **Notes** Free Standing Range Slide-in **Brand / Model Number** W Н D Notes Cook top Gas (check for depth conflict) Electric Range top Wall Oven (Single/Dbl) D **Brand / Model Number** W Н Microwave **Notes** Countertop Built-in **Cabinet Hung** Cleaning **Brand / Model Number** W Н D **Notes** Overlay panel? Yes or No Dishwasher Sink **Storage** Required Clearance / Cutout Refrigerator **Brand / Model Number** Notes (circle one below) Overlay panel? Yes or No Std. Depth ~30" Counter Depth Built-in Other **Brand / Model Number** W Н D **Notes Trash Compactor** Warming Tray Wine Fridge Espresso maker Hood

CAUTION! In cases where appliances/plumbing fixtures(e.g. sink) are not pre-defined, Demetra will not be held responsible for appliances not fitting properly within the cabinets ordered. It is store policy that a contractor finalizes dimensions on drawings before sending orders to production to ensure that cabinets will fit appropriately.

CUSTOM MADE CABINET (DC.CMC) WORK SHEET



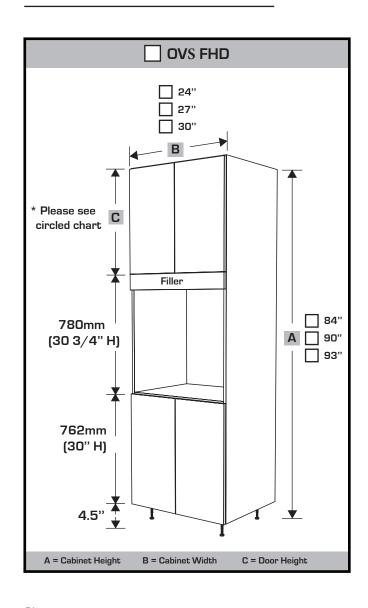
INVOICE#	CID#
Door color	Specify Configuration in the drawing
Drawer head □ Slab □ 5pcs □ Routed □ Working Drawer □ False Panel	
Edge banding color:	
describe here	
Matching Interior	
□ Yes □ No	
Storage Solutions Add-on	
describe here	
Shelf Quantity:	
Other Features:	Width
	Widiii
	Body Height
	Body Depth
Signature:(Customer)	Date:

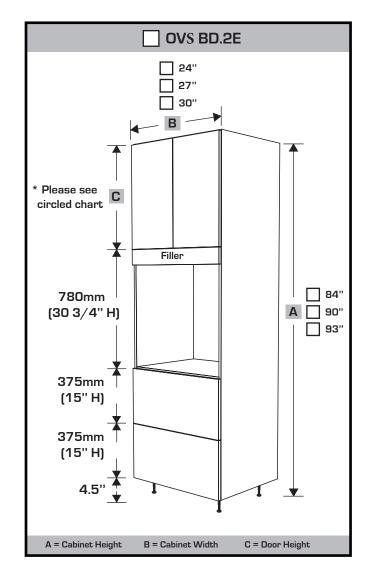
INVOICE #
Oven Model Number
Oven Height
Filler Height =30 3/4" - Oven Height

_		
OI.	_	

* Please circle specification from below chart

Top Door Height (C)				
Cabinet Height	84" H	90" H	93" H	
Top Door H	18 "	24 "	27 "	

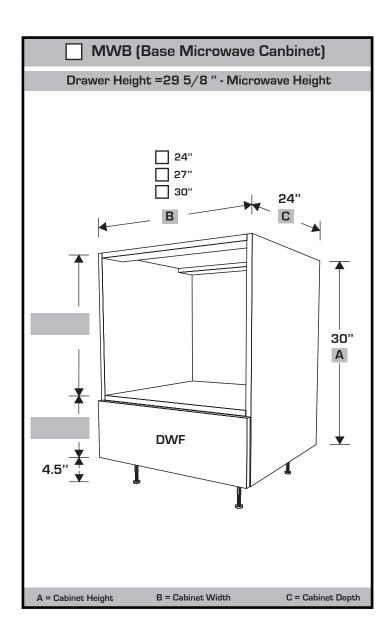


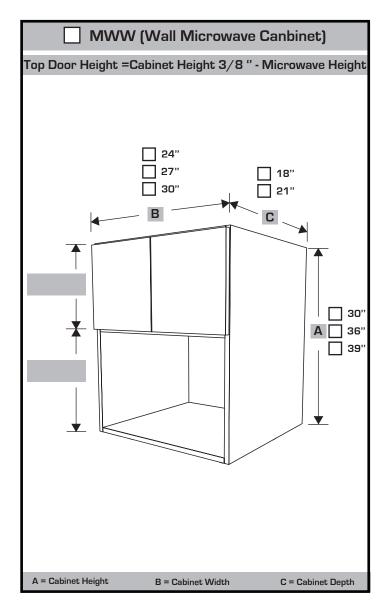


Signature : ______ (Customer)

Date : _____

INVOICE #	CID#	
Microwave Model Number		
Wilcrowave Wouel Wulliber		
Microwave Height		





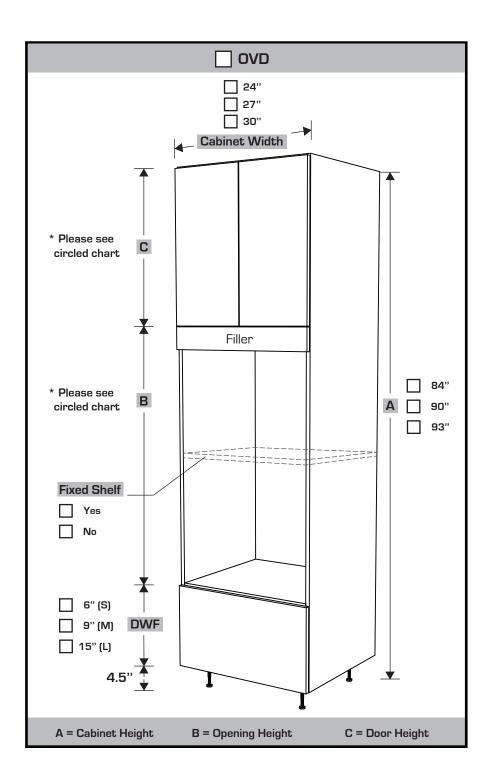
Signature :		Date :	
	(Customer)		

CID #	

Oven Model Number	
Oven Height	
Note	

* Please circle specification from below chart

Opening Height (B) (For S/M Bottom Drawer)			
Cabinet Height	84" H	90" H	93" H
DWF-S 6"	54 1/2 " (1385 mm)	54 1/2 " (1385 mm)	54 1/2 " [1385 mm]
DWF-M 9"	52 1/8 " (1325 mm)	52 1/8 " (1325 mm)	52 1/8 " (1325 mm)
Door H (C)	18" Inch	24" Inch	27" Inch
Opening Height (B) (For L Bottom Drawer)			
DWF-L 15"	48 1/2 " (1232 mm)	48 1/2 " (1232 mm)	48 1/2 " (1232 mm)
Door H (C)	15" Inch	21" Inch	24" Inch



Signature : _		Date :	
_	(Customer)		

STANDARD BUILT-IN MICROWAVE TALL CABINET WORKSHEET

INVOICE #	CID #
Microwave Model Number	☐ MWT
	☐ 24" ☐ 27" ☐ 30" ☐ Cabinet Width
Microwave Height	* Please see circled chart Filler
Note	21"(533mm) 4 Inch Filler

* Please circle specification from below chart

Top Door Height (B)			
Cabinet Height	84" H	90" H	93" H
B(Opt1) Double Door	N/A	15" Inch	18" Inch
B(Opt2) Flap Up Door	09" Inch	N/A	N/A

□ IVIVV I		
	<u> </u>	
	☐ 27" ☐ 30"	
	Cabinet Width	
1	Cabinet volution	
* Please see circled chart		
*	Filler	
21"(533mm)	4 Inch Filler	
*	84" A 90" 93"	
49.5"		
4.5"		
A = Cabinet Height	B = Door Height	

Signature :		Date :	
_	(Customer)		