

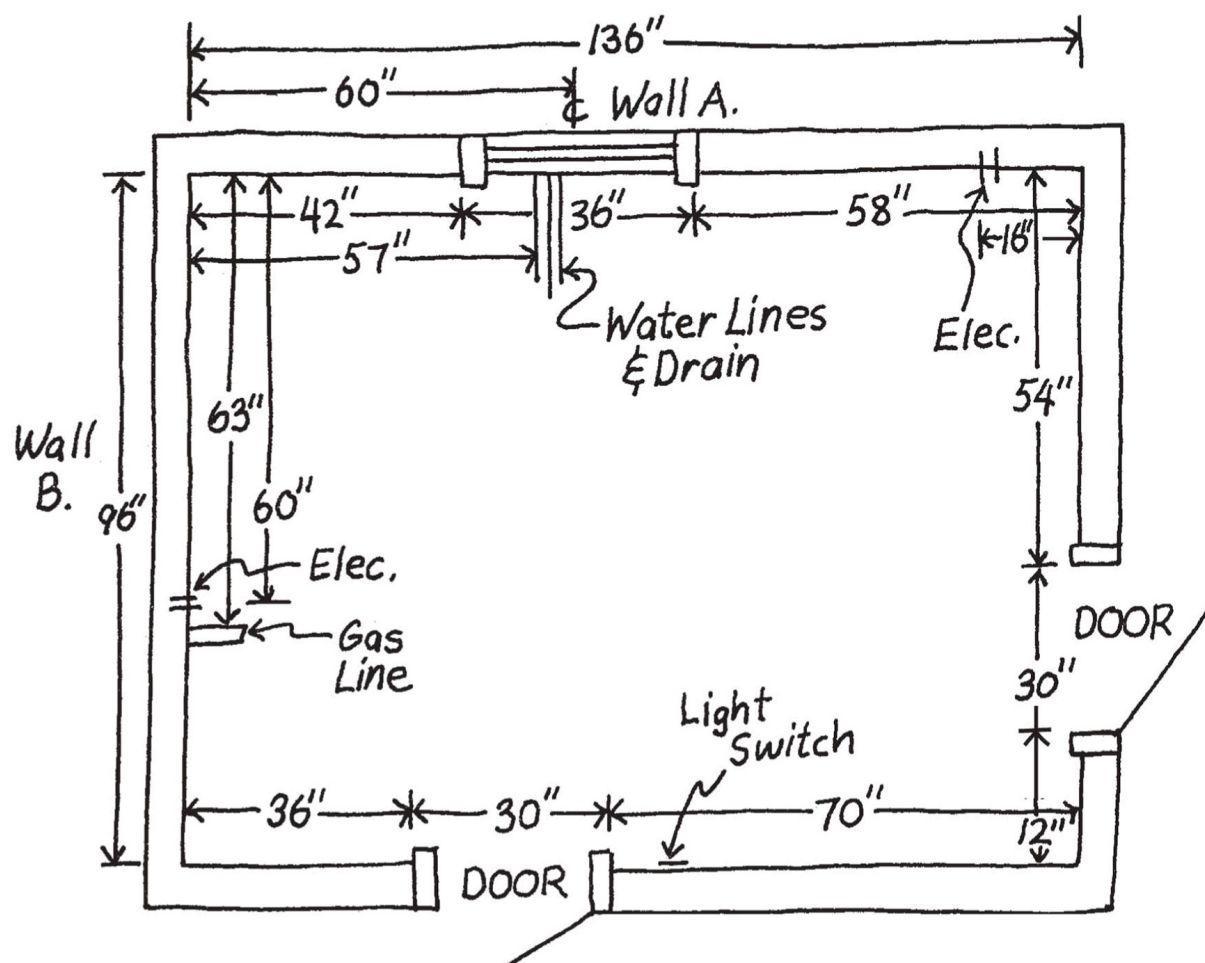
HOW TO MEASURE YOUR KITCHEN OR BATH FOR NEW CABINETS

ACCURATE MEASUREMENTS OF YOUR KITCHEN OR BATH IS IMPORTANT IN DESIGNING YOUR NEW CABINETS. FOLLOW THE STEPS BELOW AND UPLOAD THE INFORMATION TO OUR WEBSITE IN THE DESIGNATED LOCATION.

FLOOR PLAN

PLEASE CAREFULLY CONFIGURE THE EXACT DIMENSIONS OF YOUR ROOM. YOUR COMPLETED FLOOR PLAN SHOULD RESEMBLE THE DIAGRAM BELOW. BE SURE TO SHOW EXACT LOCATIONS OF DOORS, WINDOWS, HOOD VENTS, EXHAUST, GAS LINES, WATER LINES, DRAIN LINE, OUTLETS, SWITCHES, LIGHT FIXTURES, AND HEAT VENTS.

ALWAYS DOUBLE CHECK MEASUREMENTS



HOW TO MEASURE YOUR KITCHEN AND BATH FOR CABINETS

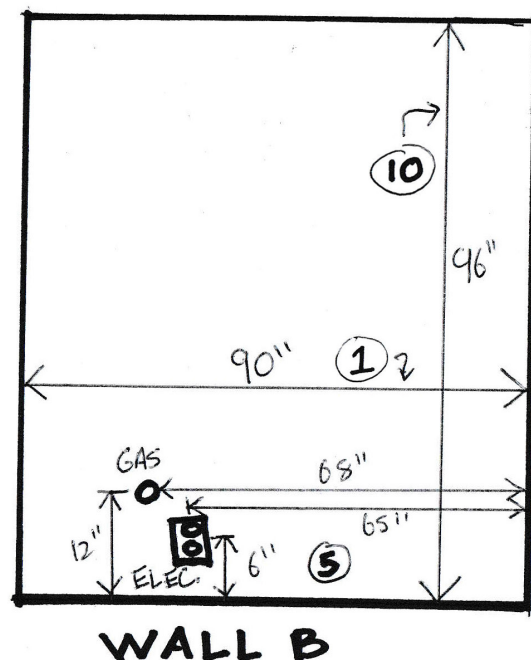
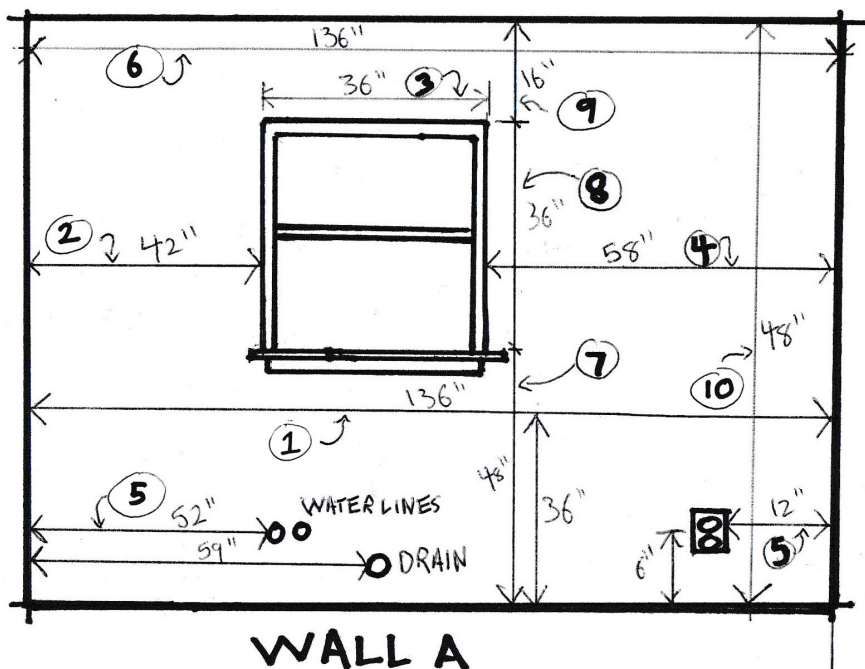
USING A TAPE MEASURE AND GRAPH PAPER PROVIDED ON PAGE 3, MEASURE YOUR ROOM BY FOLLOWING THE STEPS BELOW.

HORIZONTAL MEASUREMENT

1. MEASURE FROM WALL TO WALL AT 36" HEIGHT
2. MEASURE FROM CORNER TO WINDOW OR DOOR OPENING
3. MEASURE ACROSS OPENING FROM TRIM EDGE TO TRIM EDGE
4. MEASURE FROM EDGE OF TRIM TO FAR WALL. COMPARE SUM OF #2, #3, AND #4 MEASUREMENTS TO STEP #1
5. MARK EXACT LOCATION OF WATER, DRAIN, GAS LINES AND ELECTRICAL OUTLETS AND SWITCHES ON DRAWING
6. MEASURE FROM WALL TO WALL ABOVE WINDOW AND COMPARE TO #1

VERTICAL MEASUREMENT

7. MEASURE FROM FLOOR TO WINDOW SILL
8. MEASURE FROM WINDOW SILL TO TOP OF WINDOW
9. MEASURE FROM TOP OF WINDOW TO CEILING
10. MEASURE FROM FLOOR TO CEILING - COMPARE TO SUM OF #7, #8, AND #9



LARGE SQAURES INDICATE 1 SQFT AND SMALL SQAURES REPRESENT 3 SQ INCH.

0	1'	2'	3'	4'	5'	6'	7'	8'	9'	10'	11'	12'	13'	14'	15'	16'
0	1'	2'	3'	4'	5'	6'	7'	8'	9'	10'	11'	12'	13'	14'	15'	16'
1'	2'	3'	4'	5'	6'	7'	8'	9'	10'	11'	12'	13'	14'	15'	16'	
2'	3'	4'	5'	6'	7'	8'	9'	10'	11'	12'	13'	14'	15'	16'		
3'	4'	5'	6'	7'	8'	9'	10'	11'	12'	13'	14'	15'	16'			
4'	5'	6'	7'	8'	9'	10'	11'	12'	13'	14'	15'	16'				
5'	6'	7'	8'	9'	10'	11'	12'	13'	14'	15'	16'					
6'	7'	8'	9'	10'	11'	12'	13'	14'	15'	16'						
7'	8'	9'	10'	11'	12'	13'	14'	15'	16'							
8'	9'	10'	11'	12'	13'	14'	15'	16'								
9'	10'	11'	12'	13'	14'	15'	16'									
10'	11'	12'	13'	14'	15'	16'										
11'	12'	13'	14'	15'	16'											
12'	13'	14'	15'	16'												
13'	14'	15'	16'													
14'	15'	16'														
15'	16'															
16'																

HASTONE

Name _____

Address _____

City _____

State _____

APPLIANCE AND FIXTURE INFORMATION

PLEASE TELL US ABOUT YOUR EXISTING OR PLANNED APPLIANCES. PLEASE INDICATE 220 VOLT OUTLETS, WALL MOUNTED APPLIANCES AND FIXTURES, TELEPHONE AND CABLE LOCATIONS. ALSO PLEASE INDICATE GAS LINE AND APPLIANCE LOCATIONS.

	Type	Size W x D x H	Hinge Position L/R (Facing Appliance)
Refrigerator			
Range			
Cooktop			
Exhaust Hood			
Wall Oven			
Microwave			
Dishwasher			
Sink			
Disposal			
Compactor			
Freezer			
Other			

PLEASE LIST ANY OTHER SPECIAL NOTES OR CONDITIONS.