



CUSTOMER INFORMATION	
Job Name/PO #	_____
Name	_____
Address	_____
Address	_____
Phone	_____
Fax/Email	_____

Drawer Side Material
<input type="checkbox"/> Baltic Birch Plywood (12mm or 15mm)
<input type="checkbox"/> Soft Maple Solid (1/2")
<input type="checkbox"/> Premium Maple Plywood (1/2")
<input type="checkbox"/> _____ Other Material

Drawer Side Thickness
<input type="checkbox"/> 1/2" (12mm) <input type="checkbox"/> 5/8" (15mm)

Drawer Bottom Material	
<input type="checkbox"/> Birch Plywood (1/4 OR 3/8 OR 1/2)	<input type="checkbox"/> Maple Plywood (1/4 OR 1/2)
<input type="checkbox"/> White Melamine (1/4 OR 1/2)	<input type="checkbox"/> _____

Drawer Bottom Thickness
<input type="checkbox"/> 1/4" <input type="checkbox"/> 3/8" <input type="checkbox"/> 1/2"

Drawer Bottom Placement
<input type="checkbox"/> 3/8" UP <input type="checkbox"/> 1/2" UP

Notching/Boring for Undermount Slides
<input type="checkbox"/> Notch and Drill Only
<input type="checkbox"/> Install Clips: _____

Undermount Drawer Slides
Ideal Drawer Box Install The Slides
<input type="checkbox"/> Model #: _____ Qty: _____

Any order discrepancy must be brought to the attention of Ideal Drawer Box II within three business days of receipt. Returns will only be accepted should they not meet the order Specs. Tolerances are 1/16" for width, depth and height.

Signature: _____

Dovetailed Doweled

Drawer ID#	QTY	Width	Depth	Height	Laser Logo
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
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21					
22					
23					

Special Instructions