

CABINETS 4U, INC

My New Kitchen - Appliance Checklist

Client Name: _____

Major Appliances:	MAKE	MODEL	NEW OR OLD?
Refrigerator _____	_____	_____	_____
Cook Top _____	_____	_____	_____
Oven _____	_____	_____	_____
Range _____	_____	_____	_____
Dishwasher _____	_____	_____	_____
Microwave _____	_____	_____	_____
Hood / Ventilation _____	_____	_____	_____

Small Appliances:

Wine Storage _____	_____	_____	_____
Disposal _____	_____	_____	_____
Compactor-----	_____	_____	_____
Hot Water Dispenser _____	_____	_____	_____
Television _____	_____	_____	_____
Computer _____	_____	_____	_____

Fixtures:

Sinks _____	_____	_____	_____
Faucets _____	_____	_____	_____
Lighting _____	_____	_____	_____

Other Notes:

