Colorado Custom Stone

1270 W. Cedar Ave., Suite A
Denver, CO 80223
Phone No.: 720.833.0238
Fax No.: 720.833.0248

Date:

Sales Person: **(CCS USE ONLY)**

Proposal Request

[General Contractor] **[Homeowner]**

Job Number:	xxxx	**Job Name:**	xxxx
Contractor:	xxxx	**Job Address:**	xxxx
Address:	xxxx	**City:**	xxxx
City:	xxxx	**Phone No.:**	xxxx
Phone No.:	xxxx	**Fax No.:**	xxxx
Fax No.:	xxxx	**Cell No.:**	xxxx
Cell No.:	xxxx	**Contact:**	xxxx
Contact:	xxxx		

Template Date: **(CCS USE ONLY)** **Install Date:** **(CCS USE ONLY)**

Areas:	Kitchen with Peninsula	Raised Bar	Desk, Island or Fireplace, etc.
Material:	Mid Range Stone, or Name of Stone		
Material Location:	Supplier Name If Known		
Edge Detail:	Refer to Edge Detail Webpage		
Splash:	4-in., Full, or None		
Sink:	Top Mount, or Undermount		
Stove:	Top Mount, Slide-in, or Free Standing		
Subtops/When:	Yes or No		
Template:	Colorado Custom Stone		
Install:	Colorado Custom Stone		
Tear Out:	Yes or No. If yes, what is current countertop material?		
Sealer:	Colorado Custom Stone		
Plans:	Yes, refer to drawing.		

Special Conditions:

No. of Pieces: **(CCS USE ONLY)**