



Counter Top Request for Quotation Form

Date: _____

6458 Nevilane Drive
 Duncan, BC V9L 5S6
 Ph: (250) 746-9652 Fax: 1-888-503-2664
 ☒ info@akribelasurfacing.com
www.AkribelaSurfacing.com

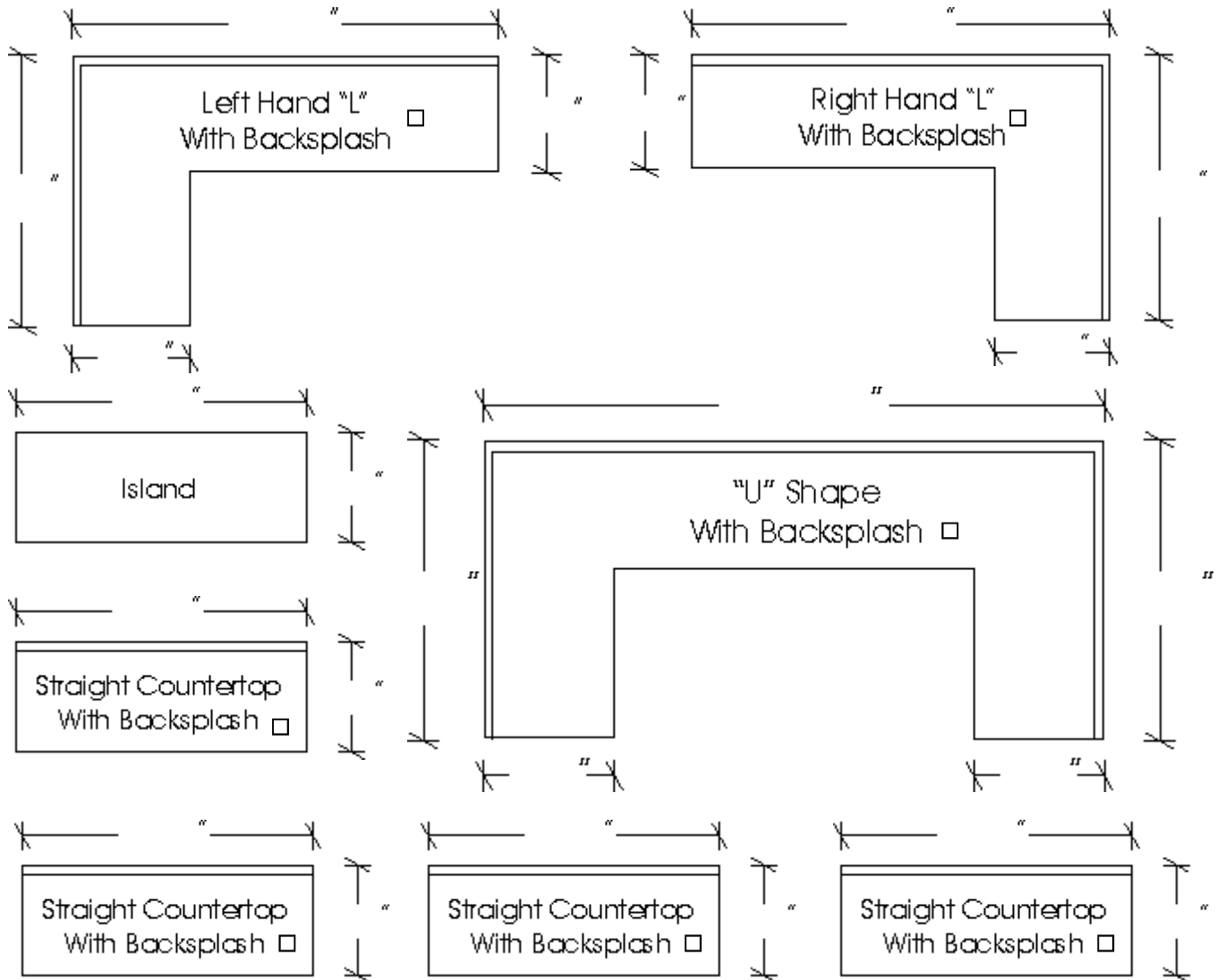
Name: _____
 Address: _____
 City: _____
 Phone: _____
 Email: _____

Please use the following Legend to accurately label your Counter Top sections:

FE - Finished Edge
 AE - Appliance Edge (will butt up against an appliance)
 Edge Profile: Standard Custom _____

Please select from the following options:

Backsplash: Tile 3-4" Cove: Full Height:
 Sink: Supplied Stainless Undermount Acrylic Integral
 Sink Size: Vanity Single Kitchen Double Kitchen
 Product: _____ Colour: _____



PLEASE NOTE:

1. All measurements are to be exterior counter top measurements only.
2. Cabinet measurements will not be accepted.
3. The customer is responsible for the accuracy of the measurements on this Request for Quotation Form. Akribela will come and template the job once a deposit is received. If the size differs, there may be a price adjustment.
4. This form is for quotation purposes only and provides information for an estimate only.