

Order  
 Quote



845 Prosper Road  
 DePere, WI 54115-3103  
**Phone** 920-336-3174  
**Fax** 920-336-5956  
**Toll Free** 1-800-236-8981  
**Email** vcd@valleycustomdoor.com  
**Website** valleycustomdoor.com

Customer# \_\_\_\_\_ V.C.D. Job# \_\_\_\_\_  
 Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Shipping Address: \_\_\_\_\_ Job Name/P.O. Number: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_ Stain Color: \_\_\_\_\_  
 Order Date: \_\_\_\_\_ Preferred Shipper: \_\_\_\_\_ Satin Sheen: \_\_\_\_\_ Matte Sheen: \_\_\_\_\_

**Doors & 5-Piece Drawer Fronts    Doors & 5-Piece Drawer Fronts    Drawer Fronts - Slab Style**

Type of Wood: \_\_\_\_\_ Type of Wood: \_\_\_\_\_ Type of Wood: \_\_\_\_\_  
 Door Style: \_\_\_\_\_ Door Style: \_\_\_\_\_ Outside Edge: \_\_\_\_\_  
 Panel Profile: \_\_\_\_\_ Panel Profile: \_\_\_\_\_  
 Outside Edge Profile: \_\_\_\_\_ Outside Edge Profile: \_\_\_\_\_  
 Stile and Rail Profile: \_\_\_\_\_ Stile and Rail Profile: \_\_\_\_\_

	Quantity	Width	Height		Quantity	Width	Height		Quantity	Width	Height	
1					1				1			
2					2				2			
3					3				3			
4					4				4			
5					5				5			
6					6				6			
7					7				7			
8					8				8			
9					9				9			
10					10				10			
11					11				11			
12					12				12			
13					13				13			
14					14				14			
15					15				15			
16					16				16			
17					17				17			
18					18				18			
19					19				19			
20					20				20			
21					21				21			

<b>35mm Hinging</b>		<b>Drilling Distance in from the edge</b>		Other:
HBP100		3/32 2.5mm		
HBP300		1/8 3.2mm		
Cup Depth		5/32 4mm		
7/16"		3/16 4.8mm		
1/2"				
<b>Hinge Overlay</b>		<b>Qty (pairs)</b>		Notes:
1/4" O.L.				
1/2" O.L.				
3/4" O.L.				

Notes: \_\_\_\_\_

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Are these boxes to be shipped with a door order?  YES  NO  
 Do you want the boxes shipped before the doors if possible?  YES  NO

<b>Dovetail Drawer Box Construction</b> Place an "X" in the appropriate box within each group.		Standard Grade (not selected for color)		Maple (Standard)	Red Oak (Standard)	Cherry (Standard)	Select Red Oak	Select Hard Maple	Select Cherry	Birch	Clear Pine	Hickory	Walnut	White Ash	White Oak	Hardboard	White Melamine
Side Thickness	5/8"															NA	NA
Bottom Panel Material	1/4"																
	1/2"										NA		NA	NA	NA	NA	
	<input type="checkbox"/> No Bottom																
Bottom Panel Application	<input type="checkbox"/> Inset 1/4"	<b>NOTES:</b>  _____ 1-5/16" (33mm)   Other: _____ _____ 3-3/4" (96mm)															
	<input type="checkbox"/> Inset 3/8"																
	<input type="checkbox"/> Inset 1/2"																
	Other _____																
	<input type="checkbox"/> Bottom Mount																
Options		No	Yes	<b>Notes:</b>  _____ 1-5/16" (33mm)   Other: _____ _____ 3-3/4" (96mm)													
	Assembled																
	Finished																
	Scoop Front																
	Pullout Front																
	Under Notch																
Drawer Tracks			12"	14"	16"	18"	20"	22"									
		Full Extension (Side Mount)															
		Rear Mounting Brackets (Pair)															
			7/8 Ext 9"	12"	15"	18"	21"										
		BLUM™ Tandem Full Extension															
		BLUM™ Motion Full Extension	N.A.														
	BLUM™ Rear Mounting Brackets		Blum Top Mount Kit														

Drawer Box Sizes					
Note: On Bottom Mount Applications, the height of the box should be ordered without the bottom panel dimension included.					
	Qty	Width	Depth	Height	Note/Option
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
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21					
22					
23					
24					

Special Instructions:

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1/4" Pre Cut Plywood				1/8" Pre Cut Plywood				1/4" Solid Wood 96" L		Moulding 96" L			
Type of Wood: _____				Type of Wood: _____				Type of Wood: _____		Type of Wood: _____			
Quantity	Width	Height		Quantity	Width	Height		Quantity	Width	Quantity	Mldg#		
1				1				1					
2				2				2					
3				3				3					
4				4				4					
5				5				5					
6				6				6					
7				7				7					
8				8				8					
9				9				9					
10				10				10					
11				11				11					
12				12				12					
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14				14				14					
15				15				15					
16								16					
17								17					
18								18					
19								19					
20								20					
21													
22													
23													
24													
<b>Fluted Rails</b>				<b>Valances</b>				<b>3/4" Solid Wood 96" L</b>		<b>Veneer</b>			
Type of Wood: _____				Type of Wood: _____				Type of Wood: _____		*All veneer is sold in 24" & 48" widths x 96" lengths.			
Quantity Width Height				Type of Wood: _____				Quantity Width		Type of Veneer: _____			
1 2 3 4 5				Indicate Style of Valance: ___ A ___ F ___ B ___ H Specify Profiles Below ___ C Panel ___ Edge ___ S/R ___ ___ D ___ E (Send Template)				1 2 3 4 5 6 7 8 9		___ Duraback ___ Wood on Wood ___ Pressure Sensitive		Quantity Width	
Specify # of flutes, spacing and distance from top and bottom.				Quantity Width Height				1 2 3 4 5 6 7 8 9		1 2			
Do the flutes have integrated Rosettes? <input type="checkbox"/> Yes <input type="checkbox"/> No				1 2 3 4 5 6				10 11 12 13 14 15 16		3 4		1 2 3 4	
If Yes, do you want a <input type="checkbox"/> Single (one end only) <input type="checkbox"/> Double (each end)										<b>Bread Boards</b>		<b>Shelves</b>	
										Quantity Width		Shelf Style: ___ A ___ B ___ C ___ D ___ E (Send Template)	
										1 2 3 4		Quantity W H	



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**CUSTOMER INFORMATION FORM** (Required to establish an account with Valley Custom Door)

Name of Firm or Individual: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_ County of: \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_ Years at this address: \_\_\_\_\_

Email Address \_\_\_\_\_

Check Type of Business: \_\_\_\_\_ Corporation (List Officers) \_\_\_\_\_ Partnership (List Officers) \_\_\_\_\_ Individual (List Owners)

1) Owner/Officer: \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_ Home/Cell Phone (\_\_\_\_) \_\_\_\_\_

2) Owner/Officer: \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_ Home/Cell Phone (\_\_\_\_) \_\_\_\_\_

Accounts Payable Contact Person: \_\_\_\_\_

Sales Tax Status: \_\_\_\_\_ Exempt (Certificate MUST be attached.) \_\_\_\_\_ Non-Exempt Wisconsin residents must indicate sales tax rate \_\_\_\_\_%

**TRADE REFERENCES:**

Name:	Contact Person:		
1) _____	_____	Phone: (____) _____	Fax: (____) _____
2) _____	_____	Phone: (____) _____	Fax: (____) _____
3) _____	_____	Phone: (____) _____	Fax: (____) _____
4) _____	_____	Phone: (____) _____	Fax: (____) _____

**BANK REFERENCES:** (required for open account)

Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

If applying for open account terms, what amount of credit are you requesting: \_\_\_\_\_

In signing this application, I certify the foregoing information to be true and correct. I acknowledge that I have the authority to act on behalf of the above named firm/individual. I understand and agree to the terms of sale in that all invoices will be paid within 30 days from the date of invoice and that a service charge of 1½% per month, 18% annually, can be charged on any invoice or partial invoice outstanding after the date due. I further agree to pay reasonable collection and/or attorney fees and court costs in the event of suit to collect monies due. I waive objections to inquiries made by Valley Custom Door to references supplied on this application.

Signed: \_\_\_\_\_ Dated \_\_\_\_\_

**FOR OFFICE USE ONLY:**

Terms: \_\_\_\_\_

References Checked By: \_\_\_\_\_ Credit Approved By: \_\_\_\_\_

Reference Results: \_\_\_\_\_ Credit Refused By: \_\_\_\_\_