

PAINT COLOUR SELECTION FORM



Job Number _____

Customer Name: _____

AREA	(INSERT ROOM)	(INSERT ROOM)	(INSERT ROOM)	(INSERT ROOM)
WALLS				
MANUFACTURER				
COLOUR				
FINISH (tick as required)	Vinyl Matt <input type="checkbox"/>	Vinyl Matt <input type="checkbox"/>	Vinyl Matt <input type="checkbox"/>	Vinyl Matt <input type="checkbox"/>
	Vinyl Silk <input type="checkbox"/>	Vinyl Silk <input type="checkbox"/>	Vinyl Silk <input type="checkbox"/>	Vinyl Silk <input type="checkbox"/>
	Vinyl Soft Sheen <input type="checkbox"/>	Vinyl Soft Sheen <input type="checkbox"/>	Vinyl Soft Sheen <input type="checkbox"/>	Vinyl Soft Sheen <input type="checkbox"/>
CEILING / COVING				
MANUFACTURER				
COLOUR				
FINISH (tick as required)	Vinyl Matt <input type="checkbox"/>	Vinyl Matt <input type="checkbox"/>	Vinyl Matt <input type="checkbox"/>	Vinyl Matt <input type="checkbox"/>
	Vinyl Silk <input type="checkbox"/>	Vinyl Silk <input type="checkbox"/>	Vinyl Silk <input type="checkbox"/>	Vinyl Silk <input type="checkbox"/>
	Vinyl Soft Sheen <input type="checkbox"/>	Vinyl Soft Sheen <input type="checkbox"/>	Vinyl Soft Sheen <input type="checkbox"/>	Vinyl Soft Sheen <input type="checkbox"/>
WOODWORK				
MANUFACTURER				
COLOUR				
FINISH (tick as required)	Gloss <input type="checkbox"/>	Gloss <input type="checkbox"/>	Gloss <input type="checkbox"/>	Gloss <input type="checkbox"/>
	Satinwood <input type="checkbox"/>	Satinwood <input type="checkbox"/>	Satinwood <input type="checkbox"/>	Satinwood <input type="checkbox"/>

I can confirm that the above are my choices for paint finishes. I agree to pay any additional costs to CSBD for any finishes that exceed the agreed allowance. I also agree to pay for any costs incurred if I change my selection once materials have been purchased.

Signed.....

Date.....