

## WALLPAPER SELECTION FORM



Job Number \_\_\_\_\_

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

AREA	<i>(INSERT ROOM)</i>	<i>(INSERT ROOM)</i>	<i>(INSERT ROOM)</i>	<i>(INSERT ROOM)</i>
<b>WALLS</b> <i>(INSERT BORDER PAPERS IN A SEPARATE COLUMN)</i>				
AGREED ALLOWANCE per roll	£	£	£	£
MANUFACTURER				
RANGE				
COLOUR				
PATTERN NUMBER				
BARCODE REFERENCE				
SAMPLE ATTACHED?	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
<b>CEILING</b> <i>(INSERT PAINT COLOUR ON PAINT SELECTION FORM)</i>				
AGREED ALLOWANCE per roll	£	£	£	£
MANUFACTURER				
RANGE				
PATTERN NUMBER				
BARCODE REFERENCE				
SAMPLE ATTACHED?	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>

I can confirm that the above are my choices for paper 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.....