



GES, Ltd., 21 Bakery Lane, Pembroke HM 07, Bermuda - P. O. Box HM 1876, Hamilton HM HX, Bermuda
 Tel: (441) 295-6697 - Fax: (441) 292-6561 - www.bermudacountrycabinets.com

BCC 4103

CUSTOMER *Last*

First

As Agent For

Billing Address:

Site Address:

Email:

Job Name:

I agree to the terms of the design agreement, and I will purchase the following services:

(1) I will provide measurements and pay a fee of \$250 for a design appointment and a formal estimate.

or

(2) I will have BCC provide measurements, and I will pay a fee of \$500 for an on-site consultation, design appointment and a formal estimate.

Definition of Services

On-Site Consultation: An agent of BCC will visit the jobsite to obtain measurements, review the existing conditions, discuss design options, and take photographs. A consultation will take place in the showroom for projects that are new construction, or when working from existing plans.

Design by Appointment: An agent of BCC will work with the client to create a design using the products and services that are available and that are applicable to this project. The design agreement does entitle the client to review non-dimensional images of the proposed design, and make up to 1 revision during a second appointment. A new design agreement must be purchased for an additional appointment. The dimensional plans and shop drawings are copyrighted and will remain the property of BCC.

Formal Estimate: An agent of BCC will prepare a formal estimate for the cost of the products and services that are necessary to fabricate and install the proposed design.

The design fee will be deducted from the final cost of the complete (cabinets, install & countertop) project. The final cost will be calculated on the formal estimate. The fee is non-refundable and it is solely applicable to this specific project. The design fee is not deductible on orders that are less than \$5,000.00. The final estimate is valid for 30 days. The design agreement is valid for 6 months.

Customer's

Signature: _____ Date: _____ Fee: _____

Representative for GES Ltd. Signature: _____ Date: _____