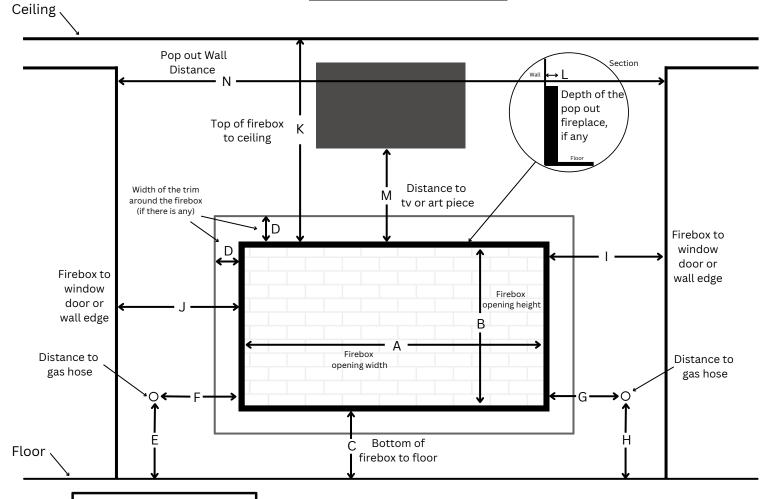


Customer Name:	
Date:	
Phone Number:	
Email:	

FIREBOX MEASUREMENTS

FLAT WALL SITUATION



Additional Information

Fireplace Surround Name:

Color and Finish:

Pop Out Wall: Yes/ No (width:____" depth:____")

Corner Fireplace: Yes/No

Desired Mantel Height (including hearth):____"

Desired Mantel Width:___ "

Other: