



# ESTIMATE REQUEST

Complete this for and fax or email with layout drawing and dimensions

Fax: 920.322.9156 or 920.322.9556

Email: [Estimating@AMCsilestone.com](mailto:Estimating@AMCsilestone.com)

Date \_\_\_\_\_

Requested by \_\_\_\_\_

Email \_\_\_\_\_

Company \_\_\_\_\_

Phone \_\_\_\_\_

Address \_\_\_\_\_

Fax \_\_\_\_\_

Job Name \_\_\_\_\_

Installation in \_\_\_\_\_

If you would like separate estimates per area, please indicate separately below:

Room/Area			
Product			
Color or Color Group			
Edge or Edge Group			
Splash			
Sink (undermount, drop in, farm)			
Range (cooktop, slide-in, freestanding)			
Electrical Outlet			
Sink by AMC?			
Style/Brand			
Tear out?			

Other instructions