

CERTIFIED NEW HOME SPECIALIST™

LIGHTING FIXTURES SELECTION FORM

Job Location:
Builder:
Contact Info:
Customer:
Contact Info:
Supplier:
Contact Info:

SELECTIONS			
LOCATION	FIXTURE	QUANTITY	COST

Total Costs for above including delivery and sales tax:
Installation by:

AUTHORIZATION			
Selection Date:	Order Date:	Delivery Date:	
Received By:			Date:
Customer Authorization:			Date:
Notes:			