

Date:

IKEA KITCHEN ARTICLES REQUEST FORM

Scheduled end (date/time):

Customer Information
Name:
Phone Number:
Email:
Order Number(s):

Installer Information
Name:
Phone Number:
Notes:

Parts Damaged		
Article #/ Description	Quantity	How and where is part damaged?

Parts Needed		
Article #/ Description	Quantity Needed	Quantity Onsite

