

## CHANGE NOTES

Customer: \_\_\_\_\_

Address: \_\_\_\_\_

Installer: \_\_\_\_\_

The estimate in the agreement was based on your understanding of your project and the services required by IKEA to complete it. This form provides you and our installers a way to make sure any changes to your services are understood and completed.

**Note:** The changes indicated below may be updated right up until the end of installation.

**Important: By signing this document you acknowledge the above notes concerning the assembly/installation of IKEA cabinets. You also agree to the charges included above and allow IKEA to charge your credit card accordingly.**

Customer signature:

Date: \_\_\_\_\_

Installer signature:

Date:

