

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.

Description of work	Price	Quantity	Total price
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
Total amount prior to taxes:			\$
<i>Does not include applicable taxes. Taxes will be charged along with the amounts indicated here.</i>			

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: _____

