

Skutt Kiln Specification Form

Please complete this Form and submit with your kiln Order.

To ensure the kiln is compatible with the building's electrical requirements, we recommend meeting with a qualified electrician or building specification authority before completing this form.

Mail to:

Dick Blick Co
Att. A/P Dept 3865
PO BOX 2000
Galesburg, IL 61402-2000
Email to : ccdrops@dickblick.com
Fax: 309-341-5761

The following information is required when ordering a kiln:

Bill To:

Blick Customer Service

Name: _____

School or Studio: _____

Street Address:

PO BOX 2000

City, State, Zip:

Galesburg IL 61402

Phone Number:

800-828-4548

Kiln Brand Name: _____

Kiln Controller: _____

Kiln Specifications:

Electrical Power:

Single Phase

Three Phase

Kiln Accessories:

Vent: _____

Furniture: _____

Your signature confirms the above specifications are correct. If a kiln has to be returned due to incompatibility, Skutt nor Blick will not be liable for return freight charges acquired and a 15% restocking fee will be imposed.

Signature: _____

Ship To:

Name: _____

School or Studio: _____

Street Address: _____

City, State, Zip: _____

Phone Number: _____

Kiln Model Number: _____

Kiln Description: _____

Voltage:

208 Volt

240 Volt

Date: _____