



Branch Locations
 West Kingston, RI
 Wakefield, RI
 Bristol, RI
 Westerly, RI

Contractor Referral Form

Personal Information

Name _____
 Address _____
 City _____ State _____
 Zip/Postal Code _____

Job Address _____
 Job City and State _____
 email _____
 Phone _____

Project Information

Type of construction	<input type="checkbox"/> New	<input type="checkbox"/> Existing
Are you currently working with an Arnold Lumber Salesperson?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Name of Salesperson	<input type="text"/>	
Would you like a salesperson to contact you?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
May we send you promotions by email?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Tell us more about your project

<input type="checkbox"/> Addition	<input type="checkbox"/> Siding	<input type="checkbox"/> Walls/Walkways	<input type="checkbox"/> Deck	<input type="checkbox"/> Patio
<input type="checkbox"/> Kitchen/Bath	<input type="checkbox"/> Replacement Windows	<input type="checkbox"/> Mouldings	<input type="checkbox"/> Outdoor Structure	
<input type="checkbox"/> Roofing	<input type="checkbox"/> Doors	<input type="checkbox"/> Porch	<input type="checkbox"/> Garage	<input type="checkbox"/> Masonry

Project Details

Target Start Date

Tell us how you heard about Arnold Lumber

Television Contractor or Remodeler, please specify... _____
 Internet Search Other, please specify..... _____

Clicking the submit button will open a series of options to e mail this form. If you experience difficulties you may print the form and fax it to: (401) 792-3610. We will e mail your referrals on our next business day. Thank you for contacting Arnold Lumber.