

In Partnership With ...



Client Questionnaire

84 Lumber Sales Associate:	Store Location/#:
	Today's Date: / /
Street Address:	_ or Mailing Address (P.O. Box):
City: State:	Zip: County:
Home Phone: Work Phone:	
Cell Phone: Ema	ail Address:
Location in which you plan on building: Stat	e: County:
City: Development Name and Lot #:	
Have you selected a Walker Top model plan?	Yes No If yes, model name:
Desired construction date: / /	Do you already own your property? Yes No
Do you already have a builder? Yes No Builders Name:	
If you desire to make design modifications to the model plan, please list the changes on the model's plan sheet or study plan. If you would like to work with Walker Top's in house design staff to create a custom home designed for your needs, please inform your 84 Sales Associate. Someone with Walker Top design team will contact you shortly.	
(Please note that Walker Top will be glad to work from any client's sketches, designs, or ideas - providing there are no copyrighted materials used or infringed upon.)	
Desired Log Profile: 6x8 D: 6x12 D:	6x12 Stacked: 8x8 D: Other:
Desired Log Corner Notch: Dovetail: Saddle Notch: Mortise & Tenon:	
Would you like to purchase a study plan?	
Would you like to purchase a complete set of Construction Drawings?	
Would you like to commence a custom home design?	
Would you like a Quick-Quote for your materials package?	
84 Lumber and Walker Top Log Homes look forward to serving you. We will be in contact with you regarding your above requested services and gathering any additional information if needed. Please review the flow chart from your sales associate. This outlines the process of obtaining a genuine Walker Top Log Home.	

Thank You

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