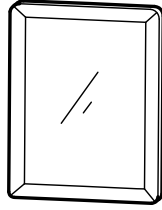
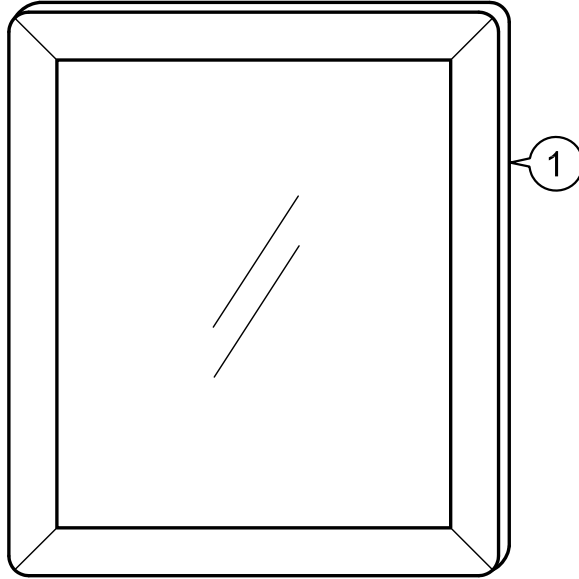


Not Provided



2 Persons

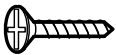
Part List :



**HARDWARE LIST :**

A

M4 x 25mm = 2

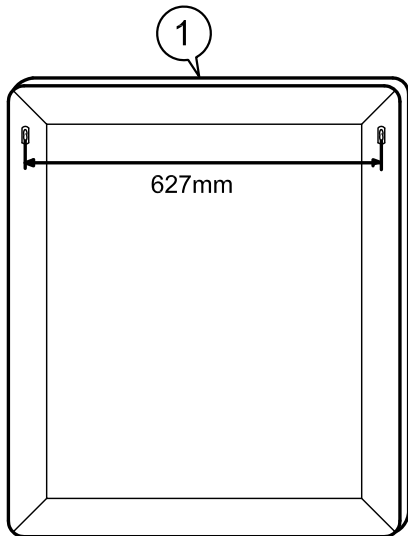


B

PVC WALL PLUGS = 2  
6 x 27mm



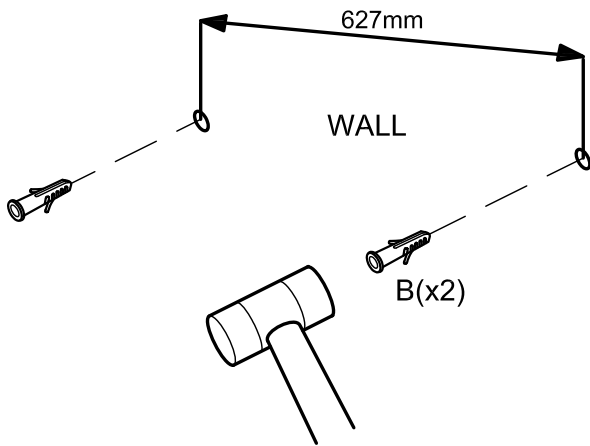
1



BACK FRAME

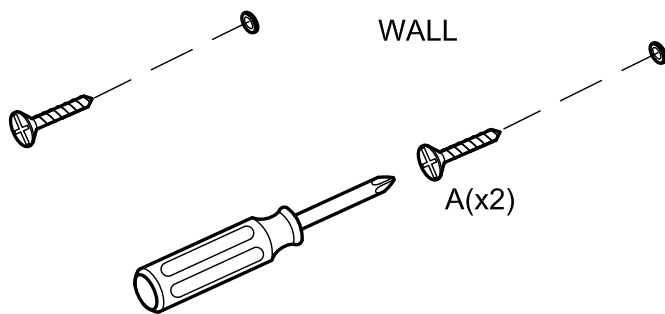
a) First , measure the midpoint between the rear bracket of the mirror frame.(1)

2



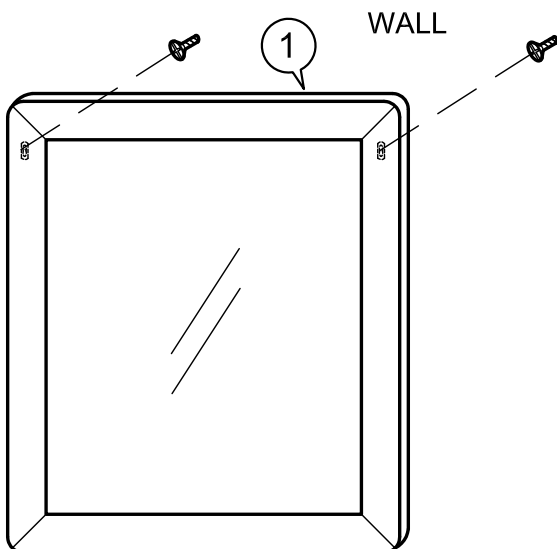
- b) Decide the right placement for the wall. Double check if the desired location is safe by checking for hidden pipes or cables.
- c) Then, drill into the wall according the measurement before with using the correct drill bit. After drilling make sure that the hole is clean and debris free.
- d) Insert the wall plug (B) into the hole. If required , lightly tap the plug with a hammer to level the plug with the wall.

3



- e) Screw the Chipboard Screw (A) into the wall plug.
- f) Screw according to the required depth.

4



- g) Hang the Frame Mirror (1) to the wall.
- h) Make sure the screw locate into the Bracket.



## Parts and Damage Replacement Procedure

1. Please inspect your purchase immediately.
2. This procedure covers product purchased from an authorized Roundhill Reseller and was received in its originally sealed carton.
3. If you find a part missing or damaged, you have a 30-day window in which to order a replacement part from the date on your purchase receipt.
4. You have 3 ways to do this. You will need a copy of your purchase receipt.
  - a. By Fax: Fax the parts order form below and along with your receipt to 614-878-7918
  - b. By Email: Email the order form and along with your receipt to: [parts@roundhillfurniture.com](mailto:parts@roundhillfurniture.com)
  - c. By Mail: Fill out the parts order form below and along with a copy of your receipt send it to Roundhill furniture parts department 3640 Zane Trace Drive, Columbus OH 43228
5. Once this order is sent in, you will be notified if the part(s) you are requesting can or cannot be shipped within 7-10 business days.

**A COPY OF YOUR PURCHASE RECEIPT OR INVOICE MUST BE ATTACHED TO THIS ORDER FORM.  
NO ORDERS WILL BE PROCESSED WITHOUT PROOF OF PURCHASE.**

NAME: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_ (No Post Office Boxes)  
 CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_  
 EMAIL: \_\_\_\_\_

### REASON FOR REPLACEMENT/PLEASE CHECK APPROPRIATE BOX.

- Damaged /scratched, cracked, broken, crushed, etc.
- Mechanical malfunction/ drawer glides, swivel mechanisms, lid stays, etc.
- Missing pieces
- Unfinished surface
- Wrong color
- Other

IF MORE THAN ONE MODEL NUMBER IS LISTED ABOVE, PLEASE SPECIFY THE EXACT MODEL NUMBER OF YOUR ITEM IN THE SPACE PROVIDED BELOW.

Model Number	Part Letter Code	Quantity