

# HOME DECOR

WHOLESALE FABRICATORS

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## VERTICAL BLINDS PARTS & SERVICE REQUEST ORDER FORM

Company Name: \_\_\_\_\_

Ordered By: \_\_\_\_\_

Phone/Fax: \_\_\_\_\_

**\*MINIMUM \$15 ON ALL PARTS ORDERS\***  
**\*\*ALL PARTS ARE COD\*\***

**SIDEMARK:**

Date:

### SERVICE REQUEST

<b>ORIGINAL ORDER DATE:</b>		<b>IS THIS A WARRANTY ISSUE (YES/NO/UNSURE):</b>	
<b>INVOICE #:</b>		<b>HAVE YOU INSPECTED THE PRODUCT (YES/NO):</b>	

*For Warranty Service, You must inspect product prior to sending service request. If determined to NOT be covered under warranty, a trip charge and repair fees will be charged back to you.*

STANDARD REPAIRS:	EXPLAIN CUSTOMER CONCERN AND REPAIRS:
<input type="checkbox"/> Replace/Repair Carriers	
<input type="checkbox"/> Vane Cut Down (Per Blind)	
<input type="checkbox"/> Vertical Valance Repair	
<input type="checkbox"/> Re-string	
<input type="checkbox"/> Replace/Repair Control Mechanism	
<input type="checkbox"/> Change or Add Returns (Both Sides) to Valance	

### PARTS

<input type="checkbox"/> 1" Spacers # _____	<input type="checkbox"/> Headrail End Cap # _____	<input type="checkbox"/> Vertical Vanes # _____ Type _____
<input type="checkbox"/> 1/4" Spacers # _____	<input type="checkbox"/> Ladders # _____	<input type="checkbox"/> End Control (Cord/Chain) # _____
<input type="checkbox"/> C Clips # _____	<input type="checkbox"/> Star Washers # _____	<input type="checkbox"/> Headrail Only, Loaded with Brackets # _____
<input type="checkbox"/> Carrier # _____	<input type="checkbox"/> Tail Clips # _____	<input type="checkbox"/> Vertical Headrail Mounting Bracket # _____
<input type="checkbox"/> Chain (Chrome) # _____	<input type="checkbox"/> Valance Clips # _____	<input type="checkbox"/> Returns Added by Factory # _____
<input type="checkbox"/> Cord # _____	<input type="checkbox"/> Vane Savers # _____	<input type="checkbox"/> Valance Returns (Square) 1 Pair Loaded Headrail # _____
<input type="checkbox"/> Cord Weights # _____	<input type="checkbox"/> Wand # _____	<b>* Parts are Non-Returnable/Non- Refundable</b>
<input type="checkbox"/> Groover Inserts # _____	<input type="checkbox"/> Wand Tilters # _____	