

Special Orders Form — Vertical Blinds

EMAIL COMPLETED FORM TO: FMSPECIALORDERS@HDSUPPLY.COM

REQUEST TYPE: ☐ Order ☐ Quote

ACCOUNT NUMBER _____ ORDER DATE _____

PURCHASER NAME _____ PO NUMBER _____

SALES REP NAME _____ SALES REP PHONE NUMBER _____

SHIP TO (Property Name) _____

SHIPPING ADDRESS _____

CITY _____ PHONE _____

STATE _____ ZIP _____

EMAIL ORDER CONFIRMATION TO: NAME: _____ EMAIL: _____

QTY	VERTICAL BLIND COMPLETE (CHECK ONE)					WIDTH**	LENGTH (DROP)**	ADDITIONAL INFORMATION
	COLOR	MOUNT LOCATION	VALANCE	VANE STACK/DRAW	CONTROL			
	<input type="checkbox"/> WHITE <input type="checkbox"/> IVORY <input type="checkbox"/> OTHER _____	<input type="checkbox"/> INSIDE <input type="checkbox"/> OUTSIDE	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> CENTER <input type="checkbox"/> SPLIT <input type="checkbox"/> ONE WAY* <input type="checkbox"/> RIGHT <input type="checkbox"/> LEFT	<input type="checkbox"/> WAND <input type="checkbox"/> CHAIN			
	<input type="checkbox"/> WHITE <input type="checkbox"/> IVORY <input type="checkbox"/> OTHER _____	<input type="checkbox"/> INSIDE <input type="checkbox"/> OUTSIDE	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> CENTER <input type="checkbox"/> SPLIT <input type="checkbox"/> ONE WAY* <input type="checkbox"/> RIGHT <input type="checkbox"/> LEFT	<input type="checkbox"/> WAND <input type="checkbox"/> CHAIN			
	<input type="checkbox"/> WHITE <input type="checkbox"/> IVORY <input type="checkbox"/> OTHER _____	<input type="checkbox"/> INSIDE <input type="checkbox"/> OUTSIDE	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> CENTER <input type="checkbox"/> SPLIT <input type="checkbox"/> ONE WAY* <input type="checkbox"/> RIGHT <input type="checkbox"/> LEFT	<input type="checkbox"/> WAND <input type="checkbox"/> CHAIN			
	<input type="checkbox"/> WHITE <input type="checkbox"/> IVORY <input type="checkbox"/> OTHER _____	<input type="checkbox"/> INSIDE <input type="checkbox"/> OUTSIDE	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> CENTER <input type="checkbox"/> SPLIT <input type="checkbox"/> ONE WAY* <input type="checkbox"/> RIGHT <input type="checkbox"/> LEFT	<input type="checkbox"/> WAND <input type="checkbox"/> CHAIN			
	<input type="checkbox"/> WHITE <input type="checkbox"/> IVORY <input type="checkbox"/> OTHER _____	<input type="checkbox"/> INSIDE <input type="checkbox"/> OUTSIDE	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> CENTER <input type="checkbox"/> SPLIT <input type="checkbox"/> ONE WAY* <input type="checkbox"/> RIGHT <input type="checkbox"/> LEFT	<input type="checkbox"/> WAND <input type="checkbox"/> CHAIN			
QTY	VANES ONLY (CHECK ONE)						LENGTH (VANE SIZE)	ADDITIONAL INFORMATION
	<input type="checkbox"/> WHITE <input type="checkbox"/> IVORY <input type="checkbox"/> OTHER _____							
	<input type="checkbox"/> WHITE <input type="checkbox"/> IVORY <input type="checkbox"/> OTHER _____							
	<input type="checkbox"/> WHITE <input type="checkbox"/> IVORY <input type="checkbox"/> OTHER _____							
	<input type="checkbox"/> WHITE <input type="checkbox"/> IVORY <input type="checkbox"/> OTHER _____							
	<input type="checkbox"/> WHITE <input type="checkbox"/> IVORY <input type="checkbox"/> OTHER _____							

*One Way Stack - Choose Right or Left to establish which way the vanes will stack.

**If INSIDE mount is chosen, Width x Length measurements need to be the window size. If OUTSIDE mount is chosen, Width x Length should be the actual finished blind size.

Additional Information

1. Inside-mount vertical blinds and vertical headrails will include 1/2" deduction in both width and height; vertical vanes will have no deduction.
2. Special Orders window coverings may not match our stock window coverings due to variance in manufacturer.

VERTICAL BLIND ORDER TERMS

Due to the custom requirements and lead times, orders for vertical blinds may not be cancelled and vertical blinds are not returnable. Additional charges may apply for changing sizes or quantities after the initial order is placed and will require a new worksheet. Delivery times may vary, and freight charges may apply. If ordered, you must inspect product for damages upon receipt. Any damage must be noted when signing for delivery so credit can be issued. **By signing below you agree to the terms stated above and that all measurements shown above are correct.**

ACCEPTED BY: _____
Name (PLEASE PRINT)

Signature

DATE: _____