

# HOME DECOR

WHOLESALE FABRICATORS

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## MINI BLIND & CELLULAR SHADE SERVICE REQUEST ORDER FORM

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

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

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

**SIDEMARK:**

Date:

### SERVICE REQUEST

ORIGINAL ORDER DATE:

IS THIS A WARRANTY ISSUE (YES/NO/UNSURE):

INVOICE #:

HAVE YOU INSPECTED THE PRODUCT (YES/NO):

*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.*

### EXPLAIN CUSTOMER CONCERN AND REPAIRS:

#### MINI BLINDS STANDARD REPAIRS

Re-String or Re-Ladder

Re-String AND Re-Ladder

Slat Replacement

Replace or Repair Control Mechanism

#### CELLULAR SHADE STANDARD REPAIRS

Cut Down One Side

Cut Down Both Sides

Replace/Repair Control Mechanism

Re-String