



UNIVERSAL

WINDOW COVERINGS, INC.
12139 Science Dr, Orlando, FL 32826

Horizontal Blind Order Form

REQUEST CONFIRMATION
PAGE ___ OF ___

Customer Service: 407-275-1455 Ext. 1
800-494-9636

Account #: _____

Ship To: _____

Date: _____

Customer: _____

Need By: _____

Address: _____

PO #: _____

City: _____ State: _____ ZIP: _____

Sidemark: _____

Telephone: _____

Ordered By: _____

Type of Horizontal Blind:

- 2" Wood
 2" Fauxwood
 2 1/2" Fauxwood
 Verona Select
 2" Vinyl
 2 1/4" Sunchazer
 1" Standard Aluminum
 1" Privacy Aluminum
 1/2" Micro Aluminum

Special Instructions:

- Cutouts (Specify in notes below)
 # of Ladders (Specify in notes below)
 Special Valance Sizes (Specify in notes below)
 Specify Color of Cloth Tapes in Notes

Notes: _____

| QTY | ROOM LOCATION | WIDTH | LENGTH | COLOR | | IB/OB MOUNT | RETURNS | CONTROLS | TILT | HOLD - DOWNS | SPACERS | ROUTLESS | CLOTH TAPES |
|-----|---------------|-------|--------|---------------------------------|-----------------------------------|-------------|---------|-----------------------------------|-----------------------------|--------------|----------|----------|-------------|
| | | | | <input type="checkbox"/> Smooth | <input type="checkbox"/> Embossed | | | LR (Standard) Middle / LL / RR | Cord / Wand Motorization | Yes / No | Yes / No | Yes / No | Yes / No |
| 1 | | | | | | | | | | | | | |
| 2 | | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | |
| 5 | | | | | | | | | | | | | |
| 6 | | | | | | | | | | | | | |
| 7 | | | | | | | | | | | | | |
| 8 | | | | | | | | | | | | | |
| 9 | | | | | | | | | | | | | |
| 10 | | | | | | | | | | | | | |
| 11 | | | | | | | | | | | | | |
| 12 | | | | | | | | | | | | | |

Fax: 407-275-6919 or 1-866-872-0672

Email: orders@universalwc.com