

**Custom Blind Order Form**  
**Customer's Own Measurements**

**the blind alley**

14102 N.E. 21ST  
 BELLEVUE, WA 98007  
 (425) 644-7181  
 1(800) 642-5176  
 FAX (425) 644-2836

Customer \_\_\_\_\_ Date \_\_\_\_\_

Phone (Home) \_\_\_\_\_ Salesperson \_\_\_\_\_

Phone (Work) \_\_\_\_\_ Invoice # \_\_\_\_\_

LINE	LOCATION	QTY.	PRODUCT	COLOR NAME & NUMBER	←WIDTH→	↑ HEIGHT ↓	INSIDE MOUNT *	OUTSIDE MOUNT	POSITION WAND		POSITION CORD		SPLIT or 1-WAY	CONTROL LENGTH	NOTES
									LEFT	RIGHT	LEFT	RIGHT			
A															
B															
C															
D															
E															
F															
G															
H															
I															
J															

SPECIAL INSTRUCTIONS

I understand that I am fully responsible for the size (width and height), color, tilt and cord position, and mounting position...inside mount, outside mount, of the blinds I am ordering. I will not hold the blind alley, inc., responsible for any blind I order as long as it is to the specifications I requested as per allowances taken by the factory.

CUSTOMER'S SIGNATURE \_\_\_\_\_

\* On inside mount deductions on width/height will automatically be made by the factory. Do not deduct yourself. Provide actual window sizes only.