

## Delivery Request Form

**Customer Name**

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**Telephone**

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**Delivery Address**

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**Major Cross Streets**

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**Pickup Location**

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**Telephone**

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**Pickup Address**

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**Major Cross Streets**

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**Items To Deliver**

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**Special Instructions**

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**Assembly Required?      YES    NO**

**Any stairs?**

**Move Existing Furniture?    YES    NO**

**Bill to                              Customer    Store**

**We believe everyone has the right to a quality delivery service!**