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CORPORATE FAX ORDER FORM

Requested By: _____ Date: _____

Company Name: _____

Phone #: _____ Fax: _____

Delivery Date: _____

Pickup Date: _____

Adjustment Date: _____

Complex Name: _____ Phone #: _____

Delivery Address: _____ Zip: _____

Unit #: _____ Floor (select one): 1st 2nd 3rd 4th

FURNITURE PACKAGES

- | | | |
|---|---|---------------------------------|
| <input type="checkbox"/> Claremont | <input type="checkbox"/> Bittersweet Pine | <input type="checkbox"/> Matrix |
| <input type="checkbox"/> Highland Park Cherry | <input type="checkbox"/> Maple/Triad | <input type="checkbox"/> |

Upholstery: Sofa / Chair / Loveseat

LIST:

1st Choice: _____ 2nd Choice: _____

UNIT TYPE: (select one) 1-Bedroom 2-Bedrooms 3-Bedrooms 4-Bedrooms

BED SIZES: (choose from: King, Queen, or Twin)

Master: _____ 2nd Bedroom: _____ 3rd Bedroom: _____

ADDITIONAL ITEMS:

- TV (select one): 19" 27"
- TV Stand
- DVD
- Microwave
- Vacuum

HOUSEWARES:

- (select one): Basic Executive
- Housekeeping Accessories
- No. of Baths: _____
- Disposable Items

DECOR:

- (select one): Basic Executive
- Pictures Qty: _____
- Plants Qty: _____
- Ficus Trees Qty: _____

OTHER ITEMS: (1) _____ (2) _____ (3) _____

LEASE INFORMATION

(select one): Short Term 3-Month 6-Month 1-Year

Monthly Rental Rate: \$ _____ Delivery Adjustment Charge: \$ _____ (plus applicable tax)

SPECIAL INSTRUCTIONS