

Custom SLIPCOVER & UPHOLSTERY

Customer Checklist Please Check Appropriate Boxes

1. Is this residential, business or healthcare furniture?

2. Does your furniture need re-upholstering or a slipcover ?

3. What type of furniture needs work?

Sofa Parsons Chair Wing Back Chair Chaise Lounge
 Loveseat Recliner Bench Ottoman
 Lounge Chair Dining Chair Bed Bench Wall Upholstery
 Other (Please Explain) _____

Headboard Custom Re-upholster
 Twin Full Queen King

4. What style is the piece that needs work?

Traditional Contemporary Mid Century Victorian
 Modern Unknown Other (Please Explain) _____

5. Do you need us to build a custom piece for you? Yes No

If yes please email us a picture or drawing of what you have in mind, please include measurements and specifications. Email to slipuph@gmail.com .

6. Will you require our pick up and delivery services? Yes No

If yes please outline any special directions and instructions, such as elevators, gate codes, etc.

7. Do you need drapery work done? Yes No Cornice Board Yes No

A 50% labor deposit and fabrics purchased from us must be paid for before we start your job.

Please Enter Your Information Here

Name: _____ Phone: _____ Cell: _____

Street Address: _____

City: _____ Zip: _____

Commercial ♦ Residential ♦ Healthcare
2969 E. Ponce De Leon Ave
P- 404.377.9521 Email - SlipUph@GMail.Com