



### Delivery Installation Questionnaire

Date \_\_\_\_\_ Customer \_\_\_\_\_ Order No. \_\_\_\_\_

Product name \_\_\_\_\_ dimensions \_\_\_\_\_

Installation is at a \_\_\_\_\_ House \_\_\_\_\_ Duplex \_\_\_\_\_ Apartment \_\_\_\_\_ Condo \_\_\_\_\_ Other: \_\_\_\_\_

Approximate year house was built? \_\_\_\_\_

Is there an elevator? If yes, \_\_\_\_\_" height x \_\_\_\_\_" width x \_\_\_\_\_" length

Is the Installation in a \_\_\_\_\_ Bedroom \_\_\_\_\_ Office \_\_\_\_\_ Living Room \_\_\_\_\_ Other: \_\_\_\_\_

Is the Installation upstairs? \_\_\_\_\_ Yes \_\_\_\_\_ No if upstairs, how many flights of stairs? \_\_\_\_\_

Are the stairs \_\_\_\_\_ Narrow \_\_\_\_\_ Wide what size is the stair landing \_\_\_\_\_

Is the ceiling in stairwell parallel with stairs? \_\_\_\_\_ Yes \_\_\_\_\_ No

Are there any lamps, pictures or paintings in stairwell? \_\_\_\_\_ Yes \_\_\_\_\_ No

Room dimensions? \_\_\_\_\_ Feet. X \_\_\_\_\_ feet Doorway dimensions \_\_\_\_\_"wide x \_\_\_\_\_" height

Ceiling height? \_\_\_\_\_ Feet Ceiling fan? \_\_\_\_\_ Yes \_\_\_\_\_ No Hanging light fixture \_\_\_\_\_ Yes \_\_\_\_\_ No

What material is on the floor? \_\_\_\_\_ Carpet \_\_\_\_\_ Wood \_\_\_\_\_ Tile \_\_\_\_\_ Other: \_\_\_\_\_

Are there baseboards? \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, \_\_\_\_\_"height \_\_\_\_\_"thickness

Is there molding or trim on the wall? \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, describe \_\_\_\_\_

Are there electric or telephone outlets or switches in the installation area? \_\_\_\_\_ Yes \_\_\_\_\_ No

Note: Most pier cabinets have solid backs and will block electric & telephone outlets or switches.

How close to your front door can we park? \_\_\_\_\_

Do you have pets? \_\_\_\_\_ Yes \_\_\_\_\_ No

Are there any restrictions or obstructions in the home that we should know about prior to the installation?  
\_\_\_\_\_

Are there any driving restrictions such small driveway? Tree-lined road? Security Gates? Please describe \_\_\_\_\_  
\_\_\_\_\_

Is there anything else we should know? \_\_\_\_\_

Additional comments: \_\_\_\_\_

**Email or Text photos of the following:**

1. Entrance to house
2. Hallways and or Stairwells
3. Entrance area (ie,doorway)
4. Room where Wallbed is going to be installed, including the actual wall where it's being installed

**Mattress must be available at time of delivery, so installers can adjust the mechanism on your bed . If it is not available, there will be an additional service charge for the return visit.**

**Please have the room clear for assembly and installation, leaving 8-10 ft. clear in front of installation wall. Remove any furniture. Pictures or paintings should also be removed from the wall. Allow a minimum of 2-3 hours to complete.**

**We will contact you, via phone, 1 to 2 days prior to your scheduled delivery to confirm. Please advise the best phone number(s) to reach you at. If we cannot reach you to confirm, WE WILL NOT DELIVER.**

**Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_**