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FAX 408-980-1433

1448 S. Santa Fe Ave.
Compton, CA 90221

Ph. 310-631-2323
FAX 310-631-2322

www.justodelivery.com email: customer.service@justodelivery.com

DATE _____

INVOICE # _____

Customer Name _____

Shipping Address _____

Contact Information Home _____

Cell _____

Email _____

Delivery Instructions _____

Itemized list of product _____

Additional information (mark all that apply)

☐ Stairs ☐ Disassembly ☐ Assembly ☐ Road Restrictions

☐ Building Restrictions ☐ Removal of Existing Furniture

☐ Other. Please Explain _____

ESTIMATING YOUR DELIVERY CHARGES

\$ _____ Base delivery fee (refer to fee schedule)

\$ _____ Stairs: \$20.00 per 10 steps after the first landing

\$ _____ Assembly / Disassembly: \$35.00 per piece

\$ _____ Additional insured on policy: \$50.00 per name

Removal of Existing Furniture Additional - Please contact Justo offices directly for estimate.

Pricing provided is for estimating purposes only and does not constitute a final quote. Final pricing will be confirmed by Justo Blanket Wrap Delivery upon scheduling.

TOTAL ESTIMATED DELIVERY FEE: _____

Preferred time of delivery (mark one) ☐ 7:30 am - 11:30 pm

☐ 12:00 pm - 4:00 pm

Preferred day of delivery (mark one)

☐ Mon

☐ Tue

☐ Wed

☐ Thur

☐ Fri

Payment method (mark one) ☐ CHECK ☐ CASH

☐ MASTERCARD ☐ VISA ☐ AMERICAN EXPRESS

Check number _____

Credit Card No _____

Expiration Date _____

Billing Zip Code _____

Authorized by (please print clearly) _____

Signed _____

Date _____

Justo Blanket Wrap Delivery Service will contact the client within 24 hrs. from the date of pick up from vendor to conveniently schedule delivery MONDAY - FRIDAY (4 hour windows).

All merchandise purchased, will be delivered within 4 - 6 business days from the date of pick up from vendor within a 30 mile radius of the Justo Blanket Wrap Delivery Warehouse. Additional time may be needed for delivery areas exceeding a 30 mile radius.

All merchandise is sold "AS IS" with defects and flaws.

Path and area of delivery must be cleared for the service provided to avoid additional charges. Stair Carry or Special Placements upon delivery can alter the delivery charge. Missed appointments are subject to 50% of Original Delivery Fee. Any additional services are subject to additional service fees.

All the statements above are true and correct to the best of my knowledge. I understand and agree to the terms of this contract.

Signed _____

Date _____