

ABERDEEN BLIND COMPANY

ESTABLISHED 1952

32 Eslemont Avenue
Aberdeen
AB25 1SP
Tel: 01224 637609
Fax: 01224 631172
Email: sales@aberdeen-blinds.co.uk

37502

CUSTOMER
ORDER No.

12/a

Customer
Address

SCHLUMBERGER
KIRKHILL TESTING
Unit 46 Howe Moss Terr
Dyce
AB21 0GA

Tel. home
Tel. work
mobile
email

DATE
MEASURED/ORDERED
01/21/06/19

CURTAINS
PLEATED
ROLLERS
ROMANS
SHUTTERS
VENETIAN
VERTICALS
VISION
WOODEN

AM PM (MEASURING TIME)

MON		
TUE		
WED		
THU		
FRI		

P/CUST
NET
PRESS
RADIO
MAG.
VAN
RECC.
SHOP
TV
YELL P
OTHER


AM PM (FITTING TIME)

MON		
TUE		
WED		
THU		
FRI		

ALL BLINDS TO BE PAID FOR AT TIME OF FITTING

Room	No.	Width	Drop	Slat Size	Colour	Control LH or RH	Fitting Height	Any other Instructions	Price
1st Floor		1390	1360	89		RH	260		
Open Plan		1375				LH			
Floor		1390				RH			
		1385				LH			
		1385				LH			
		1370				RH			
		2850				LH			

rail type & colour
 alum white brown
 white chain
 welded in weight
 recess size
 window not square
 wood fix
 stone fix
 brackets top face

measured by  date _____ fitted by _____ date _____
 CASH _____ CHEQUE _____ SPREE _____
 INVOICE _____ CARD _____

ALL BLINDS MANUFACTURED AFTER 1st APRIL 2014 MUST COMPLY WITH NEW CHILD SAFETY LAWS. SAFETY DEVICES SUPPLIED WITH GOODS MUST BE FITTED BY US AT THE TIME OF INSTALLATION. REFUSAL TO ALLOW SAFETY DEVICE TO BE FITTED WILL RESULT IN THE BLINDS NOT BEING INSTALLED. UNDER THE TERMS OF THIS CONTRACT YOU WILL BE LIABLE TO ACCEPT DELIVERY AND PAY THE FULL AMOUNT. I have ordered the above goods and agree to pay the amount shown in full at the time of fitting. If payment is not made in full at that time Aberdeen Blind Company Ltd has the right to remove the goods until full settlement is made. Title of the goods does not pass to the customer until payment has been made in full. Declaring that there shall be no liability for normal damage occasioned by such removal.

TOTAL PRICE £ _____

To Be Confirmed

DEPOSIT £ _____

PRICE ACCEPTANCE
Customer's Signature

Special Instructions