

Level 1 is Wm Work Wm Van

**ABERDEEN**  
BLIND COMPANY  
ESTABLISHED 1952

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

45829

**CUSTOMER**  
**ORDER No.**

DATE  
MEASURED/ORDERED  
24/05/23

AM PM (MEASURING TIME)

MON		
TUE		
WED		
THU		
FRI		

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

Customer's Name NHS - ARI  
Address 209 Victoria  
Pinar Zone Level 5  
Post Code

CURTAINS	
PLEATED	
ROLLERS	
ROMANS	
SHUTTERS	
VENETIAN	
VERTICALS	
VISION	
WOODEN	

AM PM (FITTING TIME)

MON		
TUE		
WED		
THU		
FRI		

Tel. home	
Tel. work	
mobile	
email	

**ALL BLINDS TO BE PAID FOR AT TIME OF FITTING**

Room	Width	Drop	Slat Size	Colour	Control LH or RH	Fitting Height	Any other Instructions	Price
515		1965	80	White W/L				
↓		↓	↓	White				
Put On New Clips <b>GREEN BRACKETS</b>								

alum	anthracite	black	brown	champ-gold	chrome	silver	white	recess size	motorised	wood fix	stone fix	brackets top	brackets face
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measured by	fitted by	date	CASH	CHEQUE	SPREE
			INVOICE	CARD	

ALL BLINDS MANUFACTURED AFTER 1<sup>ST</sup> 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 A 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 50% deposit and the remaining balance on the day of fitting. If payment is not made in full at that time Aberdeen Blinds 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 £  
DEPOSIT £  
BALANCE £ 528 H/W

To Be Confirmed  
PRICE ACCEPTANCE  
Customer's Signature

Special Instructions

# Project Budget Cost Request Form


X26027 - SENT TO G WATT


ALL SECTIONS MUST BE COMPLETED BEFORE REQUEST WILL BE CONSIDERED

Site: A.R.1 Foresthill	Building: A.R.1
Ward / Department: 209, Urology <sup>Pain</sup> Zone	Contact Name: Nikki Webster
Contact Number: 01224 550544	Contact E-Mail Address: <del>nikki.webster</del> nikki.webster3@nhs.scot
Brief Description of Request: No blinds in room 515	

$$\begin{array}{r} \text{Low 5} \\ \hline 1965 \\ 1965 \\ 1965 \\ 1965 \\ \hline 16 \end{array}$$

138  
 ↓  
 528  
 138

Request Submitted By: Nikki Webster	Name: Nikki Webster
	Job Title: Ward Assistant
Signature: 	Date: 12-5-23

New Cans  
 Low  


Request Supported By (e.g. Service or Business Manager): Cath Armstrong	Name: Catherine Armstrong
	Job Title: SCN
Signature:	Date: 12-5-23
Management Accountant Approval: Catherine Armstrong	Name: Catherine Armstrong
	Job Title: SCN
Signature: CA Armstrong	Date: 12-5-23

Date Received:	Date Returned:
Project Manager:	Project Number:
Budget Cost Amount for Approval: (to be provided by Estates)	£

Intended Source of Funding (e.g. Departmental; Endowments; Capital etc.):

Level 1 WAI O2

# PURCHASE ORDER: NFE12926854

<b>Buyer</b> NHS GRAMPIAN SUMMERFIELD HOUSE EDAY ROAD ABERDEEN, GRAMPIAN AB15 6RE	<b>Order Date</b> 24 May 2023	<b>Invoice To</b> NHS GRAMPIAN FINANCE DEPARTMENT, WESTHOLME, WOODEND QUEENS ROAD ABERDEEN, AB15 6LS
<b>Supplier</b> Aberdeen Blind Company 32 Esslemont Avenue Aberdeen, 75450	<b>Order Contact</b> Name: Shona Battensby Phone: 07876258954 <a href="mailto:shona.battensby@nhs.scot">shona.battensby@nhs.scot</a>	<b>Delivery</b> Shona Battensby NAGDENGINEERING MILE END WORKSHOP ESTATES C/O CENTRAL STORES Foresterhill ABERDEEN, GRAMPIAN AB25 2ZD

### Delivery Information

Order Type:	Direct Ship
Carrier:	Best Way -Normal Delivery
FOB - Delivery Terms:	Delivered -Allowed

### Payment Information

Customer Number:	Not Known
Payment Terms:	Net 30

Line	Item Type	Item No	Manufacturer No	UOM	Pack Size	Qty	Unit Price	VAT Type	Extended Amt
	Description (Line Comments)								
1	Non-Catalogue	unknown		Each		1	£528.00	SI	£528.00
	To remove any existing and supply and fit new blinds as per request from Nikki Webster for room 515 in Ward 209, Urology. (Call off against NHS Grampian Measured Term Contract Framework and agreed rates therein)								
<b>Total Extended Amount:</b>									£528.00

### VAT Types

Key	Description
SI	SI - STD IRRECOVERABLE

### Terms & Conditions of Purchase:

1. This Purchase Order is subject to NHS Scotland Standard Conditions of Contract for the Purchase of Goods or Services.
2. The prices detailed in this Purchase Order are fixed and firm for the duration of this order and not subject to any escalation.
3. If the Supplier finds any discrepancies, ambiguities, or contradictions between various parts of this Purchase Order, or any errors or omissions, the Purchaser shall be immediately informed in writing. Any work performed after such discovery, until authorised in writing by Purchaser, will be at the Supplier's risk and expense.
4. Payment shall be effected within 30 days from receipt of a satisfactorily rendered full and correct invoicing documentation and fulfilment of supplier's obligations under this Purchase Order, unless agreed otherwise between Purchaser and Supplier.
5. Packages containing fragile articles must be packed with special precaution against risk of breakage and marked "fragile - handle with care". Supplier is responsible for the identification of any hazardous materials, which may be included with delivery of goods. Delivery must be made in strict accordance with the Health and Safety at Work Act 1974 and all sub ordinate legislation such as Control of Substances Hazardous to Health Regulations (COSHH) and Manual Handling Regulations latest revisions.
6. Goods must be received between 0900 and 1530 hours Monday to Thursday; and 0800 and 1500 hours Friday. The Purchaser shall not be responsible for any costs for re-delivery of goods as a result of delivery being made out with these receiving hours.
7. The correct delivery address for delivery and invoicing shall be stated on this Purchase Order. Any changes to delivery/ invoice requirements shall be covered by way of revision to this Purchase. The Purchaser will not accept any responsibility for goods or invoices delivered to any point other than stated on this Purchase Order, unless covered by the issue of a revision to this Purchase Order.
8. Supplier must comply with the units of supply stated on this Purchase Order. Any changes must be covered by way of a revision to this Purchase Order.