

ABERDEEN
BLIND COMPANY
ESTABLISHED 1952

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

49780

CUSTOMER
ORDER No.

Customer's Name Philip
Address 31 countesswells
Crescent
Post Code AB15
8LP

Tel. home
Tel. work
mobile 07989 498236
email

DATE
MEASURED/ORDERED
21/03/15

CURTAINS	
PLEATED	
ROLLERS	
ROMANS	
SHUTTERS	<u>2/3</u>
VENETIAN	<u>✓</u>
VERTICALS	
VISION	
WOODEN	

AM PM (MEASURING TIME)			P/CUST
MON	<u>✓</u>		NET
TUE			PRESS
WED			RADIO
THU			MAG.
FRI			VAN
AM PM (FITTING TIME)			RECC.
MON			SHOP
TUE			TV
WED			YELL P
THU			OTHER
FRI			

Balance for order payable on arrangement of installation

Room	Width	Drop	Slat Size	Colour	Control LH or RH	Fitting Height	Any other Instructions	Price
<u>Bedroom</u>	<u>378</u> ✓	<u>976</u> ✓	<u>P/F Roller</u>	<u>Bella Dove</u> ✓	<u>-</u>	<u>-</u>	<u>TAN</u>	<u>145</u>
	<u>498</u> ✓	<u>1069</u> ✓	<u>↓</u>				<u>Golden Appl.</u> ✓	<u>178</u>
	<u>378</u> ✓	<u>976</u> ✓	<u>↓</u>				<u>↓</u>	<u>145</u>
							<u>2 Hand Brackets</u> ✓	<u>468</u>
								<u>1330</u>

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

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 a 50% deposit and the remaining balance when confirming the installation appointment. If payment is not made in full at that time, Aberdeen Blinds have the right to refuse to install the products 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 £ 330
DEPOSIT £ 165
BALANCE £ 165

To Be Confirmed
PRICE ACCEPTANCE
Customer's Signature

Special Instructions

[Signature]