Baileys Blinds

330917 **CUSTOMER ORDER No.**

34 HIGH STREET, SPENNYMOOR,
DURHAM DL16 6DB
TEL: 01388 813267 or **0191 258 5956**
sales@baileys-blinds.co.uk
www.baileys-blinds.co.uk

DATE MEASURED/ORDERED
4/1/17

VAT Reg. No. 607 6561 34

SPECIAL INSTRUCTIONS

Total £399
Dep -£110 B/C
Bal £289

FITTED APPT 13.1.17 AMEA

Customer's Name LIDDELL

Address 23 OLD GATE COURT
MORPETH - NE61 1LT

PHONE No.

home	946212.
work	
mobile	
fax	

VENETIAN		
ROLLERS	✓	2
VERTICALS	✓	3
PLEATED		

ALL BLINDS TO BE PAID FOR AT TIME OF FITTING

Room	No.	Width		Drop		Slat Size	Colour	Control LH or RH	Fitting Height	Price
FDR	1D	38	3/4	51	3/4	3½	PORTLAND WHITE V	L/H	96	82
BATH	1R	24	3/4	50	—		SILVALIN OO R	R	97	41
KIT	1M	38	7/8	51	—		BISCOTTI R	R	97	82
							N/S/B			235
							SILVER CHAIN/END CAP			-60
L/R L/F	1R	38	1/2	51	3/4	3½	PORTLAND V	R/L	96	82
L/R R/F	1R	39	—	51	3/4	3½	WHITE V	L/R	96	82
							IRWIN			164
		1								-50
							519910			
				267926.			Jonno Liddell			

SAFETY DEVICES SUPPLIED WITH GOODS MUST BE FITTED BY US AT THE TIME OF INSTALLATION. IF YOU REFUSE TO ALLOW A SAFETY DEVICE TO BE FITTED, THEN THE GOODS WILL NOT BE INSTALLED, AND UNDER THESE CIRCUMSTANCES YOU WILL STILL BE LIABLE TO PAY THE FULL PRICE UNDER YOUR CONTRACT. YOU ARE STILL BOUND TO ACCEPT DELIVERY OF THE GOODS AND TO PAY FOR BOTH THE FITTING AND INSTALLATION EVEN ALTHOUGH INSTALLATION HAS NOT BEEN CARRIED OUT.

PLEASE NOTE THAT WHEN SLATS ONLY ARE SUPPLIED TO EXISTING HEADRAIL, THIS IS DONE AT CUSTOMERS OWN RISK. BAILEYS BLINDS CANNOT BE HELD RESPONSIBLE FOR BREAKAGE WHICH MAY HAVE BECOME BRITTLE WITH AGE.

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 Baileys 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	£ 289
DEPOSIT	£ 60 B/C
BALANCE	£ 175

PRICE ACCEPTANCE Customer's Signature J Liddell

Measured By:
D

GOSFORTH

Baileys Blinds

Roller Blind Order Form

Fax No._____

Date: 4/1/17

Date Re:_____

Contact name: LIDDELL

Customer Order No: 330917

Page____ of____

F/M

No.	Fabric	Colour	W	D	Rec	Con	Fix	Scallop	Pole	Braid
1	SILVALIN	00	704	1270	R	R	T	1	2463	
1	BISCOTTI		987	1295	R	R	T	1	—	
			D+G							

Special Instructions:- NO SEW BAR
SILVER CHAIN/END CAPS

GOSFORTH

BAILEYS BLINDS Page 1 of 1

Vertical Blind Order Form Fax No: _____

Date: 4/1/17 Date req: _____

Contact Name: LIDDELL

Customer Order No: 330917

F1H

No	Type	Size	Fabric	Colour	S/R	W	D	Rac	Con	Fit	Bun	No of Wands
1	VERT	3½	PORTLAND	WHITE	W	984	1314	R	L	T	L	2438
1	—	—	—	—	—	977	1314	—	R	T	L	—
1	—	—	—	—	—	990	1314	—	L	T	R	—
				IRWIN								

Special Instructions: