



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

Customer's Name DAY
Address 79 LOW CONISCLIFFE
DARLINGTON
Post Code DL2 2NG

Tel. home	<u>01325 354 603</u>
Tel. work	
mobile	
email	

DATE MEASURED/ORDERED
03 / 04 / 18

Measured By:
SHAUN HANLEY

CURTAINS		
SHUTTERS		
ROMANS		
VENETIAN		
ROLLERS	<u>X</u>	<u>1</u>
VERTICALS		
PLEATED		

SPECIAL INSTRUCTIONS

R.W.R.
EXT F/FIX BRTS
FIX IN SAME PLACE
AS OLD BLIND

331796

Client

NET	
PRESS	
RADIO	
MAG.	
VAN	
RECC.	
SHOP	
P/C	
OTHER	

Fitted By

DATE	DAY	AM	PM

rail type & colour alum white brown			bottom chain white plastic	recess size <input checked="" type="checkbox"/>	window not square	wood fix	stone fix <input checked="" type="checkbox"/>	brackets top face <input checked="" type="checkbox"/>	
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Room	Width	Drop	Slat Size	Colour	Control LH or RH	Fitting Height	Price
<u>KIT</u>	<u>1200</u>	<u>1020</u> <u>1/A</u>		<u>ROLLER BLIND</u> <u>ADIRA CREAM</u> <u>SHAPE 1</u> <u>(ARENA)</u>	<u>R</u>	<u>2300</u>	<u>£84</u>
				<u>EXT F/FIX BRTS</u> <u>FIX TO FRAME IN</u> <u>SAME PLACE AS OLD BLIND</u>			

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.

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	£ <u>84</u>
<u>CASH</u> DEPOSIT	£ <u>20</u>
BALANCE	£ <u>64</u>

PRICE ACCEPTANCE Customer's Signature

J. Day

CASH	<input checked="" type="checkbox"/>	CHEQUE	<input type="checkbox"/>	CARD	<input type="checkbox"/>
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ALL BLINDS TO BE PAID FOR AT TIME OF FITTING



