



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
18/4/19

Measured By:
RDF

GO AHEAD 336198

SPECIAL INSTRUCTIONS
VELTS 9-1 AM
ALCU ① UNABLE TO FIT
FRONT DOOR BRACKETS IN SLIGHTLY TO HIGH FOR SKINNING.
ALL GAPS FITTING EXPLAINED

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

Customer's Name AUTO INSPECTION
Address 4 BEALL FARM
STOCKS FELD
Post Code NE43 7AL

CURTAINS	
PLEATED	
ROLLERS	X3
ROMANS	
SHUTTERS	
VENETIAN	
VERTICALS	
VISION	
WOODEN	

Tel. home EMMA BELL
Tel. work _____
mobile 08448805088
email _____

Fitted By _____ DATE _____ DAY _____ AM _____ PM _____

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

Room	Width	Drop	Slat Size	Colour	Control LH or RH	Fitting Height	Price
ALCU 2	2350	2260	EXLITE WHITE	TOP TO CEILING	R	2260	203.95
3	2250	2260		CEILING	L	2260	203.95
FRONT DOOR	2520	2035			BATTEN	2035	228.96
				LOW VOLTAGE ONE TOUCH, RECHARGEABLE BATTERY			150.00
						TOTAL	786.86
				DISC ON ROLLERS 10%			64.00
						TOTAL + VAT	722.86
							144.57

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 Scotblinds, 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 £ 867.43

DEPOSIT £ _____

BALANCE £ _____

PRICE ACCEPTANCE Customer's Signature

ALL BLINDS TO BE PAID FOR AT TIME OF FITTING

CASH CHEQUE CARD

