



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 **MORLEY**
Address **2 WEST ROAD,
FONTELAND**

Post Code **NE20 9SU**
Tel. home **07841520651**
Tel. work **MRS**
mobile **07540574881**
email

DATE MEASURED/ORDERED
26/11/19
Measured By:
RDF

339895

SPECIAL INSTRUCTIONS

TO BE SURVEYED
001 FLOW WHITE
OR
003 SILK WHITE
COLOUR TO CHOOSE
AT SURVEY

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

CURTAINS	
PLEATED	
ROLLERS	
ROMANS	
SHUTTERS	XB
VENETIAN	
VERTICALS	
VISION	
WOODEN	

Fitted By	DATE	DAY	AM	PM

alum	white	brown	white chain	welded in weight	recess size	motorised	wood fix	stone fix	brackets top	brackets face

Room	Width	Drop	Slat Size	Colour	Control LH of RH	Fitting Height	Price
LH BED (1)	1025	1020	63	SCATLE	CENT 2	1xL/1xR	261.00
(2)	1025	1020				1xL/1xR	261.00
RUH (1)	1025	1040				1xL/1xR	266.00
(2)	1025	1025				1xL/1xR	262.00
KITCH (1)	1450	1145				1xL/2xR	445.00
(2)	1450	1145				1xL/2xR	445.00
LOUNGE (1)	985	1145				1xL/1xR	281.00
(2)	985	1140				1xL/1xR	280.00
TOTAL							2441.00

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 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 **£2441.00**
DEPOSIT **£1200.00**
BALANCE **£1241.00**

PRICE ACCEPTANCE Customer's Signature

AGTM 435457

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

