



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

**DONKIN**

Address

**7 HAZEL TERRACE  
CRAGHEAD, STANLEY**

Post Code **DH96BW**

Tel. home

**01207 236575**

Tel. work

mobile

email

DATE  
MEASURED/ORDERED

**25/6 120**

Measured By:

**RDF**

SPECIAL INSTRUCTIONS

*To BS Sunways*

341823

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

CURTAINS	
PLEATED	
ROLLERS	
ROMANS	
SHUTTERS: <b>XA</b>	
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	L	CRNF	Control LH or RH	Fitting Height	Price
<b>LOUNGE</b>									
<b>BNY ①</b>	420	1292	63	<b>PURE WHITE</b>	<b>SEATTLE</b>	<b>PLANO</b>	<b>TRCT MID</b>	1xL	151.00
<b>②</b>	1120	1292	→	→	→	→	<b>MID</b>	1xL/1xR	405.00
<b>③</b>	420	1292	→	→	→	→	<b>NO MID</b>	1xR	151.00
<b>RAHONT (BED)</b>	1171	1085	→	→	→	→	<b>NO MID</b>	1xL/1xR	355.00
								<b>TOTAL</b>	<b>1062.00</b>
								<b>10% DISC IF ALL ORDERED</b>	<b>106.00</b>

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 **£956.00**

DEPOSIT £

BALANCE £

PRICE ACCEPTANCE Customer's Signature

**ALL BLINDS TO BE PAID FOR AT TIME OF FITTING**

CASH    CHEQUE    CARD

