



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 **SAEED**

Address **18. PLANETREE AVE
FENHAM**

Post Code **NE4 9TE**

Tel. home	
Tel. work	
mobile	07932 720092
email	

DATE MEASURED/ORDERED
29/10/20

Measured By:
DAVE

CURTAINS	
PLEATED	
ROLLERS	
ROMANS	
SHUTTERS	
VENETIAN	
VERTICALS	X 7
VISION	
WOODEN	

SPECIAL INSTRUCTIONS
GRIT + CALLED DGVISD
GILLIAN
2ND OPTION
DREMPUIS GREY

346681

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

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
	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	FR					

Room	Width	Drop	Slat Size	Colour	Control LH or RH	Fitting Height	Price
WIN ①	765	1270	3/2	NYLA SOFT GREY	Max 1 FR	L/L 2200	83.00
②	1415	2180	→	→	R/R	→	153.00
③	585	1460	→	→	R/R	→	90.00
④	1235	1460	→	→	R/R	→	135.00
⑤	1320	1460	→	→	R/R	→	135.00
⑥	1335	1460	→	→	R/R	→	135.00
⑦	2765	1460	→	→	R/R	→	213.00
						TOTAL	£944.00
						DISC GIVEN	£144.00

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 **£800.00**

DEPOSIT **£**

BALANCE **£**

PRICE ACCEPTANCE Customer's Signature

CASH	CHEQUE	CARD
------	--------	------

ALL BLINDS TO BE PAID FOR AT TIME OF FITTING

