



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
24 / 06 / 21
Measured By:
SHAUN HANLEY

345932

Customer's Name WHITEHOUSE
Address 19, CLAREVILLE ROAD
DARLINGTON
Post Code DL3 NG

Tel. home	01325 241 613
Tel. work	
mobile	
email	

CURTAINS	
PLEATED	X 12
ROLLERS	
ROMANS	
SHUTTERS	
VENETIAN	
VERTICALS	
VISION	
WOODEN	

SPECIAL INSTRUCTIONS				
CHASE				
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	face
					EX		PVC		/	

Room	Width	Drop	Slat Size	Colour	Control LH or RH	Fitting Height	Price
CON							
SIDES	725	1440	EX	TENSIONED PLEATED			
LTO	725	1440		BLINDS			
R	725	1440		WHITE RAILS			
	730	1440		2 RAIL SYSTEM			
	550	1340		TOP SWIVEL BKTS			
	640	1425		POPPETS FIXING AT			
	640	1425		BOTTOM OF BLIND			
	555	1340		FABRIC TO GO 3mm			
	617	1425		P15T H'RAILS ON			
	532	1340		EACH SIDE			
	570	1355					
	605	1440		LEORA LEMON			£1490
				(ARENA)			
							P.17

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 £

DEPOSIT £

BALANCE £

PRICE ACCEPTANCE Customer's Signature

.....

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

ALL BLINDS TO BE PAID FOR AT TIME OF FITTING

