



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 **PEARSON**
Address **56 MOUNTFIELD Gdns**
KENTON
Post Code **NE33DD**

Tel. home _____
Tel. work _____
mobile **0744 6978428**
email _____

DATE MEASURED/ORDERED
17/11/12

Measured By:
DAVE

SPECIAL INSTRUCTIONS

ALL GAST CHILD DEVICES EXPLAINED

G 349618

PICTURE NET
PRESS RADIO
MAG. VAN
RECC. SHIP
TV YELL P
OTHER

CURTAINS
PLEATED
ROLLERS
ROMANS
SHUTTERS
VENETIAN **10xWOOD**
VERTICALS
VISION
WOODEN

Fitted By _____ DATE _____ DAY _____ AM _____ PM _____

alum	anthracite	black	brown	champ-gold	chrome	silver	white	recess size	motorised	wood fix	stone fix	brackets top	brackets face
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Room	Width	Drop	Slat Size	Colour	Control LH or RH	Fitting Height	Price
LOBBY BAY (1)	740	1710	50	PURE WHITE	PLA 7L	2600	135.00
(2)	600	1710	50				112.00
(3)	590	1710	50				112.00 606
(4)	600	1710	50				112.00
(5)	730	1710	50				135.00
LOBBY (1)	740	1710	50				135.00
(2)	600	1710	50				112.00
(3)	590	1710	50				112.00 606
(4)	600	1710	50				112.00
(5)	740	1710	50				135.00
TOTAL							£212.00
DISC GIVEN							£122.00

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 50% deposit and the remaining balance on the day of fitting. If payment is not made in full at that time Baileys Blinds 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 **£1090.00**

DEPOSIT £

BALANCE £

PRICE ACCEPTANCE Customer's Signature

(Signature)

CASH CHEQUE CARD

ALL BLINDS TO BE PAID FOR AT TIME OF FITTING



Registered No.: 02814869

(Handwritten mark)