



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
13/12/21

Measured By:
DAVE

SPECIAL INSTRUCTIONS

CHILD DEVICES +
GAPS EXPANDED

- G 349744
- P/CUST
 - NET
 - PRESS
 - RADIO
 - MAG
 - VAN
 - RECC.
 - SHOP
 - TV
 - YELL P
 - OTHER

Customer's Name **SWORD**
Address **11 THIRLWELL COURT**
DUDLEY
Post Code **NE237DS**

- CURTAINS
- PLEATED
- ROLLERS **X4**
- ROMANS
- SHUTTERS
- VENETIAN **X1 x ESP**
- VERTICALS
- VISION
- WOODEN

Tel. home
Tel. work
mobile **07415 772390**
email

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	No. DIPS	Control LH or RH	Fitting Height	Price
KITCHEN	1295	1885	50	COOL WHITE		R	2450	184.00
REAR BED	1295	985	50	BLIND GREY		R	2000	100.00
FRONT BED	1290	985				L		100.00
FRONT BED	1300	980				R		100.00
FRONT BED	1295	980				L		100.00
TOTAL								584.00
DISC GIVEN IF ALL ORDERED								84.00

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 £500.00
DEPOSIT **250.00**
BALANCE £250.00

PRICE ACCEPTANCE Customer's Signature
[Signature]
CASH CHEQUE CARD

ALL BLINDS TO BE PAID FOR AT TIME OF FITTING
BBSAII

