



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 GALLAGHER

Address 44, MITCHELL AVENUE
NEWCASTLE

Post Code NE23LA

Tel. home	
Tel. work	
mobile	<u>07730 521 529</u>
email	

DATE
MEASURED/ORDERED
28/03/22

Measured By:
SHAUN HANLEY

CURTAINS		
PLEATED		
ROLLERS		
ROMANS		
SHUTTERS		
VENETIAN		
VERTICALS		
VISION		
WOODEN		

SPECIAL INSTRUCTIONS

CHASE

50% DEP
2-3 w3 det

TOP FIX TO WOOD
IN FRONT OF
TRIM

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

Fitted By	DATE	DAY	AM	PM

alum	anthracite	black	brown	champ-gold	chrome	silver	white	recess size	motorised	wood fix	stone fix	brackets top face

Room	Width	Drop	Slat Size	Colour	Control LH or RH	Fitting Height	Price
				<u>ROLLER BLINDS</u>			
<u>LIV</u>	<u>993</u>	<u>1600</u>	<u>21/2</u>	<u>MARLOW STONE</u>	<u>L</u>	<u>2400</u>	
<u>ROOM</u>	<u>1347</u>	<u>1600</u>	<u>1</u>	<u>SHAPE 1</u>	<u>R</u>	<u>1</u>	
<u>BAY</u>	<u>978</u>	<u>1600</u>	<u>1</u>		<u>R</u>		
				<u>BRONZED N/S/B</u>			
				<u>ROLL FROM FRONT</u>			
							<u>£383</u>
							<u>£443</u>

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 £

DEPOSIT £

BALANCE £

PRICE ACCEPTANCE Customer's Signature
Q.....

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

ALL BLINDS TO BE PAID FOR AT TIME OF FITTING

