



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 **CRENNELL**
Address **1 HOLMLANDS PARK**
CHESTER-LE-STREET
Post Code **DH3 3PJ**

Tel. home
Tel. work
mobile **07745955349**
email

DATE
MEASURED/ORDERED
25/10/22

Measured By:
DAVE

CURTAINS
FLEATED
ROLLERS
ROMANS
SHUTTERS **XB**
VENETIAN
VERTICALS
VISION
WOODEN

SPECIAL INSTRUCTIONS

G 353390

PICTURE
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	brackets face
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Room	Width	Drop	Slat Size	Colour	Control LH or RH	Fitting Height	Price
1	574	1600	64	NEW YORK	MILD	2	354.00
2	2373	1600	+	+	+	2	1462.00
3	570	1600	+	+	+	2	352.00
				CORNER TRIM 60x60x1600	X2		76.00
TOTAL							2244.00

10% EASY TILT SALE DISC. - 244.00

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 £2000.00
Pd 25/10/22
VISA DEPOSIT £1000.00
BALANCE £1000.00

PRICE ACCEPTANCE Customer's Signature
AUTM
025978 *Shirell*

CASH CHEQUE CARD

ALL BLINDS TO BE PAID FOR AT TIME OF FITTING



Shutter Survey Sheet

Customer Name: **CRENNELL** Filters Required: _____
 Order Number: _____ Estimated Fit Time: _____

Number of Shutters:	Survey Date:	Surveyor:	3	4	5
3	25-10-22	DAVE			
Survey Sheet:	1	2	3	4	5
Item Number	1	2	3		
Material:	NEW YORK	NEW YORK	NEW YORK		
Colour:	001 WHITE	001 WHITE	001 WHITE		
Room Name:	BAY (1)	BAY (2)	BAY (3)		
Width:	574	2373	570		
Drop:	1600	1600	1600		
Mounting Type:	Full	Full	Full		
Panel Quantity:	6	6	6		
Louvre Size:	64	64	64		
Tilt Rod Type:	CASY	CASY	CASY		
Mid Rail:	1160	1160	1160		
Louvre Spilt:	N/A	N/A	N/A		
Panel Configuration:	L	LLL.RRR	R		
Hinge Colour:	WHITE	WHITE	WHITE		
Frame Type:	DEEP PLUMB 160	DEEP PLUMB 160	DEEP PLUMB 160		
No Of Stiles:	4	4	4		
Stile Type:	BOTT 4 J	STL 4-16	BUTT 4-3		
Build Out:	N/A	N/A	N/A		
Extras:	N/A	N/A	N/A		
Further Instructions					
Further Instructions					

Panel Description (Single Panel / H. Fold)	85mm	76mm	85mm	114mm
New York	850/650	850/650	850/650	850/650
Los Angeles PVC	900/650	900/650	900/650	900/650
New York Max Contig.	LLLRRR			
Los Angeles PVC Max Contig.	LRRL			

Battens Required Y / N

Batten Sizes (W x D)	Length	Quantity
✓ 60x60	1600	2

Order Information:

Balance to Pay:

Deposit Paid:

Date:

Customer Signature:

Date:

Surveyor Signature: