



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 **STEWART**
Address **11 LEAGREEN COURT**
GOSFORTH.
Post Code **NE33UN**

Tel. home **0191-2847942.**
Tel. work
mobile
email

DATE
MEASURED/ORDERED
1/1/22

Measured By:
DAVE

CURTAINS	
PLEATED	
ROLLERS	X1
ROMANS	
SHUTTERS	
VENETIAN	X2
VERTICALS	X3
VISION	
WOODEN	

SPECIAL INSTRUCTIONS

CHILD DEVICES
are fully
EXPLAINED

PCUST	
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

Room	Width	Drop	Slat Size	Colour	Control LH or RH	Fitting Height	Price
1/2 LAND	820	885	25	7113 (B)	R	2000	107.00
FRONT BCA	1735	1320	3 1/2	POLARIS WHITE	LR	2100	173.00
BATHROOM	665	1100	POLARIS	CHARCOAL CHROME CURTAINS	L	2200	77.00
DINING	1755	1295	3 1/2	POLARIS CHARCOAL	LR	2200	173.00
LOUNGE	1740	1320	3 1/2	POLARIS WHITE	LR	9	173.00
KITCHEN	855	1165	25	7113 (B)	L	9	118.00
						TOTAL	821.00
						DISC GIVEN	121.00

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 **£700.00**
DEPOSIT £
BALANCE £

PRICE ACCEPTANCE Customer's Signature

(Signature)

CASH CHEQUE CARD

ALL BLINDS TO BE PAID FOR AT TIME OF FITTING

