



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 **FINLAY**
Address **4, SLEDMORE DRIVE**
SPENNYMOOR
Post Code **DL16 7GP**

Tel. home **01388 811481**
Tel. work
mobile
email

DATE MEASURED/ORDERED
19/12/22

Measured By:
STAN HANLEY

CURTAINS	
PLEATED	
ROLLERS	
ROMANS	
SHUTTERS	
VENETIAN	
VERTICALS	
VISION	
WOODEN	

SPECIAL INSTRUCTIONS

RWR

420

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
B' BED L	1138	971	89	PLANTATION SHUTTERS NEW YORK WOOD SUPER WHITE WHITE HINGES MIDDLE TILT	LR		385
--- R	1134	978	89	DEEP PLAIN L60 4 SIDES FULL HEIGHT	LR		385
							Less 10% P.M £700

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**
Pd 19/12/22
DEPOSIT £ **350**
Cash 9832
BALANCE £ **350**

PRICE ACCEPTANCE Customer's Signature

CASH	<input checked="" type="checkbox"/>	CHEQUE	<input type="checkbox"/>	CARD	<input type="checkbox"/>
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ALL BLINDS TO BE PAID FOR AT TIME OF FITTING



Shutter Survey Sheet

Number of Shutters: **2** Survey Date: **19/12/22** Customer Name: **FINLAY** Fitters Required: **1**
 Survey Sheets: **1** Surveyor: **SHAMUN H** Order Number: **354411** Estimated Fit Time:

Item Number	1	2	3	4	5
Material	NEW YORK WOOD				
Colour	SUPER WHITE				
Room Name	B BED L B' BED R				
Width	1138	1134			
Drop	971	978			
Mounting Type	FULL HEIGHT				
Panel Quantity	2				
Leuvre Size	89	89			
Tilt Rod Type	MIDDLE				
Other Req					
Square Scale					
Panel Configuration	LR LR				
Header Colour	WHITE				
Frame Type	DEEP PLAIN L60				
NG Off Sides	H H				
Slide Type	AST AST				
Blind On					
Notes					
Further instructions					
Further instructions					

Panel limitations (Single Panel / Bi Fold)	63mm	76mm	89mm	114mm
New York	850/650	950/650	850/650	850/650
Los Angeles PVC	900/650	900/650	900/650	900/650
New York Max Config	LLLLRRRR			
Los Angeles PVC Max Config	LLRR			

Battens Required **Y N**

Batten Size: (W X D)	Length	Quantity

Order Information:

Balance to Pay:

Date:

Date:

Customers Signature:

Surveyor Signature: