



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 CAVIN  
Address S. SIMONSDIE VIEW  
ROTBURY.  
Post Code NE657YQ

Tel. home  
Tel. work  
mobile 07444 159752.  
email

DATE MEASURED/ORDERED  
4/4/23

Measured By:  
DAVE

G353915

**SPECIAL INSTRUCTIONS**

could advise explained

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

CURTAINS	
PLEATED	
ROLLERS	
ROMANS	
SHUTTERS	
VENETIAN	<u>X</u>
VERTICALS	<u>X</u> HEADROLL
VISION	
WOODEN	

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
<u>DOOR</u>	<u>1930</u>	<u>2035</u>	<u>25</u>	<u>0952(A)</u>	<u>L</u>	<u>2035</u>	<u>260.00</u>
<u>LOUNGE</u>	<u>2935</u>	<u>1860</u>	<u>31/2</u>	<u>WHITE HEADROLL ONLY</u> <u>40x PEGS</u>	<u>L/S</u>	<u>2100</u>	<u>140.00</u>
						<u>TOTAL</u>	<u>400.00</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 £ 400.00  
DEPOSIT £ 200.00  
BALANCE £ 200.00

PO VISA 0404  
PRICE ACCEPTANCE Customer's Signature  
AUM  
259522 Cavin

CASH  CHEQUE  CARD

**ALL BLINDS TO BE PAID FOR AT TIME OF FITTING**





# VERTICAL BLINDS

## Order Form

Company/Shop: **BATHERS / Crookston**

Sales Rep: **DAVE**

Customer Name: **GAVIN**

Date: **4/4/23**

Order Reference: **353915**

Special Instructions

BLIND SIZE & SYSTEM										CONTROLS			OPTIONS					
Location	Width (mm)	Drop (mm)	Recess (✓)	Exact (✓)	Child Safety Installation Height (mm)	Slat Size	Fabric Range	Fabric Colour	Slats only (✓)	Control Side	Bunch		Wand Control	Headrail Colour	Fixing Brackets	Weight & Chained		
										RHS (✓)	LHS (✓)	RHS (✓)	LHS (✓)	SPLIT (✓)				
1	2935	1860	✓		2100	3 1/2	MENTOR ML	ONLY HOXLEYS		✓				✓	NO	WHITE	TOP	N/A
2																		
3																		
4																		
5																		
6																		
7																		
8																		

NOTE: UNLESS OTHERWISE STATED ALL MEASUREMENTS WILL BE TAKEN AS RECESS AND ALL OPTIONS WILL BE DEFAULT.

FITTING NOTES:

# VENETIAN BLINDS Order Form



Company / Shop: <b>BATES BLINDS</b>	Sales Rep: <b>DAVE</b>	Date: <b>4/4/23</b>	Special Instructions
	Customer Name: <b>GAVIN</b>	Order Reference: <b>303915</b>	

BLIND SIZE & SYSTEM							CONTROLS			OPTIONS							
Loc-ation	Width (mm)	Drop (mm)	Recess (✓)	Exact (✓)	Child Safety Installation Height (mm)	System Type / Slat Width	Slat Colour Code			Control Side			Fixing Brackets			Extras	
								RHS (✓)	LHS (✓)	REV (✓)	STD (✓)	TOP (✓)	FACE (✓)				
1	1930	2035	✓		2035	25	0952(A)		✓			✓					
2																	
3																	
4																	
5																	
6																	
7																	
8																	

NOTE: UNLESS OTHERWISE STATED ALL MEASUREMENTS WILL BE TAKEN AS RECESS AND ALL OPTIONS WILL BE DEFAULT.

FITTING NOTES: