



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 HILL
Address 204, SCARGILL DRIVE
SPENNYMOOR
Post Code DL16 6LT

Tel. home 01388 813047
Tel. work
mobile
email

DATE MEASURED/ORDERED
24/05/23

24/05/23

Measured By:

SHAWN HANLEY

CURTAINS		
PLEATED		
ROLLERS		
ROMANS		
SHUTTERS		
VENETIAN		
VERTICALS		
VISION		
WOODEN		

SPECIAL INSTRUCTIONS

RWR

1180

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	brackets face
								<u>1/R</u>					

Room	Width	Drop	Slat Size	Colour	Control LH or RH	Fitting Height	Price
<u>LAND</u>	<u>1173</u>	<u>1022</u>	<u>3 1/2</u>	<u>VERTICAL FLEUR CHIFON ICE</u>	<u>LR</u>	<u>2300</u>	<u>122</u>
<u>KIT</u>	<u>16</u>	<u>1008</u>	<u>3 1/2</u>	<u>VANES ONLY RHAPSODY WHITE</u>	<u>---</u>	<u>---</u>	<u>71</u>
	<u>VANES</u>						
				<u>WELDED WTS</u>			
							<u>193</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	£ <u>193</u>
DEPOSIT	£ <u>97</u>
BALANCE	£ <u>96</u>

24/05/23
CHQ 0896

PRICE ACCEPTANCE Customer's Signature

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



VERTICAL BLINDS

Order Form

Company / Shop: **BAILLEYS - S' MOOR** Sales Rep: **SHAUN H HILL** Date: **24-05-23** Special Instructions:

Customer Name: **HILL** Quality Reference: **354882**

Line	Qty	Part No	Part Name	Color	CORNER		HEAD		TAIL		Special Instructions
					Top	Bottom	Left	Right	Left	Right	
1	1	1173 1022 1/2	Fleur	CHIFFON ICE	L	R	No	White Top	No	No	
2	1	16 1008 1/2	Rhapsody	WHITE							

NOTE: OUR PRICES VARY BY QUANTITY AND ALL PRICES ARE EXCLUSIVE OF VAT AND DELIVERY CHARGES. ALL QUANTITIES MUST BE ORDERED IN MULTIPLES OF 10 UNLESS OTHERWISE SPECIFIED.

FITTING NOTES: