



FAUXWOOD VENETIAN BLINDS

Order Form

Company / Shop: *BILLETS - SIMON*

Sales Rep: *SHAWN H*
 Customer Name: *GRAY*

Date: *16-06-23*
 Order Reference: *354949*

Special Instructions

BLIND SIZE & SYSTEM							OPTIONS				
Loc- ation	Width (mm)	Drop (mm)	Recess (\checkmark)	Exact (\checkmark)	Child Safety Installation Height (mm)	Slat Width	Slat Range & Colour	Tapes	Tassel	Valance	Fixing Brackets
1	BED	1748	1016	1/2	2400	50	TRUE	NONE	STD	YES	STD
2											
3											
4											
5											
6											
7											
8											

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

FITTING NOTES: