



THE 17th OLT Baileys

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 **LIDSTER**

Address **26, RIPON DRIVE
DARLINGTON**

Post Code **DL1 4JX**

Tel. home	
Tel. work	
mobile	07894 302972
email	

DATE
MEASURED/ORDERED
05/10/23

Measured By:

**SHAUN
HANLEY**

CURTAINS		
PLEATED		
ROLLERS		
ROMANS		
SHUTTERS		
VENETIAN		
VERTICALS		
VISION		
WOODEN		

SPECIAL INSTRUCTIONS

RWA

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
							/	1/R			/	/	

Room	Width	Drop	Slat Size	Colour	Control LH or RH	Fitting Height	Price
				VERTICALS			
KIT L	1200	1024	3/2	PERRIE MILK	LS	2400	
-- R	1775	984	3/2	WELDED WTS	LS	2400	
DIN	1188	1014	3/2		RS	2300	
REAR LIV	1180	1465	3/2		RS	2700	
							£478 P.M.

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

£ 478

PRICE ACCEPTANCE Customer's Signature

L. Lidster

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

P10511023
VISA 19621854
DEPOSIT

£ 239

BALANCE

£ 239

CASH	CHEQUE	CARD
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Registered No.: 02814869

VERTICAL BLINDS

Order Form

Company / Shop: **BAILLEYS - S' MOOR**

Sales Rep: **S HAUNH**

Customer Name: **LIDSTER**

Date: **05-10-23**

Order Reference: **356275**

Special Instructions

Loc-ation	BLIND SIZE & SYSTEM										CONTROLS				OPTIONS			
	Width (mm)	Drop (mm)	Recess (✓)	Exact (✓)	Child Safety Installation Height (mm)	Slat Size	Fabric Range	Fabric Colour	Slats only (✓)	Control Side		Wand Control	Headrail Colour	Fixing Brackets	Weight & Chained			
										RHS (✓)	LHS (✓)					RHS (✓)	LHS (✓)	SPLIT (✓)
1	KIT L	1200	1024	1/2		89	PERALIE	MILK			L	No	WHITE	TOP	No			
2	KIT R	1775	984		"					L								
3	DIN	1188	1014		2300						R							
4	REAR LIV	1180	1465		2700						R							
5																		
6																		
7																		
8																		

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

FITTING NOTES: