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tue 28th nov



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 SKINNER
Address 69 MILLVIEW DRIVE
TYNEMOUTH
Post Code NE302QH

Tel. home 0191-2586153
Tel. work
mobile
email

DATE
MEASURED/ORDERED
7/11/23

Measured By:
DAVE

G355247

SPECIAL INSTRUCTIONS

CHILD DANCE
SEPARATE

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

CURTAINS	
PLEATED	
ROLLERS	
ROMANS	
SHUTTERS	
VENETIAN	
VERTICALS	X
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
								<u>IR</u>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	

Room	Width	Drop	Slat Size	Colour	TOP	Control LH or RH	Fitting Height	Price
<u>Bedroom</u>	<u>3620</u>	<u>2010</u>	<u>312</u>	<u>Pearl & Snow</u>	<u>IR</u>	<u>L/L</u>	<u>2250</u>	<u>425.00</u>
		<u>1 x 32mm</u>		<u>ROLLER CONT END</u>	<u>Drop</u>	<u>IR</u>	<u>1445</u>	<u>20.00</u>
							<u>AT H 2200</u>	
								<u>TOTAL £445.00</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.

Pd 10/11/23
VISA

TOTAL PRICE £445.00

DEPOSIT £445.00

BALANCE £ Paid in full

PRICE ACCEPTANCE Customer's Signature

Rainbow Go Ahead

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



ROLLER BLINDS Order Form

Date: **13-11-23**
 Order Reference: **355247**
 Special Instructions:

Sales Rep: **DAVE**
 Customer Name: **SKINNER**

Company / Shop: **BATES COSFORTH**

BLIND SIZE & SYSTEM										CONTROLS					OPTIONS				
Location	Width (mm)	Drop (mm)	Recess (✓)	Exact (✓)	Child Safety Installation Height (mm)	System 3240/32/ Benchfit	Fabric Range	Fabric Colour	Operation		Cassette Type & Colour	Control Type & Colour	Roll	Finish	Bottom Bar	Bottom Bar End Caps			
									RHS (✓)	LHS (✓)									
1		1445	✓		2200	32	ROLLER CONTROL	END	✓			WHITE							
2																			
3																			
4																			
5																			
6																			
7																			
8																			

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

FITTING NOTES:

