



04 HIGH STREET,  
SPENNYMOOR,  
DURHAM DL16 6DB  
TEL: 01338 813267 or 0191 258 5956  
sales@baileys-blinds.co.uk  
www.baileys-blinds.co.uk

Customer's Name SENIOR  
Address 19 SWINDEN COURT  
TRINITY ROAD,  
DARLINGTON Post Code DL3 7BF

Tel. home	
Tel. work	
mobile	<u>07713 835 570</u>
email	

tuw 19th Dec

DATE MEASURED/ORDERED
<u>30 / 11 / 23</u>

Measured By:
<u>SHAUN HANLEY</u>

S356492

**SPECIAL INSTRUCTIONS**

RWR  
FIT B/F XMAS

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

CURTAINS	
PLEATED	
ROLLERS	
ROMANS	
SHUTTERS	
VENETIAN	
VERTICALS	
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	face

Room	Width	Drop	Slat Size	Colour	Control LH or RH	Fitting Height	Price
<u>PATIO L</u>	<u>480</u>	<u>1858</u>		<u>P'FIT PLT</u>			<u>260</u>
<u>~ R</u>	<u>480</u>	<u>1858</u>		<u>WHITE FRAME</u>			<u>260</u>
				<u>18mm BKT</u>			<u>520</u>
				<u>STRAFORD</u>			<u>LIVE DISC</u>
				<u>CREAM</u>			<u>400</u>
							<u>P. MATCH</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 out 12/23  
visa 038611

TOTAL PRICE	£ <u>400</u>
DEPOSIT	£ <u>200</u>
BALANCE	£ <u>200</u>

PRICE ACCEPTANCE Customer's Signature

Senior

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

CASH	CHEQUE	CARD
------	--------	------



# PERFECT FIT PLEATED BLINDS

## Order Form

Company / Shop: <b>BAILLIES - S' MOOR</b>	Sales Rep: <b>SHAUN H</b>	Date: <b>04-12-23</b>	Special Instructions
Customer Name: <b>SENIOR</b>	Order Reference: <b>35649Z</b>		

	BLIND SIZE & SYSTEM						CONTROLS				OPTIONS						
	Loc-ation	Width (mm)	Drop (mm)	Frame Colour	Bracket size	System Type	Fabric Range & Colour		Type		Pole Required	Shaped Blind	Cut Outs	Backing Foam	Handle Spacer 2mm / 6mm	Rebates	
							Tension	Cord									
1	Partic L	480	1858	WHITE	15	STRATFORD	CREAM	/	/	/	/	/	/	/	/	/	
2	---	480	1858	"	18	---	---	/	/	/	/	/	/	/	/	/	
3																	
4																	
5																	
6																	
7																	
8																	

**NOTE:** UNLESS OTHERWISE STATED ALL OPTIONS WILL BE DEFAULT. ONLY GLASS MEASUREMENTS REQUIRED. FOR SHAPED BLINDS SUPPLY DIAGRAMS WITH ANGLES.

**FITTING NOTES:**