

DAY & NIGHT BLINDS

Order Form

Company / Shop: **BAWEL SYSTEMS**

Sales Rep: **DAVE**
Customer Name: **JONES**

Date: **9-1-24**
Order Reference: **355400**

Special Instructions

	BLIND SIZE & SYSTEM							CONTROLS					OPTIONS					
	Loc-ation	Width (mm)	Drop (mm)	Recess (v)	Cass-ette Exact (v)	Fabric (v)	Child Safety Installation Height (mm)	System Vision / Senses Mirage	Fabric Range / Colour	Operation	IHS (v)	LHS (v)	Control Type & Colour	Cassette Type & Colour	Headbox Option	End Caps Colours	Bottom Bar Colour	Roll
1		854	1133		✓		2300	VISION	CATEL JASMINE	✓			WHITE	CLOSED WHITE	CLOTH COVERED	N/A	WHITE	
2																		
3																		
4																		
5																		
6																		
7																		
8																		

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

FITTING NOTES: