

**\* Revised Sizes. \***  
**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 **MITIE**  
 Address **PETERLEE JOB CENTRE**  
**HATFIELD HOUSE**  
**PETERLEE** Post Code **SR8 1PB**

Tel. home **FRED WILLIAMS.**  
 Tel. work **07483 163518**  
 mobile  
 email

DATE  
 MEASURED/ORDERED  
**22/01/24**

Measured By:  
**DAVE**

|           |           |
|-----------|-----------|
| CURTAINS  |           |
| PLEATED   |           |
| ROLLERS   |           |
| ROMANS    |           |
| SHUTTERS  |           |
| VENETIAN  | <b>X1</b> |
| VERTICALS |           |
| VISION    |           |
| WOODEN    |           |

**SPECIAL INSTRUCTIONS**

**NFR 198784**  
**SECOND floor window**  
**BLIND ON LHS SIDE**  
**AS ENTERING**  
**ROOM**

**Quote Emailed**

|        |  |
|--------|--|
| PCUST  |  |
| NET    |  |
| PRESS  |  |
| RADIO  |  |
| MAG.   |  |
| VAN    |  |
| RECC.  |  |
| SHOP   |  |
| TV     |  |
| VELL 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                        | brackets face |
|      |            |       |       |            |        |        |       | <b>ITA</b>  |           |          | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |               |

| Room                        | Width       | Drop        | Slat Size | Colour         | Control LH or RH | Fitting Height | Price          |
|-----------------------------|-------------|-------------|-----------|----------------|------------------|----------------|----------------|
| <b>FRONT OFFICE</b>         | <b>1690</b> | <b>1625</b> | <b>50</b> | <b>0204(A)</b> | <b>L</b>         | <b>2400</b>    | <b>117.25</b>  |
| <b>FRONT OFFICE</b>         | <b>1700</b> | <b>1625</b> | <b>50</b> | <b>0204(A)</b> | <b>R</b>         | <b>2400</b>    | <b>117.25</b>  |
| <b>1/2 Hour for fitting</b> |             |             |           |                |                  |                |                |
| <b>FITTING</b>              |             |             |           |                |                  |                | <b>30.00</b>   |
|                             |             |             |           |                |                  |                | <b>264.50</b>  |
|                             |             |             |           |                |                  |                | <b>EXC VAT</b> |

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 **£317.40** - INC VAT

DEPOSIT **£**

BALANCE **£**

PRICE ACCEPTANCE Customer's Signature

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

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

