



Tue 13th Feb
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 **LIGHTLY**

Address **11, WOOLINGTON DRIVE**

MIDDLETON ST. GEORGE

Post Code **DL2 1UL**

Tel. home	
Tel. work	
mobile	07960 638 827
email	

ON 101231

DATE MEASURED/ORDERED
31 / 01 / 24

Measured By:
S HAUN HANLEY

S356645

SPECIAL INSTRUCTIONS

RWR

PI/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	brackets face
								EX			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	

Room	Width	Drop	Slat Size	Colour	Control LH or RH	Fitting Height	Price
CLOAK	400	966	EXT	ROMAN BLINDS IMPASTO WHISPER	R	2250	£ 234
ENSUITE	533	930	EXT	 	R	2300	£ 234
BATH	825	966	EXT	 	R	2300	£ 263
				ALL STD LINING CHROME S'WINDERS			£ 731
							LESS DISC
							£ 580

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	£ 580
DEPOSIT	£ 290
BALANCE	£ 290

Pd 31/01/24
VISA 036544

PRICE ACCEPTANCE Customer's Signature

William Goherty

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

CASH	CHEQUE	CARD
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Registered No.: 02814869

ROMAN BLINDS

Order Form

Company / Shop: BAILEYS - SMIDOR	Sales Rep: SHAWN H	Date: 31-01-24	Special Instructions
	Customer Name: LICHTLY	Order Reference: 356648	

	BLIND SIZE & SYSTEM						CONTROLS				OPTIONS					
	Loc-ation	Width (mm)	Drop (mm)	Recess (✓)	Exact (✓)	Child Safety Installation Height (mm)	System Standard Cleat/ Deluxe	Fabric Range	Fabric Colour	Operation		Chain Colour	Lining	Pattern Match Bay Position L/C/R	Fixing	
										RHS (✓)	LHS (✓)				TOP (✓)	FACE (✓)
1	CL-01K	400	966	EX		2250		IMPASTO	WHISPER	R		CHARONIE	STD		✓	
2	EN-SUITE	533	930			2300				R					✓	
3	BATH	825	966			v				R					✓	
4																
5																
6																
7																
8																

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

FITTING NOTES: