



34 HIGH STREET
SPENNYMOOR
DURHAM DL16 6DB
TEL: 01388 813267 or 0191 258 8888
sales@baileys-blinds.co.uk
www.baileys-blinds.co.uk

Customer's Name: **CARANTHERS**
Address: **10 CLARA AVENUE**
SHIREMOOR
NE27 0HN

Tel home: _____
Tel work: _____
Mobile: **07305 302469**
Email: _____

DATE MEASURED/ORDERED
11/3/124

Measured By:
DAVE

SPECIAL INSTRUCTIONS

EMAIL

Louis / Fleur / NYLA

355615

PICTURE	
NET	
PRESS	
SHADO	
WALL	
WALL	
WHEEL	
SHOP	
TV	
VELL P	
OTHER	

CURTAINS	
PLEATED	
ROLLER	
ROMAWE	
SHUTTERS	
VENETIAN	
VERTICALS	XL
WORM	
WOODEN	

Fitted By: _____ DATE: _____ DAY: _____ AM/PM: _____

alum	antirack	black	brown	champ-gold	chrome	sliver	white	recess size	recessed	wood fix	stone fix	brackets top	brackets face
								FIX			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	

Room	Width	Drop	Blind Size	Colour	Top	Control LH or RH	Fitting height	Price
front	2045	1240	3 1/2	White	R	R/S	2100	255.00
living	2050	1250	4	White	R	R/S	2100	255.00
kitchen	540	810	4	White	R	R/L	2000	109.00
bedroom	1725	940	4	White	R	R/L	2300	194.00

TOTAL **£699.00**
IF ALL ORDERED ISLANDS **£ 123.00**

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 GOING 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 **£690.00**

DEPOSIT £ _____

BALANCE £ _____

PRICE ACCEPTANCE Customer's Signature

Q

CASH CHEQUE CARD

ALL BLINDS TO BE PAID FOR AT TIME OF FITTING

