



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 HUBERT  
Address 12, DENE BRIDGE ROW  
CHILTON  
Post Code DL17 0HN

Tel. home	
Tel. work	
mobile	<u>07454 970 808</u>
email	

DATE MEASURED/ORDERED  
18/07/24

Measured By:  
SHAUN HANLEY

CURTAINS	
PLEATED	
ROLLERS	
ROMANS	
SHUTTERS	
VENETIAN	
VERTICALS	
VISION	
WOODEN	

SPECIAL INSTRUCTIONS

RWR  
  
F/FIX TO WOOD  
BATON

P/CUST	
NET	
PRESS	
RADIO	
MAG.	
VAN	
RECC.	
SHOP	
TV	
YELL 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
								<u>o/r</u>		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>

Room	Width	Drop	Slat Size	Colour	Control LH or RH	Fitting Height	Price
<u>B' BED</u>	<u>1925</u>	<u>1380</u>	<u>o/rw</u>	<u>ROLLER</u> <u>BELLA DOVE</u> <u>SHAPE 1 STRAIGHT</u>	<u>L</u>	<u>2300</u>	<u>£ 219</u>
				<u>END COVERS FOR BKTS</u>		<u>10% DISC</u>	<u>£ 197</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.

TOTAL PRICE £ 197  
Pd 18/07/24  
VISA R10043  
DEPOSIT £ 99  
BALANCE £ 98

PRICE ACCEPTANCE Customer's Signature

Shaun Hanley  
CASH  CHEQUE  CARD

ALL BLINDS TO BE PAID FOR AT TIME OF FITTING



# ROLLER BLINDS

## Order Form

Company / Shop:  
**BAILEYS - S' MOOR**

Sales Rep: **SHAUN H**  
 Customer Name: **HUBERY**

Date: **18.07.24**  
 Order Reference: **357221**

Special Instructions  
**1x PAIR END COVERS FOR BKTS.**

### BLIND SIZE & SYSTEM

	Loc-ation	Width (mm)	Drop (mm)	Recess (✓)	Exact (✓)	Child Safety Installation Height (mm)	System 32/40/45/ Bendthia	Fabric Range	Fabric Colour	CONTROLS		OPTIONS								
										RHS (✓)	LHS (✓)	Operation	Cassette Type & Colour	Control Type & Colour	Roll	Finish	Bottom Bar	Bottom Bar End Caps		
1	BK-H																			
2	BED	1925	1380	1/R		2300	32	BELLA	DOVE	L		NO	WHITE	STD	SHAPE 1					
3															STRAIGHT					
4															FABRIC					
5															WRAP					
6																				
7																				
8																				

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

**FITTING NOTES:**