



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 **STEWART.**

Address **41-CHAPEL HOUSE DRIVE
CHAPEL HOUSE**

Post Code **NE5 1AA**

Tel. home	0191-2410775
Tel. work	
mobile	07305 358871
email	

DATE MEASURED/ORDERED
15/10/24

Measured By:

DAVE

CURTAINS	
PLEATED	
ROLLERS	
ROMANS	
SHUTTERS	
VENETIAN	
VERTICALS	
VISION	
WOODEN	

WILL SPEAK TO
HUSBAND

358351

SPECIAL INSTRUCTIONS

Bed Bay
650 | 2600 | 650

Lounge Bay
720 | 2310 | 720
350 | 350

PICT	
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
												✓	✓

Room	Width	Drop	Slat Size	Colour	Control LH or RH	Fitting Height	Price
Bed Bay	3900	1460	1080	RUBEN ROUGE STRAND LINED 1080 METAL TRACK	PENCIL POINTS TOP FIX		935.00 238.00
Lounge Bay	4450	1540	1080	RUBEN ROUGE STRAND LINED 1080 METAL TRACK	PENCIL POINTS TOP FIX (PICK ENDS)		935.00 358.00
Total £2466.00							
20% DISC -							494.00

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 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 £ **1972.00**

DEPOSIT £

BALANCE £

PRICE ACCEPTANCE Customer's Signature

(Signature)

ALL BLINDS TO BE PAID FOR AT TIME OF FITTING

CASH	CHEQUE	CARD
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