



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 **KICKLETON**
Address **22 CANTON GROVE**
CHAPEL HOUSE
Post Code **NE51HL**

Tel. home **0191-2677664**
Tel. work
mobile
email

DATE MEASURED/ORDERED
12/11/24

Measured By:
DAVE

CURTAINS	
PLEATED	
ROLLERS	
ROMANS	
SHUTTERS	
VENETIAN	X6
VERTICALS	
VISION	
WOODEN	

SPECIAL INSTRUCTIONS

TOP PX AWAY FROM HANDLES
REMOVE OLD VENETS
CURT TO DISPOSE

ON103541

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
								FR			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	

Room	Width	Drop	Slat Size	Colour	Control LH or RH	Fitting Height	Price
LIVING BAY ①	580	1615	50	0204(A)	TOP PX	2400	115.00
②	1600	1615					292.00
③	580	1615					115.00
MONITOR	1680	1145					192.00
KITCH ①	1770	1210				2500	192.00
②	890	1180					129.00
TOTAL							935.00
20% DISC							187.00

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 **£748.00**
DEPOSIT **£748.00**
BALANCE **PAID IN FULL**

AD VISA 1211
PRICE ACCEPTANCE Customer's Signature
ADTM
016307

CASH	CHEQUE	CARD	<input checked="" type="checkbox"/>
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ALL BLINDS TO BE PAID FOR AT TIME OF FITTING



VENETIAN BLINDS Order Form



Company / Shop: Blinds / Gosforth
 Sales Rep: DAVE
 Date: 12/11/24
 Special Instructions:
 Customer Name: RICKLTON
 Order Reference: 358469

BLIND SIZE & SYSTEM										CONTROLS				OPTIONS		
Loc-ation	Width (mm)	Drop (mm)	Recess (✓)	Exact (✓)	Child Safety Installation Height (mm)	System Type / Slat Width	Slat Colour Code	RHS (✓)	LHS (✓)	REV (✓)	STD (✓)	TOP (✓)	FACE (✓)	Extras		
1 1 <u>1</u>	580	1615	✓		2400	50	0204(A)				✓	✓				
2 2 <u>2</u>	1600	1615	✓		+	+	+				✓	✓				
3 3 <u>3</u>	580	1615	✓		+	+	+				✓	✓				
4 4 <u>4</u>	1680	1145	✓		+	+	+				✓	✓				
5 5 <u>5</u>	1770	1210	✓		2500	+	+				✓	✓				
6 6 <u>6</u>	890	1180	✓		+	+	+		✓			✓				
7																
8																

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

FITTING NOTES: