

# 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 HOLMES  
Address 33, ETHERLEY LANE  
BISHOP AUCKLAND  
Post Code DU14 7QZ

Tel. home	
Tel. work	
mobile	07763 472 127
email	

DATE MEASURED/ORDERED
21 / 11 / 24

Measured By:
SHAUN HANLEY

CURTAINS		
PLEATED		
ROLLERS		
ROMANS		
SHUTTERS		
VENETIAN		
VERTICALS		
VISION		
WOODEN		

<b>SPECIAL INSTRUCTIONS</b>	
1122	

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
										✓			

Room	Width	Drop	Slat Size	Colour	Control LH or RH	Fitting Height	Price
				SHUTTER			
KIT	1118	2049	89	BALMORAL WOOD		LLRR	801
				LINEN WHITE			
				TIER ON TIER		LESS DISC	640
				HIDDEN TILT		HIDDEN	
				DEEP PLAIN L60mm		TILT	64
				4 SIDE FRAME			
				ANTIQUE BRASS HINGES			
				2x TRIMS 30x5x 2049			20
				1x -- 25x5x 1118			10
				1060 TIER ON TIER TO			
				TOP OF BOTTOM DOOR			£ 734

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	£	
DEPOSIT	£	
BALANCE	£	

PRICE ACCEPTANCE Customer's Signature

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CASH	CHEQUE	CARD
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**ALL BLINDS TO  
BE PAID FOR  
AT TIME OF  
FITTING**

