



34 HIGH STREET,
SPENNYMOOR,
DURHAM DL16 6DB
TEL: 01388 813267 or 0191 258 5956
sales@baileys-blinds.co.uk
www.baileys-blinds.co.uk

G358604

DATE MEASURED/ORDERED
7/1/12

Measured By:
DAVE

SPECIAL INSTRUCTIONS
ON 103901

PI/CUST	
NET	
PRESS	
RADIO	
MAG.	
VAN	
RECC.	
SHOP	
TV	
YELL P	
OTHER	

Customer's Name LAIDLER
Address 11 LAUREL AVENUE
SEAHAM
Post Code SR78NR

Tel. home 0191-5810289
Tel. work
mobile
email

CURTAINS	
PLEATED	
ROLLERS	
ROMANS	
SHUTTERS	
VENETIAN	X2
VERTICALS	
VISION	
WOODEN	

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

Room	Width	Drop	Slat Size	Colour	Control LH or RH	Fitting Height	Price
Lounge	1520	1615	25	0204(A)	TOP FIX FR R	2300	244.00
Bedroom	1525	1620	25		L		244.00
Total							488.00
20% DISC -							98.00

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.

pd 07/01/12
TOTAL PRICE £390.00
DEPOSIT £390.00
BALANCE £PAID IN FULL

PRICE ACCEPTANCE Customer's Signature
AOTU
694798

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: **BRILEY'S POS PARTN**

Sales Rep: **DAVE**
Customer Name: **LADLER**

Date: **7/1/25**
Order Reference: **358604**

Special Instructions

	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	Control Side			Fixing Brackets			Extras	
									RHS (✓)	LHS (✓)	REV (✓)	STD (✓)	TOP (✓)	FACE (✓)		
1	REAR	1520	1615	✓		2300	25	0204 A	✓				✓			
2	FRONT	1525	1620	✓					✓					✓		
3																
4																
5																
6																
7																
8																

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

NOTE:

FITTING NOTES: