





# DAY & NIGHT BLINDS

## Order Form

Special Instructions  
**TOP FIX BKTS**

Date: **27-01-25**  
 Order Reference: **357872**

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

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

1	BLIND SIZE & SYSTEM										OPTIONS							
	Loc-ation	Width (mm)	Drop (mm)	Recess (✓)	Cass-ette Exact (✓)	Fabric (✓)	Child Safety Installation Height (mm)	System Vision / Senses Mirage	Fabric Range / Colour		CONTROLS		Control Type & Colour	Cassette Type & Colour	Headbox Option	End Caps Colours	Bottom Bar Colour	Roll
									RHS (✓)	LHS (✓)	Operation							
1	PATIO	1742	2048	1/2			2200	VISION	CAPRI CONCRETE	R	SILVER	TOMM WHITE	FABRIC INSERT	WHITE	SILVER	STD		
2																		
3																		
4																		
5																		
6																		
7																		
8																		

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

FITTING NOTES:

