

ROLLER BLINDS Order Form

Company / Shop: **BAILEYS - S' MOOR**
 Blind Type: **SHAWN H**
 Customer Name: **WE L DOD**
 Date: **21.02.25**
 Order Reference: **359122**
 Special Instructions:

BLIND SIZE & SYSTEM										CONTROLS				OPTIONS			
Loc. of Use	Width (mm)	Drop (mm)	Process (✓)	Exact (✓)	Child Safety Brackets Height (mm)	System (P/N/A) Details	Fabric Range	Fabric Colour	Operation		Cassette Type & Colour	Control Type & Colour	Roll	Finish	Bottom Bar	Bottom Bar End Caps	
									HS (✓)	LHS (✓)							
1	BATH	1140	860	1/R	2300	32	EUTA	LINEN	R		NO	WHITE	STD	SHAPE 1			
2														STRAIGHT			
3														FABRIC			
4														WRAP			
5																	
6																	
7																	
8																	

UNLESS OTHERWISE STATED ALL DIMENSIONS WILL BE TAKEN AS SHOWN AND ALL OPTIONS WILL BE DEFAULT.
 FITTING NOTES: