



# DAY & NIGHT BLINDS

## Order Form

Company/Shop: **Bmlets / Bostorm**

Sales Rep: **DAVE**  
Customer Name: **DENTIN**

Date: **23/6/25**

Order Reference: **360745**

Special Instructions:

Loc-ation	BLIND SIZE & SYSTEM										CONTROLS					OPTIONS				
	Width (mm)	Drop (mm)	Recess (v)	Cas-ette Exact (v)	Fabric (v)	Child Safety Installation Height (mm)	System Vision / Services Mfrage	Fabric Range / Colour		Operation		Control Type & Colour	Cassette Type & Colour	Headbox Option	End Caps Colours	Bottom Bar Colour	Roll			
								RHS (v)	LHS (v)											
1	1130	1120		✓		2350	VISION	SETOSA	WHITE	✓		CHARM	WHITE	CLOTH COVERED	WHITE					
2	1145	1125		✓						✓		CONTINUOUS	VISION OPEN							
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: