

VERTICAL BLINDS

Order Form

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

Sales Rep: **SHAUN H**

Customer Name: **D'ITON PRIMARY H.C**

Date: **20-10-25**

Order Reference: **359759**

Special Instructions

MAKE ASAP IF POSSIBLE PLEASE !!

BLIND SIZE & SYSTEM										CONTROLS			OPTIONS					
Loc ation	Width (mm)	Drop (mm)	Recess (mm)	Exact (✓)	Child Safety Installation Height (mm)	Slat Size	Fabric Range	Fabric Colour	Slats only (✓)	Control Side		Bunch		Wand Control	Headrail Colour	Fixing Brackets	Weight & Chained	
										RHS (✓)	LHS (✓)	RHS (✓)	LHS (✓)	SPLIT (✓)				
1	Room G04	3610	1730	1/2	2900	89	UNICOLOUR	CREAM		R				S	NO	WHITE	TOP	NO
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: