

# Goldcrest

Unit 10 Springkerse Trade Park,  
 Craigleith Road, Stirling FK7 7GN  
 t: 01786 447647  
 info@goldcrestfurnishings.co.uk  
 www.goldcrest-blinds.co.uk

DATE MEASURED/ORDERED

20/2/24

Measured By:

DAVID

**SPECIAL INSTRUCTIONS**

7282

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

Customer's Name McMORLAND  
 Address 20 POTTIS ROAD  
STIRLING  
 Post Code FK77XB

CURTAINS	
PLEATED	
ROLLERS	
ROMANS	
SHUTTERS	
VENETIAN	
VERTICALS	
VISION	
WOODEN	

Tel. home	
Tel. work	
mobile	
email	

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

Room	Width	Drop	Slat Size	Colour	Control LH or RH	Fitting Height	Price
KITCHEN	1120	960	Roller			2300	
DOORS	1755	2100	89		L/R	2100	
OFFICE	1152	990	Roller	B/G		2200	
MAIN ROOM	1715	990	"	B/G		"	
BACK ROOM	1725	1000	"	B/G		"	
OFFICE	1165	990	89		L/R	2200	
MAIN ROOM	1730	995	89		L/R	2200	
BACK ROOM	1745	1000	89		L/R	2200	

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 remaining balance on date of fitting. If payment is not made in full at that time Goldcrest 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.

TOTAL PRICE £

DEPOSIT £

BALANCE £

PRICE ACCEPTANCE Customer's Signature

.....

**ALL BLINDS TO BE PAID FOR AT TIME OF FITTING**

CASH	<input type="checkbox"/>	CHEQUE	<input type="checkbox"/>	CARD	<input type="checkbox"/>
------	--------------------------	--------	--------------------------	------	--------------------------

