

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
 25/6/12

Measured By:
 DAVID

SPECIAL INSTRUCTIONS
 316

7667

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

Customer's Name Hogan
 Address 3 Bruce Place
C. Nansay Mouth
 Post Code FK390J

Tel. home	
Tel. work	
mobile	
email	

CURTAINS	
PLEATED	
ROLLERS	
ROMANS	
SHUTTERS	
VENETIAN	
VERTICALS	
VISION	
WOODEN	

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
Hall	660	1190	35	0150	STD	2200	114
Bedroom	2081 3081	1505	450	0150	STD	2400	266 316
							430
						-20%	344
FOR LATER DATE ROUGH QUOTE							
SHAPED WOOD BLIND	2053	1832	89	Price Band (A)	R/R		266
"	2059	1819	89	"	L/L		266
							532

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	£ 344
DEPOSIT	£ 172
BALANCE	£ 172

PRICE ACCEPTANCE Customer's Signature

[Signature]

CASH	CHEQUE	CARD	<input checked="" type="checkbox"/>
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ALL BLINDS TO BE PAID FOR AT TIME OF FITTING



VENETIAN BLINDS

Order Form



Company / Shop: CC	Sales Rep: DAVID	Date: 25-6-24	Special Instructions
	Customer Name: HOCAP	Order Reference: 7667	

	BLIND SIZE & SYSTEM							CONTROLS				OPTIONS			
	Loc-ation	Width (mm)	Drop (mm)	Recess (✓)	Exact (✓)	Child Safety Installation Height (mm)	System Type / Slat Width	Slat Colour Code	Control Side			Fixing Brackets		Extras	
									RHS (✓)	LHS (✓)	REV (✓)	STD (✓)	TOP (✓)		FACE (✓)
1	HALL	660	1190	✓		2200	35	0150				✓	✓		
2	Bed	3081	1505	✓		2400	50	0150				✓	✓		
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: