

# 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

04 / 02 / 25

Measured By:

RONNIE

SPECIAL INSTRUCTIONS

7469

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

Customer's Name KEMP  
 Address S WESTWOOD CRESCENT  
STIRLING  
 Post Code EKA 5ET

Tel. home	
Tel. work	
mobile	07555 356399
email	

CURTAINS		
PLEATED		
ROLLERS	<input checked="" type="checkbox"/>	
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"/>		

Room	Width	Drop	Slat Size	Colour	Control LH or RH	Fitting Height	Price
LIV LFT	575	1550		POLARIS BLO NAVY	LH	2100	91
x MKO	1800	"			RH	"	196
v RHT	582	"			RH	"	91
KIT	895	1025			RH	2300	109
FEDD	1127	1165			RH	2100	133
DAFT	682	1025			RH	2100	93
							713 / 1335
R DED	1565	2050		POLARIS BLO NAVY		2080	213 / 160

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	£ 695.00
DEPOSIT	£ 695.00
BALANCE	£ NIL

PD 0402 VISA  
 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**

