

# Goldcrest

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

Customer's Name LORRAINE HUNTER  
 Address 1 MAIN STREET  
ST. NINNIANS  
 Post Code FK7 9AW

Tel. home	
Tel. work	
mobile	<u>07814-404386</u>
email	

DATE MEASURED/ORDERED
<u>18 / 2 / 24</u>

Measured By:
<u>RONNIE</u>

CURTAINS		
PLEATED		
ROLLERS		
ROMANS		
SHUTTERS		
VENETIAN		
VERTICALS		
VISION		
WOODEN		

<b>SPECIAL INSTRUCTIONS</b>			

**7486**

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

<b>Fitted By</b>	DATE	DAY	AM	PM

alum	anthracite	black	brown	champ-gold	chrome	silver	white	recess size	motorised	wood fix	stone fix	brackets top	brackets face

Room	Width	Drop	Slat Size	Colour	Control LH or RH	Fitting Height	Price
<u>DINING L</u>	<u>2325</u>	<u>2700</u>		<u>COBALT CURTAIN TRACK.</u>	<u>LH</u>		<u>76</u>
<u>K R</u>	<u>2325</u>	<u>2700</u>		<u>COBALT CURTAIN TRACK</u>	<u>RH</u>		<u>76</u>
				<u>100MM OVERLAP.</u>			
				<u>FACE FIX.</u>			
				<u>6 DENOS.</u>			
				<u>3600 BE CURTAIN</u>			
				<u>PENCIL RUN</u>			

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

[Signature]

CASH	CHEQUE	CARD	
------	--------	------	--

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

