



Unit 1 B, Mugiemooss Road, Aberdeen AB21 9US
 Tel: 01224 662884 - Fax: 01224 663018
 Email: sales@grampian-blinds.co.uk

Customer's Name J. Agene
 Address 5 Colthill
Cree Muldumber
AB13 Post Code OEG

Tel. home
 Tel. work
 mobile 07960091487
 email

DATE MEASURED/ORDERED
7/7/21

Measured By:
A. May

CURTAINS	
PLEATED	
ROLLERS	<input checked="" type="checkbox"/>
ROMANS	
SHUTTERS	
VENETIAN	
VERTICALS	<input checked="" type="checkbox"/>
VISION	<input checked="" type="checkbox"/>
WOODEN	

SPECIAL INSTRUCTIONS

5-8

18786

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

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

Room	Width	Drop	Slat Size	Colour	Control LH or RH	Fitting Height	Price
Living Room	595	1485	}	Visier Blind in cork	LH	2155	193
Living Room	1879	1485		Wood Box external	LH		365
Living Room	600	1485		Box 3080 w IDB.	RH		193
Kitchen	2390	960		Roller Kela Passo Tape Blind	LH		229
Bed	1745	1225		Roller Miras 411 Face Fitted	LH		254
							1234,

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 the remaining balance on the day of fitting. If payment is not made in full at that time Gramplan 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

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

