

BLIND SURVEY

DATE

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NAME	<i>Penis Caddenwood 0151 494 3515</i>
ADDRESS	<i>36 Boodie Ave</i>
TELEPHONE	<i>L18 4PA</i>

CUSTOMER REF	<i>43997</i>
MEASURE DATE	<i>29/10/18</i>
PERFECT SURVEYOR	<i>John</i>

BLIND No	ROOM	TYPE	VARIETY	DESCRIPTION	REF	WIDTH	DROP	CONTROLS	BRACKETS	SURFACE	PRICE BRAND	PRICE
<i>1</i>	<i>Shower</i>		<i>Roller</i>	<i>Sliding</i>		<i>980</i>	<i>1130</i>	<i>LH</i>	<i>Top</i>	<i>Tile</i>		<i>115</i>
<i>2</i>				<i>Boogie</i>		<i>530</i>	<i>1100</i>	<i>RH</i>	<i>✓</i>			<i>85</i>
				<i>Marathon</i>								<i>200</i>
				<i>S/200</i>								
				<i>NO BRAND</i>								

ADDITIONAL COMMENTS

*4 ROLLER
we want 2x speed.*

CUSTOMER SIGNATURE

I HAVE CHECKED AND AGEE WITH THE ABOVE CHOICES

PROVISIONAL FITTING DATE

SUB TOTAL		
SALE AMOUNT		<i>200</i>
METHOD	DEPOSIT	
BALANCE		