



11 King St, Stenhousemuir, Larbert FK5 4HD
 Tel: 01324 555533
 sales@scot-blinds.co.uk
 www.scot-blinds.co.uk

Customer's Name Catriona Cully
 Address 9 Corbiewood Drive
Bannockburn
Stirling Post Code FK7 8PY

Tel. home 01786 813103
 Tel. work
 mobile
 email

DATE MEASURED/ORDERED
16 / 12 / 19
 Measured By:
Graeme

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

SPECIAL INSTRUCTIONS
Remove L&R
Panel for
LIVING LEAT

Remove Right
for Living Room.

Middle blind
cont silk

02580

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

Fitted By	DATE	DAY	AM	PM

alum	white	brown	white chain	welded in weight	recess size	window not square	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
LIVING L	650	1270	50	Autumn Gold	SPS	2350	100
M	2300	1270					308.
R	650	1270					100
				Dark Pine or Maple Lino			
				Remove Panels.			125
							125
							409
							410
							530.

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 the amount shown in full at the time of fitting. If payment is not made in full at that time Scotblinds, 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

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

