



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

Customer's Name Lavelle Turner  
 Address 14 Bedlormie Place  
Redding  
 Post Code FK29FT

Tel. home	
Tel. work	
mobile	<u>07791 564702</u>
email	

DATE MEASURED/ORDERED	<u>16/1/20</u>
Measured By:	<u>Graeme</u>

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

**SPECIAL INSTRUCTIONS** 02618

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

Fitted By	DATE	DAY	AM	PM

rail type & colour	white chain	welded in weight	recess size	window not square	wood fix	stone fix	brackets top	brackets face
alum white brown			<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	1750	1405	50	WHITE + TRAFS	STD	2400	363 269
HALL	554	955			STD	2350	87 76
FRONT	1750	1105			STD	2400	290 199
L	1150	1105			STD	2400	194 135
DOOR	1152	1105			STD	2400	194 135
R	1150	1105			STD	2400	194 135
BATH	520	955			STD	2400	87 76
						1413	1025
						1130	820

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

Q .....

CASH	CHEQUE	CARD
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**ALL BLINDS TO BE PAID FOR AT TIME OF FITTING**

