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Customer's Name CLAIRE BARNETT
 Address 106 Dover Drive
Dunfermline
 Post Code KY11 8UA

Tel. home	
Tel. work	
mobile	<u>07881758204</u>
email	

DATE MEASURED/ORDERED
<u>03 / 09 / 21</u>
Measured By:
<u>Walker</u>

SPECIAL INSTRUCTIONS		3875
<u>VISION = 1350</u>		P/CUST
<u>VISION = 1350</u>		NET
<u>27.5</u>		PRESS
<u>2175</u>		RADIO
		MAG.
		VAN
		RECC.
		SHOP
		TV
		YELL P
		OTHER
Fitted By	DATE	DAY AM PM

CURTAINS	
PLEATED	
ROLLERS	
ROMANS	
SHUTTERS	
VENETIAN	
VERTICALS	
VISION	
WOODEN	

alum	white	brown	white chain	welded in weight	recess size	Motorised	wood fix	stone fix	brackets top	face
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Room	Width	Drop	Slat Size	Colour	Control LH or RH	Fitting Height	Price
KIT LL	1005	1945	V	CAPP. ANTHRACITE	L	2040	305
LM	1010	1945			R	2040	305
LR	1000	1945		70mm WHITE CASSETTE	R	2040	305
KIT M	2380	1005			R	2040	300
KIT RL	555	1270			L	2100	155
RM	1080	1270			R	2100	205
RL	560	1270			R	2100	155
PATIO	1725	1970			L	2070	355
LJ M	2345	1285			R	2070	1730
L	545	1285			L	2070	
L	530	1285			R	2070	1380
				1235 Venetian			290
							290
							290
							310
							150
							210
							150

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 Sunrite 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. Deposit non-refundable if customer cancels. Full T's & C's on website.

TOTAL PRICE £

DEPOSIT £

BALANCE £

PRICE ACCEPTANCE Customer's Signature

[Signature]

ALL BLINDS TO BE PAID FOR AT TIME OF FITTING

CASH	CHEQUE	CARD
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