

Rainbow Blinds

TEL: 01698 351888
 sales@rainbow-blinds.com
 rainbow-blinds-and-interiors.co.uk

Customer's Name LORRAINE MARTIN
 Address 21 Orchard Street
Carlisle
 Post Code ML8 5AJ

Tel. home 01555 772730
 Tel. work
 mobile
 email

DATE MEASURED/ORDERED
18 / 11 / 21

Measured By:
Craig

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

SPECIAL INSTRUCTIONS

ASAP

6215

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	face
								<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>	

Room	Width	Drop	Slat Size	Colour	Control LH or RH	Fitting Height	Price
Liv	867	1412	50	GLow White ESSENCE	STD	2100	104
Liv R	1200	1412	50	↓	↓		144
Liv R.	867	1412	50			104	
HALL	832	1445	50			104	
Bed 1	1438	1141	50			127	
Bed 2	1428	1141	50			127	
				with TAPES.			

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 Rainbow 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 £ 710.
 DEPOSIT £ 355
 BALANCE £ 355.

PD 1811 VISA
 PRICE ACCEPTANCE Customer's Signature
Lorraine Martin
 CASH CHEQUE CARD

ALL BLINDS TO BE PAID FOR AT TIME OF FITTING

