

Rainbow Blinds

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

Customer's Name Thomson
 Address 84 Carlisle Road
Blackwood, Lanark.
 Post Code ML11 9R7

Tel. home	
Tel. work	
mobile	<u>07491 205211</u>
email	

DATE MEASURED/ORDERED	<u>21/09/22</u>
Measured By:	<u>David H.</u>

SPECIAL INSTRUCTIONS

WHITE CASSETTE

[Signature]

7063

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

CURTAINS		
PLEATED		
ROLLERS		
ROMANS		
SHUTTERS		
VENETIAN		
VERTICALS		
VISION	<u>[initials]</u>	
WOODEN	<u>[initials]</u>	

Fitted By	DATE	DAY	AM	PM

alum	anthracite	black	brown	champ-gold	chrome	silver	white	recess size	motorised	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
FRONT ROOM	1600	1580	<u>40mm</u>	CASSETTE	R	2800	290
LIVING ROOM	2070	1570			R	2800	363
							653
			50	Pure			
			50	with white TAPES			
							660

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 50% deposit and the remaining balance on the day 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.

TOTAL PRICE £ ~~536~~ 660 PO CASH 21/9/22 - PAID £25 CASH 23/9/22

DEPOSIT £ ~~230~~ 255 Eileen Thomson

BALANCE £ ~~300~~ 405

PRICE ACCEPTANCE Customer's Signature

CASH	<input checked="" type="checkbox"/>	CHEQUE	<input type="checkbox"/>	CARD	<input type="checkbox"/>
------	-------------------------------------	--------	--------------------------	------	--------------------------

ALL BLINDS TO BE PAID FOR AT TIME OF FITTING

