



Tel: 0131 665 9933
 sales@sunrite.co.uk
 www.sunrite.co.uk

Customer's Name Beveridge
 Address 3A Chestnut Lodge
Kinfauns
Perth Post Code PH2 7JX

Tel. home
 Tel. work 07742913243
 mobile
 email BHWATB@AOL.COM

DATE MEASURED/ORDERED
14 / 11 / 19

Measured By:
[Signature]

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

SPECIAL INSTRUCTIONS

Register

2926

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"/>					

Room	Width	Drop	Slat Size	Colour	Control LH or RH	Fitting Height	Price
CON	3920	2069	89	1070 APP CONS C SPLT		2072	
	3532	2065	89	" " " "			
KIT	872	1997	Roll	STAFFORD GREY	RHC	2017	76
	1472	2065	Roll	" " " "	RHC	2065	153
DIN	2638	2071	89	1070 APP CONS	RHC	2071	246
LIV	870	1299	Roll	RADIANI VANILA	SPRINK	2071	81
	864	1300	Roll	" "	SPRINK	2081	81
	870	1300	Roll	" "	SPRINK	2081	81
	1471	2081	89	" "	RHC	2081	153

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.

TOTAL PRICE £ 3085.06
 DEPOSIT £
 BALANCE £

PRICE ACCEPTANCE Customer's Signature

ALL BLINDS TO BE PAID FOR AT TIME OF FITTING

CASH	CHEQUE	CARD
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