

# Rainbow Blinds

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

Customer's Name Sports Scotland  
 Address Doges - 62  
Templeton street  
Glascow Post Code G40 1DA

Tel. home  
 Tel. work 0131 625 11400  
 mobile (0781790843 yvette)  
 email

DATE MEASURED/ORDERED  
10/12/19

Measured By:  
Graeme

CURTAINS		
PLEATED		
ROLLERS		
ROMANS		
SHUTTERS		
VENETIAN		
VERTICALS		
VISION		
WOODEN		

*Keaister*

**SPECIAL INSTRUCTIONS** 4069

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

Fitted By	DATE	DAY	AM	PM

rail type & colour alum white brown	white chain	welded in weight	recess size <u>extra</u>	window not square	wood fix	stone fix <input checked="" type="checkbox"/>	brackets top face <input checked="" type="checkbox"/>
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Room	Width	Drop	Slat Size	Colour	Control LH or RH	Fitting Height	Price
L	2000	3500				4400	
	2000	3500				4400	
	2000	2400				3430	
	1955	3470				4400	
	2000	3460				4400	
	2000	3460				4400	
	2000	3460				4400	
	2000	3460				4400	
	1970	2405				3440	
	2000	2405				3440	
J	2000	2415				3440	
	2000	2440				3440	
R	2000	3495				4400	

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.

TOTAL PRICE £

DEPOSIT £

BALANCE £

PRICE ACCEPTANCE Customer's Signature  
*[Signature]*

CASH	<input type="checkbox"/>	CHEQUE	<input type="checkbox"/>	CARD	<input type="checkbox"/>
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**ALL BLINDS TO BE PAID FOR AT TIME OF FITTING**

