

Rainbow Blinds

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

Customer's Name K. Moore
 Address 9 macmillan Garden
Uddingston
 Post Code G715SD

Tel. home	
Tel. work	
mobile	<u>07585125540</u>
email	

DATE MEASURED/ORDERED
<u>16/3/20</u>

Measured By:
<u>Gary</u>

CURTAINS		
PLEATED		
ROLLERS		
ROMANS		
SHUTTERS		
VENETIAN		
VERTICALS		
VISION		
WOODEN		

Register

4211

SPECIAL INSTRUCTIONS			
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	window not square	wood fix	stone fix	brackets top 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	
Lounge	1755	1125	50	Expressions Snow	SHL	2065	£166	
Utility	885	980	↓	Matching tapes	SHL	2165	£91	
Porch	610	980			SHL	2165	£64	
Ensuite	870	995			(T.Loo)	SHL	2165	£91
office	1185	982			SHL	2165	£112	
Spore bed	1192	990			SHL	2165	£112	
				(Discounted 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.

TOTAL PRICE £ 636

DEPOSIT £

BALANCE £

Quote.

PRICE ACCEPTANCE Customer's Signature

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CASH	CHEQUE	CARD
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ALL BLINDS TO BE PAID FOR AT TIME OF FITTING

