

# ROLLERBLIND ORDER FORM



Customer \_\_\_\_\_  
Address \_\_\_\_\_

Date \_\_\_\_\_  
Project Name \_\_\_\_\_  
Project Location \_\_\_\_\_  
Tel \_\_\_\_\_  
Mobile \_\_\_\_\_  
Email \_\_\_\_\_

RESET  
FORM

**ORDER  
QUOTE**

Window Info	Dimension	Control Type	Blind Format	Fabric	Restraints	Hem Bar	Hardware Colour			Customised (If Applicable)
Location _____	Blind Recess	Chain Install Height (If Chain) _____mm	Blind Type Bracket Cassette Mounting Profile	Fabric _____	Free Hanging	Large Large Covered Oval Small Small Weight Bar Weight Bar Stitched	Bracket/Cover Black Grey White	Hem Bar Black Grey White	Chain Tidy (If Chain) Chrome / Black Insert Chrome / White Insert Nickel / Black Insert Nickel / White Insert	Drawing Required
Window ID _____	Width (X) _____mm	Powered Motor ID (If Powered) _____	Fixing Face Fix Top Fix	Direction Off Roller Off Back Off Front	Black / Flush / Mounted Chrome Dome Chrome / Flush / Mounted Extended (Face Fix Only) Nickel Dome Nickel / Flush / Mounted	Brush Strip (Small and Large Hem Bar only) Black (Brush) Grey (Brush) White (Silicone)	Bracket Insert Black Grey White	Custom (RAL) _____	Side Track (If Side Track) Black Grey White Custom (RAL) _____	Custom Tube Size Ø37   Ø50   Ø62
Quantity Required _____	Drop (Y) _____mm	Control / Wire Exit Left Right		Fabric Face Inside Outside	With Spacer (Chrome / Nickel Dome Only)		Mounting Profile / Cassette Black Grey White Custom (RAL) _____			Fabric Assembly With Hem Bar Without Hem Bar
Side Tracks Side Track 7 Side Track 8 Side Track 10 Side Track 11										

  

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