Today’s Date: Tropical Blinds Order Number:

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**Tropical Blinds Limited Perfect Fit Roller Blind Order Form**

Units 6 & 7, Five Arches Business Estate, Off Maidstone Road,

Sidcup, Kent, DA14 5AE

Tel: 0208 269 6400 Fax: 0208 269 6401/2 Email: [order@tropicalblindsltd.co.uk](mailto:order@tropicalblindsltd.co.uk)

|  |  |
| --- | --- |
| Required By Date: |  |
| Actual Del Date: |  |
|  |  |

|  |  |
| --- | --- |
| Customer Order Number: |  |
| Total Number Of Blinds: |  |
|  |  |

|  |  |
| --- | --- |
| Account Code: |  |
| Account Name: |  |
| Order Place By: |  |

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| --- |
| Customer Invoice Address: |

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| --- |
| Delivery Address: |

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| Delivery Instructions: |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Qty** | **Location** | **Glass Width** | **Glass Drop** | **Fabric** | **Colour** | **Frame Colour** | **Bracket Size** | **Special Instruction** |
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