

Phase 1

P26341
ELEMENT CONSTRUCTION

lot 5

Rosskeen Loop
Col. Ros-602

1st FRONT = 460×500

BASEMENT = 435×500

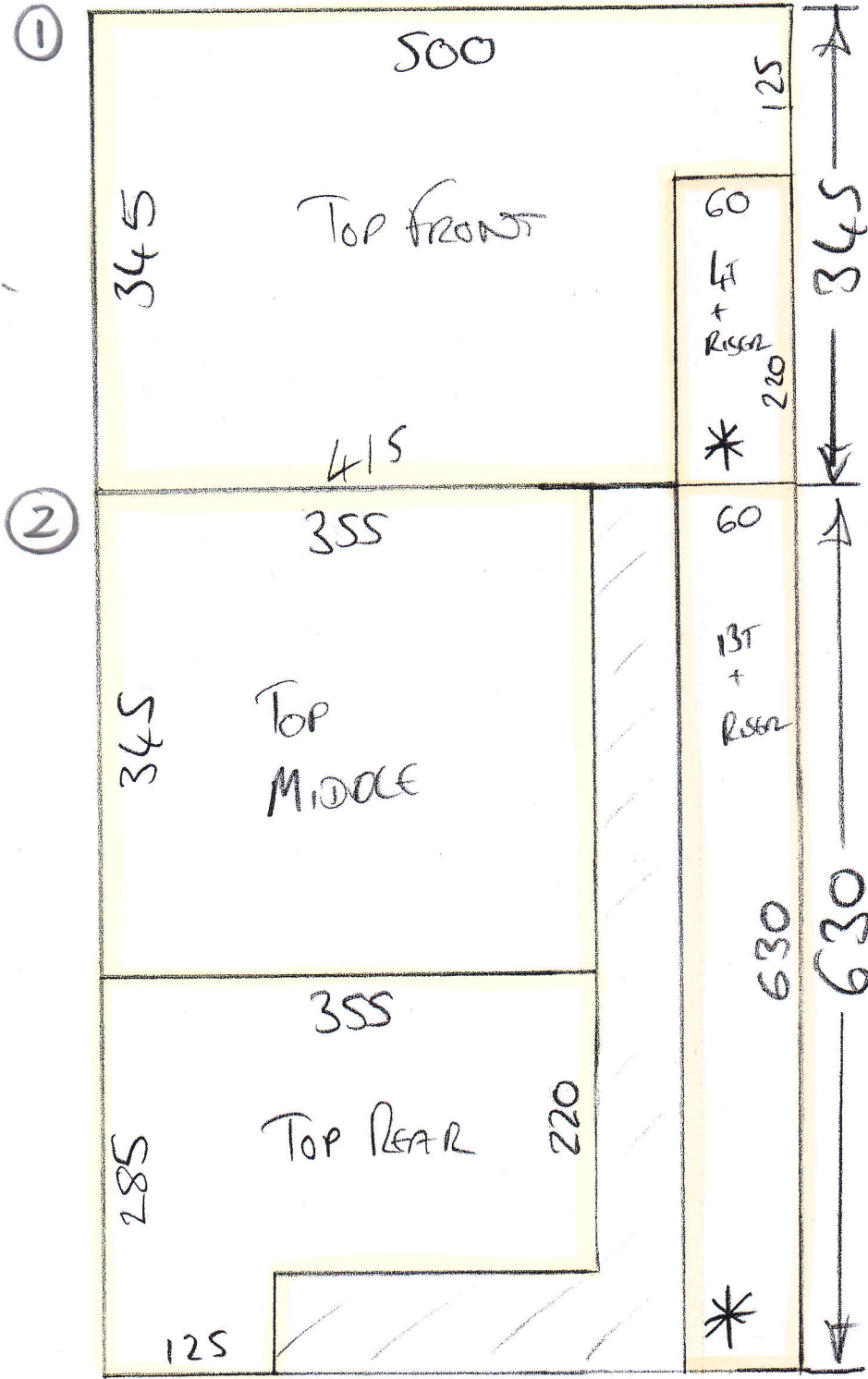
Cut PLAN 1 = 345×500

Cut PLAN 2 = 630×500

Cut PLAN 3 = 890×500

2760×500

$= 138m^2$



* = Cut Runners 2 WITH

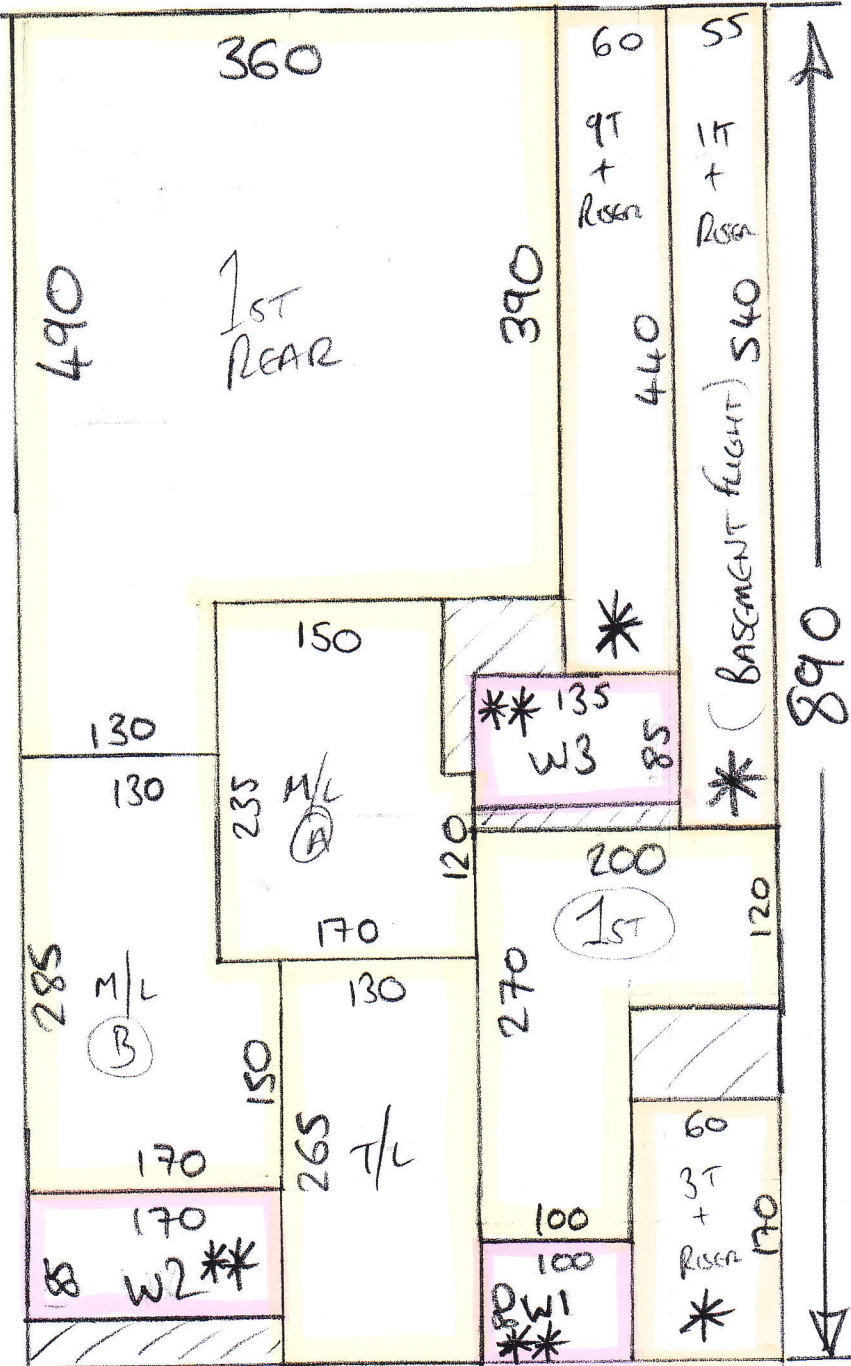
** = Shape Runners on site

} Keep together & send to BH all at same time

See Nick Skinner or Richard Griffiths.

500

3



P26341
ELEMENT CONSTRUCTION

Lot 5

Top floor NOT SQUARE

P26341
ELEMENT CONSTRUCTION

3 of 5

Phase 1

Phase 2



Riser = 18x76

(Door Locked)

Approx 30mm Tiles

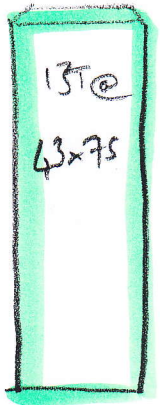
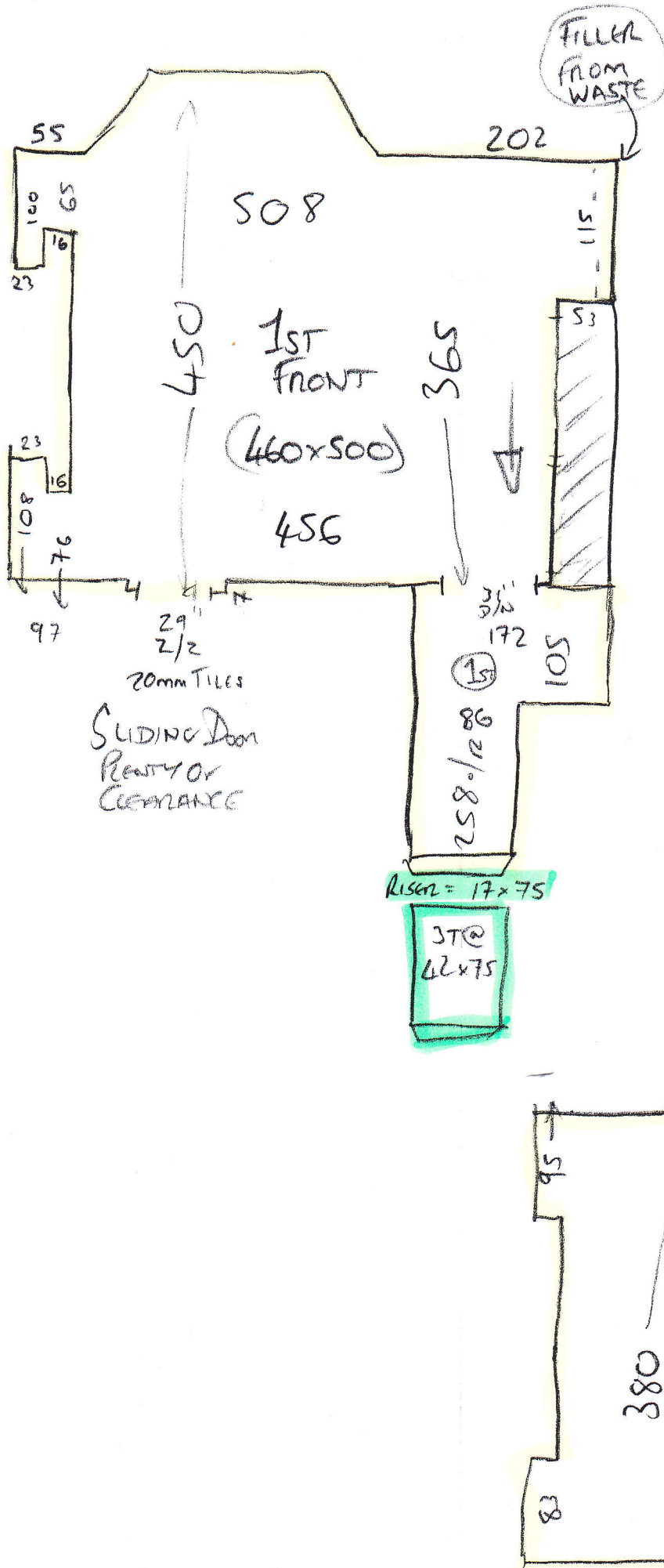
+ Slab



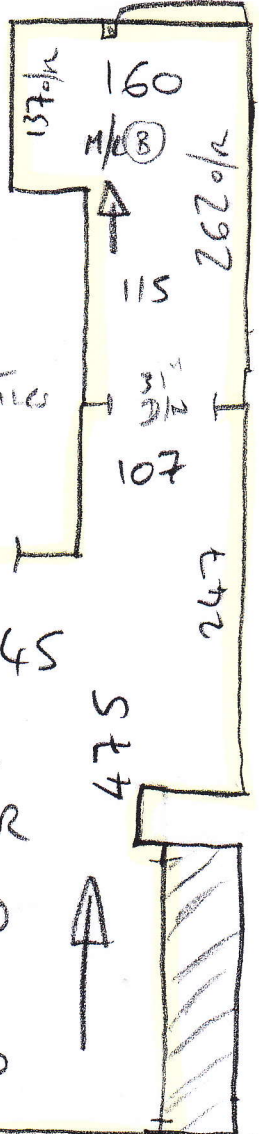
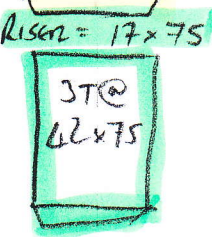
1st floor

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ELEMENT CONSTRUCTION

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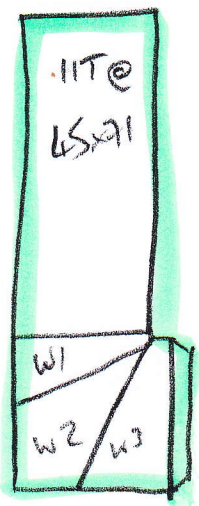
Riser = 18x75



5 of 5

Basement Flight

RISER = 18x71

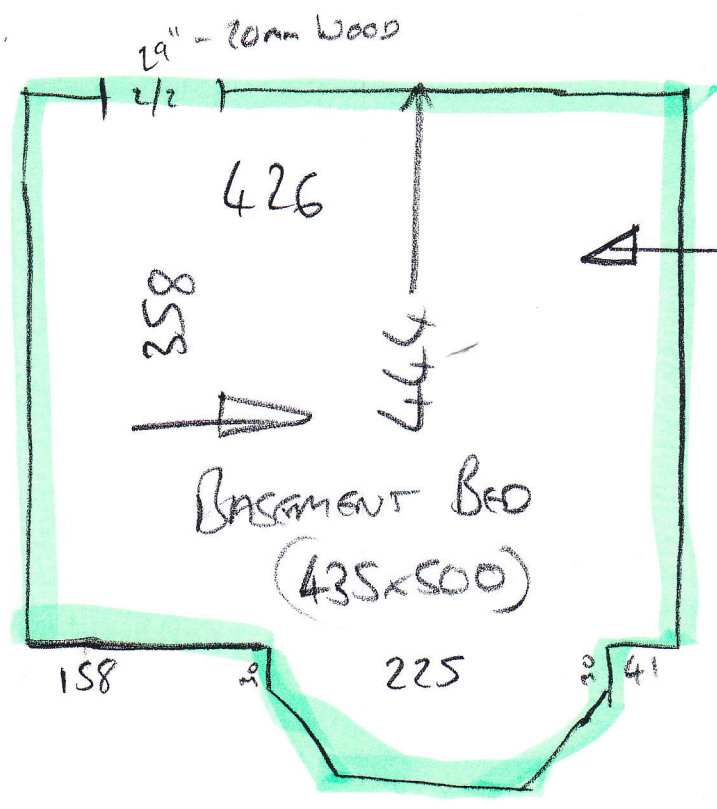


- w1 = 64x85
- w2 = 72x108
- w3 = 72x77

* Check layout for Runners with Nick Skinner or Richard Griffiths

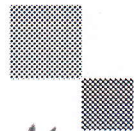
STOP

Basement



Phase 2

* 5 Straight Runners
+ 3 Shaped Winders
BH to Collect all together
on Fri 1/5



mrcarpet
DESIGNS FOR FLOORS

70 Lower Richmond Road
Putney
SW15 1LL
T 020-8789-3133
F 020-8780-2140

BH CARPETS - WHIPPING / BINDING FORM

Tel - 020-8665-9110 email: bhcarpets@gmail.com Fax 020-8665-6611

Customer Name: Element Construction
Job No.: P26341
Description of carpet: Rosskeen Loop - Ros-602

Whipping / Blind Binding / Top Taping

All Round / Sides only (for Stair Runner)

Colour of Binding tape: Linen - 71681nd Size of Binding tape: 12mm

Amount showing on top: 1/2 + 1/2 Colour of Whipping: —

Number of pieces: 8

Ready to collect on: 1 / 5 / 15 Needed back by: 7 / 5 / 15

Sizes to be cut to: 630, 220, 440, 170x60cm, 540x55cm
+ 3 Shaped Winders

Whipping: _____ metres @ £2.00 linear metre £ _____

Apply Tape: 45 metres @ £6.00 linear metre £ 270
(Supplied by MRC)

Blind Taping: _____ metres @ £7.00 linear metre £ _____
(including. Tape)

Trimming Charge (if applicable) £ —

ANY QUERIES CALL:

Nigel Canice Jack

Total £ 270

Collect from:

Warehouse / Putney Shop

Deliver Back to:

Warehouse / Putney Shop

Mr Carpet Use. (Copy to be faxed to Shop & accounts Dept. when returned)

Date Collected: _____ Collected By: _____

Date Returned: _____ Returned By: _____

Invoice No: _____ Comments: _____