

Fault Report

Customer Name: <u>Bonner</u>	Date: <u>24/5/22</u>
Customer Reference: <u>20541</u>	Fitter: <u>Ross</u>
Salesperson: <u>Mardin</u>	Salesperson called: Yes <input checked="" type="radio"/> No <input type="radio"/>
Blind Type and number: <u>Senses</u>	
Fault Description: <u>Mis Measure X1</u> <u>Senses</u>	
Action to correct: <u>re make</u>	
Problem fixed on site: Yes <input checked="" type="radio"/> No <input type="radio"/>	
Further action required: <u>Yes</u>	