

Fault Report

| | |
|--|--|
| Customer Name: <i>Hamilton</i> | Date: <i>22/6/22</i> |
| Customer Reference: <i>3980</i> | Fitter: <i>Cameron</i> |
| Salesperson: <i>George</i> | Salesperson called: Yes/ <input checked="" type="radio"/> No |
| Blind Type and number: | |
| Fault Description: <i>Bottom 5 blinds on order should be B10</i> | |
| Action to correct: <i>Remake</i> | |
| Problem fixed on site: Yes/ <input checked="" type="radio"/> No | |
| Further action required: | |