

EO 4595  
GRANT

# Fault Report

Customer Name:	Date:
Customer Reference: GRANT 4595	Fitter: GRAEME
Salesperson: AILSA	Salesperson called: Yes/No <input checked="" type="radio"/>
Blind Type and number: BLIND 3.	
Fault Description: BLIND HAS FRAYED ALL DOWN EDGE.	
Action to correct: REMAKE. PLEASE MAKE 1950 x 2500. RECESS.	
Problem fixed on site: Yes/No	
Further action required:	