# GENERAL COMPLAINTS FORM

v2025.01a

WITCH Group

Witch Group - Customer Account Details

Customer/Company Name: ..... Account Number: .....

Product Purchase Date: ..... Invoice Number: .....

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Customer Contact Details

Name & Address: .....

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Phone Number: ..... Email Address: .....

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(If applicable) End-User Installation Site / Surname & Address: .....

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Phone Number: ..... Email Address: .....

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Issue Overview:

What product or service is under review? .....

Installation date? ..... Professional or DIY Install? .....

Brief outline of the issue(s): .....

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Please can you confirm the following:

Do you have photographs or additional information to support your claim? (Yes/No) .....

If so, please explain how this may support your issue/claim: .....

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Thank you, our Customer Services team will contact you to discuss the next steps.