

### *Customer Procedure for Service Callouts*

A customer requiring a Service Callout should complete the Service Request form below and email this to [service@truvox.com](mailto:service@truvox.com) or fax it to 023 8070 5001

Upon receipt of a fully completed Service Request Form, the Truvox Service Administrator may call the site contact to run through some basic troubleshooting and maintenance checks in case we are able to help resolve the issue remotely. If this is not successful, we will log the request with our service engineers.

We endeavour to have an engineer to site within 3-4 days from job being raised. Our service engineers carry a range of standard equipment, but the part required may need to be ordered and a 2nd visit scheduled.

Customers can also request a quote before any work is carried out.

Customers should note that, as per our Terms and Conditions, not all issues are covered under warranty, and in those instances the customer will be invoiced for the engineer’s call out, additional time and any parts required. The callout charge is £95 (inclusive of 30 minutes labour), and additional labour is £40 per half hour. NOTE: - If a site will not allow an engineer to complete inspection/repair on site, the Engineer will be required to remove the machine from site and take to their workshop. In these instances, the customer will be charged 2nd callout fee for the return of the machine to site upon completion of inspection/repair.

For this reason, all Service Request Forms must include a customer Purchase Order Number, to cover the value of the callout & anticipated time/parts. We highly recommend that your purchase order is set to £200 + VAT which will enable many simple repairs to be carried out during the initial visit. We will not visit or carry out any repairs without an official PO.

Customers with a Proforma Account will be required to pay the above amount in advance of an Engineer visit. Should the job turn out to be under warranty, any monies paid will be refunded.

The Service Request Form should be completed by the original purchaser: distributors, dealers and other resellers are responsible for the warranty to their customers.

Once a machine has passed the warranty period, end users may contact Truvox directly for Service Callouts, however the original distributor may also be able to provide servicing.

For any queries, please call the Truvox Service Department on 023 8070 6601.

See our website for our full [Terms and Conditions](http://www.truvox.com/about-us/terms-conditionshttp:/www.truvox.com/about-us/terms-conditions) and our [Privacy Policy](http://www.truvox.com/privacy-policy)

Our Warranty Terms document BP0053 can be found on our [website](http://www.truvox.com/support/trucare-service-support)

**By completing this form, you accept the callout and labour charges that will apply if the issue falls outside of warranty.**

### *Service Request Form*

The data below will be used in order to carry out the service request and will be passed to a GDPR compliant 3rd party Engineering team if an on-site visit is required. Personally, identifiable information will be held for up to 4 years: if you wish this to be amended or removed sooner, please contact [service@truvox.com](mailto:service@truvox.com)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Requestor’s details:** | | | | | | |
| Name |  | | | Tel: |  | |
| Email / Fax |  | | | | | |
| Company |  | | | | | |
| Purchase Order Number\* |  | | | | | |
| Invoicing Address |  | | | | | |
| **Machine & Environment details:** | | | | | | |
| Machine model |  | | | Serial Number | |  |
| Truvox Invoice Number | | |  | Date of purchase | |  |
| Description of the fault or problem | | |  | | | |
| Environment in which machine is being used, including floor type | | |  | | | |
| Frequency of machine use, including run time per use | | |  | | | |
| **Please provide photos if possible** | | | | | | |
| **SITE DETAILS:** | | | | | | |
| Site Contact Name, telephone & email | |  | | | | |
| Site Address | |  | | | | |
| Site Access Restrictions (including equipment/electronics) | | TO be deleted if not a Care/Nursing Home – **Engineer MUST be fully Vaccinated and provide Covid passport to Enter property.** | | | | |
| **Please return forms to the Truvox Service Desk** e-mail: [service@truvox.com](mailto:service@truvox.com) Fax: +44 (0) 23 8070 5001 | | | | | | |

|  |  |
| --- | --- |
| **FOR SERVICE AGENT**  (To be completed by Truvox)  Truvox complies with GDPR: please note this data is only to be used in order to manage this service request. | |
| Truvox Ref: | Service Agent Ref: |
| **ADDITIONAL INFO:** | |
| Summary of previous visits |  |
| FAQs completed? | By phone? By email?  Truvox Name & Date |
| Quote required? Max Spend? |  |
| Truvox Special Instructions | Examples: Delete what is NOT required  **Engineer MUST check ALL basis functions on machine(s) during initial inspection**  No work to be carried out – customer requires Quote for repair.  Photos required  Machine within warranty period but details needed to verify whether fault is covered by warranty or down to misuse  **IF machine is to be removed from site Engineer MUST obtain permission from site along with signature.**  This job is a recall  Parts XXX sent to site on date YY. Please return any unused parts  Once X is fixed, please check all basic functions of machine  **Engineer must advise the responsible person before they completely leave the site, so an inspection/quality check of the work can be carried out.** |

|  |  |
| --- | --- |
| **CUSTOMER SIGN OFF** | |
| PRINT NAME: | SIGNATURE: |
| DATE: |  |
| **ENGINEER SIGN OFF** | |
| PRINT NAME: | SIGNATURE: |
| DATE: |  |

Please return signed copy of form to [service@truvox.com](mailto:service@truvox.com) with Service agent Job Sheet and pictures obtained during site visit.

|  |  |  |
| --- | --- | --- |
| **FOR TRUVOX INTERNAL USE** | | |
| Customer Account Number & Company Name |  | |
| Invoice Address Checked |  | |
| Credit Check Completed |  | |
| **NOTES:** | | |
|  | | |
| **AFTER JOB COMPLETION** | | |
| Agent Invoice Checked & Passed to Accounts | |  |
| Customer Invoice Raised | |  |
| Any other action required | |  |