Safe Hands Mobility Centres

MAINTENANCE REPORT & INVOICE

Initial:	Surname:	Telephone:
Address:		
Model:	Serial No:	

SERVICE CHECK LIST	Passed	Failed
Tyre Wear		
Tyre Pressure		
Wheel Bearings		
Disc Brakes		
Motor Brushes		
Electric Motors		
Battery Cells		
Electrical Connections		
Chassis Condition		
Body Work Condition		
Wiring Loom Condition		
Bulbs		
Seat Mechanism		
Steering Knuckle		
Turning Circle		
Seat Post		
Check All Bolts		
Free Wheel Operation		
Gear Box		

Cash	Chq	C/C	Refund

DESCRIPTION OF WORK CARRIED OUT	AMOUNT

Declaration for Relief from VAT
I am chronically sick or disabled (as defined below) and I am receiving from Safe Hands Care Centres, the goods on this invoice, which are for my personal or domestic use. I claim that the supply of these goods is eligible for relief from VAT under VAT Act 1983. Insert details of your chronic sickness or disability below
Note: There are severe penalties for making a false declaration.

Illness:.....

Signature.....

Call Out & 1st Hours Labour	£
PARTS	£
TOTAL	£

WORK CARRIED OUT		COMMENTS
Insurance		
Ext. Warranty		
Our Warranty		
Mfctrs. Warranty		
Report No.		

FOLKESTONE
Compass House
347-349 Cheriton Road
Cheriton,
Folkestone
Kent CT19 4BP
Phone: 01303 274500
Fax: 01303 274300

BIRCHINGTON
2 Surrey Gardens
Birchington
Kent CT7 9SA
Phone: 01843 848208
Fax: 01843 842772

DOVER
37 Biggin Street
Dover
Kent CT16 1BU
(opposite WH Smith)
Phone: 01304 214000
Fax: 01304 245440

ASHFORD
1 New Street
(opposite the tank in St. Georges Square)
Ashford
Kent TN24 8TN
Phone: 01233 610710
Fax: 01233 620680

Engineers Signature:		Contact	
Customers Signature:		Date:	