



INSTALLATION*MAINTENANCE*REPAIRS

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TEL: (023) 2310281
FAX: (023) 2311844

P O BOX 29
WOLSELEY 6830

E-MAIL: admin.wolseley@aqualityplumbing.co.za

I, _____ I.D.Nr: _____

Address: _____

who is the policy holder and duly authorised to hereby give

Mr/Mrs: _____

authority to determine the position of the geyser/solargeyser & panel/ overflow pipes/ sanitary ware and to instruct Aquality Plumbing Works-Wolseley, to install said item/s in that position. I also acknowledge that I will not hold Aquality Plumbing Works-Wolseley responsible for any damage or loss or for repositioning this item elsewhere, as a result of it being installed in an incorrect position.

Signed at _____ on this ___ day of _____ 2010.

Full Name: _____

Signature: _____