**Master Electricians Workmanship Guarantee claim form**

The Workmanship Guarantee covers:

* work done by the original contractor only
* labour costs and replacement materials only, up to $20,000 including GST
* residential work only
* remedy by the original contractor or an alternative member as determined by Master Electricians.

If you have a complaint about workmanship, you should first take it up with the electrical contractor concerned.

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| **Your details** | |
| **Name:** |  |
| **Address:** |  |
| **Contact phone no:** |  |
| **Email address:** |  |
| **Master Electricians member details** | |
| **Name of contractor company or sole trader:** |  |
| **Address:** |  |
| **Phone no:** |  |
| **Email address:** |  |
| **Completion and payment details** | |
| **Date of completion of work:** |  |
| **Date given on CoC:** |  |
| **Date of invoice:** |  |
| **Total amount of contract:** |  |
| **Amount paid:** |  |
| **Description of work** *(please describe the* ***residential*** *work requested/work done and the location)* | |
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| **Details of claim** *(please state why you are dissatisfied with the workmanship)* |
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| **Supporting documents** *(please list details of invoice(s) and any quotes, contracts, etc. relevant to this claim and attach copies to this form)* |
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**Have you made every attempt to resolve this claim directly with the member?**

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| **Yes** |  | **No** |  |
| **If yes, please detail the steps taken:** | | | | |
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**Declaration**

I agree to all documentation relating to this claim being released to all parties involved and declare that the information I have supplied in this form is true and correct.

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| **Claimant name:** |  |
| **Claimant signature:** |  |
| **Date:** |  |

**Where to send your claim**

|  |  |
| --- | --- |
| **Post to:**  Master Electricians PO Box 12434 Thorndon **Wellington 6144** | **Email to:**  [admin@masterelectricians.org.nz](mailto:admin@masterelectricians.org.nz)  Please scan and attach the completed form and supporting documents. |