

UHS Customer Referral Form



Unique
HOME SOLUTIONS

Date ____/____/____

(800) 800-1971

Referrer - Individual Taking Referral:

Unique Employee ☐ Yes ☐ No Unique Customer ☐ Yes ☐ No

Name _____
(Compensation will be made payable to this name)

Department _____
(employees only)

Address _____
(non-employees only)

Phone _____
(non-employees only)

Email _____
(non-employees only)

Referred Home Owner:

Current Unique Customer ☐ Yes ☐ No

Name _____

Address _____

Phone _____

Email _____

Product(s) of Interest (Check all that apply):

- ☐ Bath ☐ Kitchen ☐ Windows ☐ Doors ☐ Siding ☐ Roof ☐ Gutters
☐ Basement waterproofing ☐ Handyman Services ☐ Home Safety Modifications

Signature of Home Owner Being Referred:

Name _____

Date _____

By signing this form you agree to be contacted in the future regarding Unique Home Solutions products and services. This agreement may be revoked any time upon request.



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Referral Compensation Policy

Upon completion by home owner of an in-home product demonstration, the referrer will be compensated as follows:

If home owner is a current customer - \$100

If home owner is *not* a current customer - \$200

Upon completion by referee of a handyman service estimate, the referrer will be compensated as follows:

If home owner is a current customer - \$25

If home owner is *not* a current customer - \$50

In-Home Product Demonstration and/or Handyman Service

Estimate must take place within thirty (30) days of the Taken date of referral for referrer to receive compensation.

All second party referrals will be cross referenced with DNC list. If homeowner is on the DNC list, they may be contacted only by electronic communication.

Additional policies for Customer Referrals apply to Unique Home Solutions employees in all marketing departments. Refer to specified policy for details.

Submit referrals by US Postal mail, email or telephone to:
UNIQUE HOME SOLUTIONS

INDIANA

5550 Progress Rd. Indianapolis, IN 46241

TripIND@uniquehomesolutions.org

(800) 800-1971

OHIO

1545 W. 130th St. Hinckley, OH 44233

TripCLE@uniquehomesolutions.org

(800) 800-1971

WE MAKE EVERY EFFORT TO PREVENT MISTAKES. ONCE THE FINAL PROOF IS APPROVED **PILOT SIGNS & DESIGNS** WILL NOT BE RESPONSIBLE FOR ANY MISTAKES FOUND ON FINISHED PRODUCT. PLEASE VIEW YOUR LAYOUT AND PROOF: **READ VERY CAREFULLY.**



3045 Nationwide Pkwy
Brunswick, Oh 44212

Ph: 216.920.4777
Fax: 216.367.5444

Description: Double-Sided-Black & White Half Page Customer Referral Form Re-Revised Layout.

☐ Approved ☐ Approved with Noted Changes ☐ Designer

Date: 07/07/16 Scale: Full Size Signature for Approval:

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