**Service Report**

**Airconditioning and Refrigeration Service Division**

……………………………………………………………………………………………………………………………………………………………………………………………..

**Sign.**

……………………………………………………………………………………….

**Name**

**Call attended by**

………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

**The equipment has been serviced / repaired to my/our satisfaction.**

**Customer’s Signature and Company’s Seal**

**Customer comments / suggestions (if any)**

**Quantity**

**Material Used**

……………………………………………………………………………………………………………………………………………………

**Voltage**

**Amperes**

**Suction pr. Kg/cm PSIG**

**Discharge pr. Kg/cm PSIG**

**OiL pr. Kg/cm  PSIG **

**Compressor Amps**

**Canvas / Grill temp F  C**

**Return air temp  F  C**

**Ambient temp  F  C**

**Conditioned space room temp FC**

**Chiller Water Inlet C F**

**Chiller Water Outlet  C F**

**Condenser Inlet  C F**

**Condenser Outlet  C F**

**Follow up action (if any)**

**After**

**Before**

**Test Measurements (as applicable)**

**Call received on**

**First response on**

**Work completed on**

**Time**

**Date**

**Call received by** ……………………………………………………………………….

…………………………………………………………………….

**Call Ticket no.**

**Action taken**

……………………………………………………………………………………………..

…………………………………………………………………………………

…………………………………………………………………………………….

**Fault/Defect**

……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….

**Model**

**Asset no.**

**M/c Sl. no.**

**Comp Sl. no.**

**Chiller VRF Cold Room**

**Equipment attended**

**Address**

**Contact person:** ........................................................

**Phone (O):** ...............................................................

**Mobile:** ....................................................................

**Email:** ……………………………………………………………………

**Customer Name**.......................................................

…………………………………………………………………………………….