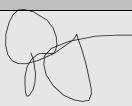
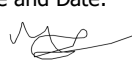




SERVICE TYPE: INSTALLATION / PM / COMPLAINT / OTHERS <small>(PLEASE CIRCLE)</small>		
ENGINEER'S NAME & SIGNATURE: 		DATE:
Customer Name:		
Address:		
Status of Call: Warranty or AMC <small>(Please circle)</small>	Location of Installation:	
NATURE OF PROBLEM		
Problem Reported:		
System Down: Yes / No <small>(Please circle)</small>	IF Yes: With / Without Backup <small>(Please circle)</small>	Equipment Type:
Make:	Model:	Serial No.
Call Reported by:	Date:	Time:
SERVICE DETAILS		
Service Rendered:		
Defects found on inspection:		Status after Service: <small>(Please circle)</small> 1. Complete 2. Incomplete 3. Pending for spares 4. Under Observation 5. Working solution provided
Engineer's remarks:		
Events: (Date & Time)	Start of Service:	End of service:
CUSTOMER FEEDBACK		
Remarks:		
Name:	Designation:	Phone/Fax:
Email:		
Signature and Date: 	Stamp:	