

ENGINEERING REPORT

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