

FIELD SERVICE REQUEST

v03

DATE: _____	SERIAL # _____	CUSTOMER P.O. # _____	WORK ORDER # (FOR REXA USE ONLY) _____
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SECTIONS 1 THRU 4 MUST BE COMPLETED BEFORE SERVICE WILL BE SCHEDULED.

1 BILLING ADDRESS

Company: _____

Address: _____

Contact: _____

Tel: _____ Fax: _____

e-mail: _____

2 SITE LOCATION

Company: _____

Address: _____

Contact: _____

Tel: _____ Fax: _____

e-mail: _____

Closest Airport: _____

3 ITEM(S) REQUIRING SERVICE

ACTUATOR ELECTRONICS START-UP OTHER _____

Model No.: _____

Electronics: SUPPLY VOLTAGE _____ CONTROL SIGNAL _____

Date of Required Service: _____

ENVIRONMENTAL CONDITION:

Ambient Temperature _____

Location: inside outside

4 PROBLEM/FAILURE DESCRIPTION:

PREPARED BY: _____ **REPRESENTATIVE:** _____

NOTES:

1. COMPLETING THIS FORM will ensure that the proper tools and correct parts are brought to the job site.
2. TO MINIMIZE COST during repairs, the following should be considered prior to the technician's arrival:
 - A. Have the actuator tagged out and removed from service or removed from the unit if necessary.
 - B. Properly clean the actuator prior to service to remove hazardous substances and to avoid contaminants entering the actuator during repair.