

TECHNICAL SERVICE REPORT

No.

1503277

DATE: 21/07/13

CUSTOMER DETAILS		INSTRUMENT DETAILS			SERVICE STATUS	
NAME: Vital Smart Diagnostics		MODEL: EM100			<input type="checkbox"/> WARRANTY	<input type="checkbox"/> R&R
ADDRESS: Varsava - Anelheri to		SR. NO.: B200474			<input type="checkbox"/> AMC	<input checked="" type="checkbox"/> CMC
TEL NO.:		CALL DETAILS			TYPE OF CALL	
NAME OF THE OPERATOR:		COMPLAINT RECD.			<input type="checkbox"/> INSTALLATION	
PROBLEM REPORTED: P.m 1 cell counte blank Error		RESPONSE			<input checked="" type="checkbox"/> P.M. VISIT I II III IV	
OBSERVATIONS: cell blank error / pm		JOB COMPLETED			<input type="checkbox"/> APPLICATION SUPPORT	
ACTION TAKEN: Preventive Maintenance procedure carried out cleaning procedure carried out change lamp adjust gain Run maintenance run auto span found result ok.		RESPONSE TIME			<input checked="" type="checkbox"/> BREAKDOWN	
SITE CONDITION: LINE-NEUTRAL VOLT.: 229		TRAVEL TIME			DOWN TIME:	
NEUTRAL-EARTH VOLT.: 209		TOTAL Rs.			COUNTER READING:	
LINE-EARTH VOLT.: 250		INVOICE NO.:			RECEIVED ON:	
BRAND OF REAGENT USED:		DATE:			CHECKED BY:	
<input type="checkbox"/> FOLLOWING PARTS HAVE BEEN REPLACED		FOLLOW-UP ACTION (Required if any):			JOB CARD NO.:	
<input type="checkbox"/> FOLLOWING PARTS NEED TO BE REPLACED. PLEASE APPROVE		ENGINEER'S/APPLICATION SPECIALIST'S SIGNATURE: <i>Nitin Ichawale</i>			SEAL	
NO. DESCRIPTION QTY. COST TOTAL		TIME: NAME <i>Nitin Ichawale</i>			DATE	
TO BE FILLED IN BY CUSTOMER		CUSTOMER'S SIGNATURE NAME: <i>AJ</i>			CUSTOMER'S SIGNATURE NAME:	
<input type="checkbox"/> PREVENTIVE MAINTENANCE CARRIED OUT SATISFACTORILY.		BRANCH			H. O.	
<input type="checkbox"/> FAULT RECTIFIED & INSTRUMENT IS WORKING SATISFACTORILY.		RECEIVED ON:			CHECKED BY:	
<input type="checkbox"/> WE HEREBY APPROVE RS. _____ FOR PARTS		RECEIVED ON:			CHECKED BY:	
<input type="checkbox"/> COMMENTS (IF ANY):		RECEIVED ON:			CHECKED BY:	
NOTE: Parts replaced are chargeable except during warranty Period. Consumables like printer head, lamp, tubing, paper rolls etc. & breakable parts are not covered by warranty and hence are chargeable. Parts replaced due to negligence in operation will also be charged in every case.		RECEIVED ON:			CHECKED BY:	
AT TRANSASIA, CUSTOMER SATISFACTION IS OUR PRIME CONCERN. IN CASE YOU HAVE ANY SUGGESTIONS PLEASE CONTACT: GENERAL MANAGER (TECHNICAL SERVICE), MUMBAI. TEL.: 4030 9000		RECEIVED ON:			CHECKED BY:	

TRANSASIA BIO-MEDICALS LTD.

Head Office : Transasia House, 8, Chandivali Studio Road, Andheri (E), Mumbai - 400 072. Tel. : (022) 4030 9000 Fax : (022) 2857 3030
 Mumbai : Toll Free No. 1800 103 8226, Whatsapp No. : 8451048434, SMS No. : 9212433444
 Indore : Tel. : (0731) 403 3948 *Chennai : Tel. : (044) 2822 7149 Kolkata : Tel. : (033) 2215 7839 Fax : 2215 8035
 Lucknow : Tel. : (0522) 443 0900 Pune : Tel. : (020) 2616 2658 Dehi : Tel. : (011) 2578 5451/2573 2223
 Chandigarh : Tel. : (0172) 464 3837 Hyderabad : Tel. : (040) 4430 9000 Ahmedabad : Tel./Fax : (079) 02640 7030/4032 1903
 Jaipur : Tel. : 93092 63147 Guwahati : Tel. : 91369 50480 Bangalore : Tel./Fax : (080) 2556 8044
 Patna : Tel. : 77669 00553 Chuttack : Tel. : (0671) 232 4555
 Kochi : Tel. : (0484) 402 0511 Hubli : Tel. : (0836) 485 0900

TECHNICAL SERVICE REPORT

No. **1503278**

DATE : **21/12/23**

CUSTOMER DETAILS		INSTRUMENT DETAILS		SERVICE STATUS		
NAME : Vital Smart Diagnostics		MODEL : Esbachem 5 V 2		<input type="checkbox"/> WARRANTY <input type="checkbox"/> R&R <input checked="" type="checkbox"/> AMC <input checked="" type="checkbox"/> CMC <input type="checkbox"/> CHARGED CALL		
ADDRESS :		SR. NO. :		TYPE OF CALL <input type="checkbox"/> INSTALLATION <input checked="" type="checkbox"/> P.M. VISIT I II III IV <input type="checkbox"/> APPLICATION SUPPORT <input type="checkbox"/> BREAKDOWN		
Vasava - Andheri - W		CALL DETAILS				
			DATE	TIME		
		COMPLAINT RECD.				
		RESPONSE	21/12/23			
TEL NO :	JOB COMPLETED	21/12/23			DOWN TIME :	
NAME OF THE OPERATOR :	RESPONSE TIME				COUNTER READING :	
	TRAVEL TIME					
PROBLEM REPORTED : pm						
OBSERVATIONS : pm						
ACTION TAKEN : Preventive Maintenance Procedure carried out clean flowcell, check gain found in range instrument clean dust, internal and external per gain calibration found ok						
SITE CONDITION : LINE-NEUTRAL VOLT. : [] NEUTRAL-EARTH VOLT. : [] LINE-EARTH VOLT. : []						
BRAND OF REAGENT USED :				TO BE FILLED IN BY CUSTOMER		
<input type="checkbox"/> FOLLOWING PARTS HAVE BEEN REPLACED <input type="checkbox"/> FOLLOWING PARTS NEED TO BE REPLACED. PLEASE APPROVE				<input type="checkbox"/> PREVENTIVE MAINTENANCE CARRIED OUT SATISFACTORILY. <input type="checkbox"/> FAULT RECTIFIED & INSTRUMENT IS WORKING SATISFACTORILY. <input type="checkbox"/> WE HEREBY APPROVE RS. _____ FOR PARTS <input type="checkbox"/> COMMENTS (IF ANY) :		
NO.	DESCRIPTION	QTY.	COST	TOTAL		
TOTAL Rs.						
INVOICE NO. :		DATE :		BRANCH H. O.		
FOLLOW-UP ACTION (Required if any) :				RECEIVED ON :		
				CHECKED BY :		
ENGINEER'S/APPLICATION SPECIALIST'S SIGNATURE :				JOB CARD NO. :		
TIME :		NAME : Atin Khowale				
NOTE : Parts replaced are chargeable except during warranty Period. Consumables like printer head, lamp, tubing, paper rolls etc. & breakable parts are not covered by warranty and hence are chargeable. Parts replaced due to negligence in operation will also be charged in every case.						
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Mannheim

INSTALLATION REPORT

F03-R01/SC/FQC/SOP/001

NAME & ADDRESS OF THE INSTALLATION PLACE:

Vital Smart Labs
103/ B wing , Royal Classic, off link Road , Andheri - 400053

NAME OF THE ANALYZER : ST200 CL PLUS ELECTROLYTE S. No. : STCLP-0990

PARAMETERS :

SODIUM (Na⁺) : Na2212C11 POTASSIUM (K⁺) : K2212M26

CHLORIDE (Cl⁻) : CL2304A59 LITHIUM (Li⁺) : -

IONIZED CALCIUM (iCa⁺⁺) : - pH : - HCO₃⁻ : -

BUBBLE DETECTOR : USSBD2212589 REFERENCE : RES.CH2212.E.61

INSTALLED ON : 09 Sep. 2023

WARRANTY ENDS ON : 30 Aug 2024

COMMENTS IF ANY :

INSTALLED BY

(NAME): Karim Pathan

NAME OF THE DISTRIBUTOR: Nirman Biomedicals

SIGNATURE: 

DATE: 01 Sep 2023

SEAL:

INSTALLED

AT: Vital Smart Labs
103, Royal Classic, Nxt to City mall
Andheri (W)

SIGNATURE: 

NAME: Ms. Neha Pawar

DESIGNATION: Technician

SEAL:

SCLBL0437

