

INSTALLATION REPORT

HIN/10922/

Customer Name : TATA IMA Technologies Pvt. Ltd.
 (Entity Name)
 Address : 2nd Floor, JR Plaza Pin Code : 302015 City : Jaipur State: Rajasthan
Dist. Shopping Centre Road, Lal Kathi, Jaipur
 Contact Person : Mr. Lokesh ji
 (Dr./Lab Incharge)
 Phone : 8860007032 Mobile : _____ Email : _____

INSTRUMENT & INVOICE :

Instrument Type : Hematology Analyzer Date of Installation : 22/7/24
 Model : Yumizen H550 Date of Invoice : _____
 Instrument Serial No. : 403YADH07064 Invoice No. : _____
 Version : 3.2.0.4 Monitor S/N : _____
 Printers S/N : _____ Others : _____
 CPU SIN : _____

PHYSICAL INSPECTION :

1. Was there any external Damage to the Instrument or Accessories? Yes / No
 2. Were any of the accessories missing? Yes / No
 3. Were any parts loose? Any unsecured hardware? Yes / No

If any of the above were answered YES, please elaborate.

N/A

PRE-INSTALLATION CHECKS :

Is Room Air-Conditioned? Yes / No
 Vibration Free Platform? Yes / No
 A.C. Supply : 231V
 Specified Capacity & Make : C.V.T. _____ U.P.S. Online Stabilizer _____
 Specified Capacity & Make : _____
 Output Voltage : Line & Neutral 231V Neutral & Earth 0V Line & Earth 231V

TO BE COMPLETED BY THE CUSTOMER :

The above mentioned instrument has been satisfactorily installed by the Engineer / Product Specialist of Horiba India Pvt. Ltd.
 Received all standard accessories in good condition.
 Customer's Remarks : Instrument installation done with
Customer Training

 Signature of Customer : [Signature] Name & Signature of Engineer : Abhay Singh
 Seal & Date : _____ Date & Place : Jaipur
22/7/24

Notification No.	
Work Order No.	

SERVICE REPORT

CUSTOMER COPY

HIN-M072223554

CUSTOMER DETAILS		INSTRUMENT DETAILS			SERVICE STATUS		
NAME: TATA IMG		MODEL: Yumizen H550			VISITING PURPOSE:		
ADDRESS: 3rd floor JR Plaza		EQUIP. SL. No.: 403YADH07064			<input type="checkbox"/> REPAIR <input type="checkbox"/> DATA ERROR <input checked="" type="checkbox"/> INSTALLATION <input type="checkbox"/> MAINTENANCE <input type="checkbox"/> UPGRADE <input checked="" type="checkbox"/> CUSTOMER TRAINING <input type="checkbox"/> COURTESY VISIT <input type="checkbox"/> DEMO <input type="checkbox"/> OTHERS		
Calkothi, Jaipur		VERSION: 3.2.0.4			<input type="checkbox"/> UPGRADE <input type="checkbox"/> COURTESY VISIT <input type="checkbox"/> DEMO <input type="checkbox"/> OTHERS		
PIN CODE 302015		NOTIFICATION No.	CALL DETAILS	DATE	TIME	CUSTOMER STATUS	
CITY Jaipur		COMPLAINT RECD.	START	18/7/24	2:00 PM		<input type="checkbox"/> R.R <input checked="" type="checkbox"/> WARRANTY <input type="checkbox"/> AMC <input type="checkbox"/> CMC <input type="checkbox"/> DEMO <input type="checkbox"/> FREE SERVICE <input type="checkbox"/> CHARGEABLE CALL <input type="checkbox"/> OTHERS
STATE Rajasthan		COMPLETED	TRAVEL TIME (Eng. 1)	1:40	HOURS		WORKS CARRIED OUT AT
TEL. NO.: 8860007032		TRAVEL TIME (Eng. 2)	DAILY WORKLOAD	80+	HOURS		
CONTACT PERSON: Mr. Lokesh ji							

PROBLEM REPORTED: New Installation & Customer Training.
OBSERVATIONS:

ACTION TAKEN: Done the installation. Run the start-up. Run the Repealability. Done the Validation. Given Customer Training. Instrument working fine.

FOLLOWING PARTS HAVE BEEN REPLACED FOLLOWING PARTS NEED TO BE REPLACED PLEASE APPROVE

PART CODE.	DESCRIPTION (Replaced)	QTY.	COST	TAX	TOTAL

PART CODE.	DESCRIPTION (Trouble Shooting)	QTY.	TOTAL RS.

*Replaced for Trouble Shooting
Need to be returned after Trouble Shooting.

FOLLOW-UP ACTION (Spare need to replaced, if any)

TO BE FILLED IN BY CUSTOMER

FAULT RECTIFIED & INSTRUMENT IS WORKING SATISFACTORILY
 FAULT IS NOT COMPLETED, ENGINEER NEED TO COME AGAIN
 WE HEREBY APPROVE Rs.
 COMMENTS (IF ANY)

ENGINEER'S NAME-1: *Abhay Singh*
SIGNATURE: *[Signature]*
DATE & TIME: 22/7/24

ENGINEER'S NAME-2:
SIGNATURE:
DATE & TIME:

CUSTOMER SIGNATURE: *[Signature]*
NAME:
SEAL: