

# Service Request Form

To schedule Service Request, please **COMPLETELY FILL OUT** this form with supporting documents (photo/video) and email to: [service@800pwrsvc.com](mailto:service@800pwrsvc.com)

**Serial No:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Building Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **Email:** \_\_\_\_\_  
**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_ **Contact Person:** \_\_\_\_\_

**\*Please Completely Fill Out Sections A - E with supporting documents (photo/video) when submitting this form.**

## A. Audible/Visual Symptoms:

1. Pop/Popping/Crackling?	Yes	No	2. Clicks/Chattering/Humming?	Yes	No
3. Buzzing/White-Noise?	Yes	No	4. Burnt parts or components?	Yes	No
5. Exterior damage to the unit?	Yes	No	6. Burnt or burning smell?	Yes	No

## B. Is the environment temperature of the unit, maintained/controlled?

**Yes** **No**

*if "No", what is the unit room temperature? minimum/maximum:*      Min: \_\_\_\_\_ Max: \_\_\_\_\_

1. Is the Unit/System by-passed?	Yes	No	2. Was there a power outage?	Yes	No
3. Has the load changed since Start-Up?	Yes	No	4. Was there a generator test?	Yes	No
If yes, how many amps? _____ Date the load changed: _____					
5. Is there an ATS (Automatic Transfer System) / Generator feeding this unit?			Yes	No	
If yes, is the ATS set up with a 20 millisecond transition time in both directions?			Yes	No	

## C. What was the last known date that the unit functioned?

**Date:** \_\_\_\_\_

## D. Please describe the problem including details/condition leading up to the issue below.

**Will a screenshot be attached?**      Yes      No      *\*Please email attach supporting photo/video of the front panel of the unit with this completed form.*

## E. Acknowledgement of Terms and Conditions

I certify that the symptoms and issues described in this Service Request are accurate and to the best of our knowledge and affirm that the unit has been operated as per the manufacturers specifications required by the manufacturers tech manual. **I understand that additional charges will be incurred if a return trip must be scheduled due to:** Lack of necessary access or the absence of site personnel required to complete effective repairs, failure to disclose equipment status/ condition/damage in this Service Request, unauthorized work are alteration of the unit, load unavailability and any other mitigating factors that require additional parts or service that were not scheduled at this time.

**Name (print):** \_\_\_\_\_ **Company:** \_\_\_\_\_  
**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

<b>Office Use Only</b>	Unit Ship Date:	Start Up Date:
	Start Up Tech:	Service Call Entries:
Notes:		