

SERVICE REPORT

Customer: _____ Contact: _____

Address: _____ Tel. No: _____

Location: _____ Order No: _____

M/c Serial No: _____ Type: _____ Control: _____ Year: _____

Service Training Repair Upgrade Installation

MAINTENANCE CHECK LIST	SERVICE NOTES
STRIP & CLEAN MACHINE <input type="checkbox"/>	
CHECK MACHINE LEVEL & X-Z FUNCTION <input type="checkbox"/>	
CHECK AXIS BRAKING & FINE ADJUSTMENT <input type="checkbox"/>	
CHECK COVER STRIPS IN X & Z AXIS <input type="checkbox"/>	
MOTOR FUNCTION X & Z AXIS TRAVEL <input type="checkbox"/>	
CHECK AIR SERVICE UNIT <input type="checkbox"/> TEST AIR SWITCHES <input type="checkbox"/>	
CHECK SPINDLE FUNCTIONS & CLAMPING <input type="checkbox"/>	
CLEAN ADAPTORS/INSERTS/CALIBRATION BARS <input type="checkbox"/>	
ALIGNMENT <input type="checkbox"/> RUNOUT <input type="checkbox"/>	
RE-CALIBRATED <input type="checkbox"/>	
DATA BACKUP TAKEN <input type="checkbox"/> TEMPERATURE <input type="text"/> °C	
CHECK PROJECTOR OR CAMERA FOR THE FOLLOWING:	
FIXING <input type="checkbox"/> CENTERING <input type="checkbox"/>	
IMAGE <input type="checkbox"/> ILLUMINATION <input type="checkbox"/>	
CLEAN LENS <input type="checkbox"/> FOCUS <input type="checkbox"/>	
CHECK CONTROL SYSTEM FOR THE FOLLOWING:	SPARE PARTS TO BE QUOTED:
MEASUREMENT DISPLAY <input type="checkbox"/> PLUGS/CONNECTORS <input type="checkbox"/>	
CLEAN FILTERS/FANS <input type="checkbox"/> RESET SERVICE LIGHT <input type="checkbox"/>	
TRABANT TYPE MACHINES:	
CHECK ROTARY TABLE <input type="checkbox"/> LIMIT SWITCH <input type="checkbox"/>	

ENGINEER'S SIGNATURE :	CUSTOMER'S SIGNATURE :
DATE :	PRINT NAME :