xerox™

XEROX INDIA LIMITED

INSTALL / DISINSTALL / RESITE / STATUS CHANGE REPORT

MODEL: MCLN: DATE:

CUSTOMER NAME:

INSTAL ADDRESS:

CITY:

STATE :

PIN:

TELEPHONE :

E-MAIL:

CONTACT PERSON:

CUSTOMER GST No.

KEY OPERATOR(S):

*SITE: A B C

CITY TYPE (A / B / C / D / E)

INSTAL COMPLETION DATE H/W :

INSTAL COMPLETION DATE S/W :

	SYMPT.	CAUSE	ACTION
1			
2			

ARRIVAL DATE AND TIME									
D	D	M	M	Y	Y	H	H	M	M
								:	

COMPLETION DATE AND TIME									
D	D	M	M	Y	Y	H	H	M	M
								:	

INSTAL TYPE:

(DF – 01, TD – 02, DI – 03)

LOG BOOK Y N

MACHINE SL. NO.:

INPUT VOLTAGES L - N

N - G

L - G

STAB Y N

UPS Y N

E-Smart Enabled Y N

COMMUNICATING Y N

	A4 METER READING	A3 METER READING
C		
B		

TOTAL READING

ENGR. NO.:

SIGN:

NAME:

FOR ALL PRODUCTS (EXCEPT PS / DPS): THE MACHINE HAS BEEN INSTALLED TO OUR SATISFACTION AND WORKING SATISFACTORILY AND NECESSARY USER TRAINING HAS BEEN PROVIDED

FOR PRINTING AND DOCUMENT PUBLISHING SYSTEMS (PS / DPS): THE SOLUTION IS COMPLETELY OPERATIONAL AND THE BILLING CAN START AS PER AGREED CONTRACT WITH IMMEDIATE EFFECT

CUSTOMER'S SIGNATURE :

CUSTOMER NAME :

DESIGNATION :

DATE :

PRIMARY ENGINEER NAME : *ENGR NO:*

SECONDARY ENGINER NAME: *ENGR NO:*

Verified By : CA Mgr Name: *Sign:*

FORM NO: 140912