

Hanna Equipments (India) Pvt. Ltd.

3/4/5/6, Aum Sai Building, Plot No. 23C, Sector 7, Kharghar, Navi Mumbai - 410210.
Tel: +91-22-27746554 / 55 / 56, **Fax:** +91-22-27746557
Email: tech@hanna-india.com, **Website:** www.hannainst.com/usa
Service Tax Regn: AACCH2670QST001 **VAT TIN:** 27120729904



INSTALLATION/ DEMONSTRATION/ SERVICE REPORT

Company: <u>Indien Immunologicals Ltd.</u> Contact Person: <u>Mr. V. Srinivas</u> Department: <u>production</u> Address: <u>Gacehibowli</u> <u>Hyderabad</u> Tel: _____ E-mail: _____	Instrument: <u>HI 5321-02</u> Type: <u>conductivity</u> Model No.: <u>HI 5321-02</u> Serial No.: <u>03030013</u>	Report No.: <u>2077</u> Installation <input checked="" type="checkbox"/> Demonstration <input checked="" type="checkbox"/> Warranty <input type="checkbox"/> Out of Warranty <input type="checkbox"/> AMC <input type="checkbox"/>																												
Date of visit: _____	Engineer: <u>J. FAYAZ</u>	No. of Days/Hrs.: <u>1</u>																												
Nature of complaint: <u>Installation of HI 5321-02</u>																														
Action taken: <u>Demonstration and calibration done with 84µm, 1413µm, 1288 µm with sample 0.78 will be achieved successfully.</u>																														
Remarks: <u>calibration and installation done successfully.</u>																														
Parts replaced/ required <table border="1" style="width:100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="width:10%;">S. No.</th> <th style="width:50%;">Description</th> <th style="width:15%;">Quantity</th> <th style="width:25%;">Amount</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>	S. No.	Description	Quantity	Amount																									Charges Spares charges: _____ Service charges: _____ Tax: _____ Total: _____	
S. No.	Description	Quantity	Amount																											
Customer remarks: <u>Required calibration certification and instrument installation certification separately. Sat 21.02.18</u>																														
The Demonstration <input checked="" type="checkbox"/> Installation <input type="checkbox"/> Service <input type="checkbox"/> Has been carried out and completed to our satisfaction Customer sign with date: <u>21.02.18</u>	Name of the Engineer: <u>J. FAYAZ</u> Engineer sign with date: _____																													

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