

Eq. Id: B9/MS/120 ; Location: Inactivation - 1



Smart Labtech Pvt. Ltd.

Plot # 75B, SV Co-Op. Industrial Estate, Phase-II, Balanagar, Hyderabad - 500 037, TS, INDIA.
 Phone: +91 40 2377 4310, 2377 4311, Fax: +91 40 2377 4309
 E-mail: info@smartlabtech.net, service@smartlabtech.net, customercare@smartlabtech.net
 Website: www.smartlabtech.net

QSR.No.SLPL/SCR/SR/01

SERVICE REPORT

Service Report No.: 5280	Contact Person: P. Sukumar
Customer Name & Address M/S IIL Grachipowli, Hyd.	Designation: Manager
Purchase Order No. & Date:	Department: HBI - Production, Bq-Block
	Tel No.: 1702 Fax No.:
Login ID No. & Date:	Email ID: psukumar@indimulco.com
	Invoice No. & Date:
	Visit Date: 05/11/2012 Date of Installation: 05/11/2012

Engineer Name: MD. Ishraq	Visit No. I / II / III / IV / V	Start Time:	End Time:
Make & Model	Serial No.	Problem	TYPE OF VISIT
VetD	6032 63	Installation	Warranty <input type="checkbox"/> Courtesy <input type="checkbox"/>
MSL-50			Consignment Verification <input type="checkbox"/> AMC <input type="checkbox"/>
E 2034 05'2			Chargeable <input type="checkbox"/> Calibration <input type="checkbox"/>
			Installation <input checked="" type="checkbox"/> Breakdown <input type="checkbox"/>
			Re-installation <input type="checkbox"/>

OBSERVATION / ACTION TAKEN **Installed & demonstrated to users. equipment working fine. now it's ready to use**

Completion Remarks Pending Reason	Installation completed.	Call Attended Date	Call Closed Date	Status
		05/11/2012	05/11/2012	Open <input type="checkbox"/> Closed <input checked="" type="checkbox"/>

Quality of Service: Excellent Good Average Poor

Customer's Remarks / Feedback Bhadra J Patil	Customer Name / Signature	Engineer Comments / Remarks Ishraq	Engineer Name / Signature
Mobile / Direct No. 1702		Mobile No. 992995568	

REGIONAL OFFICES

VIZAG - 96666 55312
 BENGALURU - 88844 40068
 CHENNAI - 9381206940

Please register your complaints with
OUR CUSTOMER CARE MOBILE: +91 9848 444 907
 Email: customercare@smartlabtech.net

Eq. Id : B91MS/121 ; Location: Inactivation - 1



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 Website: www.smartlabtech.net

QSR.No:SLPL/SCR/SR/01

SERVICE REPORT

Service Report No.: 5283	Contact Person: <i>F. Sukumar</i>
Customer Name & Address <i>M/S IIL</i> <i>Gachibowli, Hyd.</i>	Designation: <i>Manager</i>
	Department: <i>HBT-Production, B9-Block</i>
	Tel No.: <i>1702</i> Fax No.:
	Email ID: <i>fsukumar@indimmune.com</i>
Purchase Order No. & Date:	Invoice No. & Date:
Login ID No. & Date:	Visit Date: <i>05/11/21</i> Date of Installation: <i>05/11/21</i>
Engineer Name: <i>M. S. S. S. S.</i>	Visit No. I/II/III/IV/V
	Start Time: End Time:

Make & Model	Serial No.	Problem	TYPE OF VISIT			
<i>Veip</i>	<i>602785</i>	<i>Installation</i>	Warranty <input type="checkbox"/>	Courtesy <input type="checkbox"/>		
<i>F203A0512</i>			Consignment Verification <input type="checkbox"/>	AMC <input type="checkbox"/>		
			Chargeable <input type="checkbox"/>	Calibration <input type="checkbox"/>		
			Installation <input checked="" type="checkbox"/>	Breakdown <input type="checkbox"/>		
			Re-installation <input type="checkbox"/>			

OBSERVATION / ACTION TAKEN *Installed & demonstrated to user. equipment working fine. Now idq ready to use.*

Completion Remarks	<i>Installation completed</i>	Call Attended Date	<i>05/11/21</i>	Call Closed Date	<i>05/11/21</i>	Status
Pending Reason						Open <input type="checkbox"/> Closed <input checked="" type="checkbox"/>

Quality of Service: Excellent Good Average Poor

Customer's Remarks / Feedback <i>Bhadani J</i> <i>Patil</i>	Engineer Comments / Remarks <i>[Signature]</i>
Customer Name / Signature	Engineer Name / Signature
Mobile / Direct No. <i>1702</i>	Mobile No. <i>7727975568</i>

REGIONAL OFFICES

VIZAG - 96666 55312
 BENGALURU - 88844 40068
 CHENNAI - 9381206940

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Eq. Id: 89/MS/122 ; Location: Inactivation - 1



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 Website: www.smartlabtech.net

QSR.No.SLPL/SCR/SR/01

SERVICE REPORT

Service Report No.: 5282	Contact Person: <i>F. SURESH</i>
Customer Name & Address <i>M/S SIL Gandhibowli, hyd.</i>	Designation: <i>Manager</i>
	Department: <i>HBI-Production, B9 Block</i>
	Tel No.: <i>1702</i> Fax No.:
	Email ID: <i>fsuresh@indimmune.com</i>
Purchase Order No. & Date:	Invoice No. & Date:
Login ID No. & Date:	Visit Date: <i>05/11/21</i> Date of Installation: <i>05/11/21</i>

Engineer Name: <i>MD. Ishaq</i>	Visit No. I / II / III / IV / V	Start Time:	End Time:
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Make & Model	Serial No.	Problem	TYPE OF VISIT			
<i>VELP</i>	<i>603262</i>	<i>Installation.</i>	Warranty <input type="checkbox"/>	Courtesy <input type="checkbox"/>	Consignment Verification <input type="checkbox"/>	AMC <input type="checkbox"/>
<i>MSL-50</i>			Chargeable <input type="checkbox"/>	Calibration <input type="checkbox"/>	Installation <input checked="" type="checkbox"/>	Breakdown <input type="checkbox"/>
<i>F 203 no 512</i>			Re-installation <input type="checkbox"/>			

OBSERVATION / ACTION TAKEN
Installed & demonstrated to user. equipment working fine. now it's ready to use.

Completion Remarks <i>Installation complete.</i>	Call Attended Date <i>05/11/2021</i>	Call Closed Date <i>05/11/2021</i>	Status Open <input type="checkbox"/> Closed <input checked="" type="checkbox"/>
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Quality of Service	Excellent <input checked="" type="checkbox"/>	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Poor <input type="checkbox"/>
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Customer's Remarks / Feedback <i>Bhadra. S Prick</i>	Engineer Comments / Remarks <i>[Signature]</i>
Customer Name / Signature	Engineer Name / Signature
Mobile / Direct No. <i>1702</i>	Mobile No. <i>972995568</i>

REGIONAL OFFICES

VIZAG - 96666 55312
 BENGALURU - 88844 40068
 CHENNAI - 9381206940

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 Website: www.smartlabtech.net

QSR.No.SLPL/SCR/SR/01

SERVICE REPORT

Service Report No.: 5274	Contact Person: <i>P. Sreekumar</i>
Customer Name & Address <i>M/S IIL. Cybercity, Hyd.</i>	Designation: <i>Manager</i>
Purchase Order No. & Date:	Department: <i>IT Production - B4 Block</i>
	Tel No.: <i>1102</i> Fax No.:
Login ID No. & Date:	Email ID: <i>psreekumar@indimmune.com</i>
	Invoice No. & Date:
	Visit Date: <i>05/11/2021</i> Date of Installation: <i>05/11/2021</i>
Engineer Name: <i>M.D. Ishayy</i>	Visit No. I/II/III/IV/V
	Start Time: End Time:

Make & Model	Serial No.	Problem	TYPE OF VISIT			
<i>KEIP</i>	<i>598440</i>	<i>Installation</i>	Warranty <input type="checkbox"/>	Courtesy <input type="checkbox"/>		
<i>MSL-30</i>			Consignment Verification <input type="checkbox"/>	AMC <input type="checkbox"/>		
<i>F20 340512</i>			Chargeable <input type="checkbox"/>	Calibration <input type="checkbox"/>		
			Installation <input checked="" type="checkbox"/>	Breakdown <input type="checkbox"/>		
			Re-installation <input type="checkbox"/>			

OBSERVATION / ACTION TAKEN *Installed and demystified to user. equipment working fine. now it's ready to use.*

Completion Remarks Pending Reason	<i>Installation completed.</i>	Call Attended Date	Call Closed Date	Status	
		<i>05/11/2021</i>	<i>05/11/2021</i>	Open <input type="checkbox"/>	Closed <input checked="" type="checkbox"/>

Quality of Service: Excellent Good Average Poor

Customer's Remarks / Feedback <i>Bhadra. J</i>	Engineer Comments / Remarks <i>[Signature]</i>
Customer Name / Signature	Engineer Name / Signature
Mobile / Direct No.	Mobile No. <i>2729995566</i>

REGIONAL OFFICES

VIZAG - 96666 55312
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QSR.No.SLPL/SCR/SR/01

SERVICE REPORT

Service Report No.: 5275	Contact Person: P. Suckumar
Customer Name & Address M/S IIL Grathi Road, Hyd.	Designation: Manager
	Department: IIS Production, B9-Block
	Tel No.: 1702 Fax No.:
	Email ID: psuckumar@indimune.com
Purchase Order No. & Date:	Invoice No. & Date:
Login ID No. & Date:	Visit Date: 05/11/2021 Date of Installation: 05/11/2021
Engineer Name: MD. Ishaq	Visit No. I/II/III/IV/V
	Start Time: End Time:

Make & Model	Serial No.	Problem	TYPE OF VISIT	
Velp	602790	Installation	Warranty <input type="checkbox"/>	Courtesy <input type="checkbox"/>
MSL-50			Consignment Verification <input type="checkbox"/>	AMC <input type="checkbox"/>
F203A0512			Chargeable <input type="checkbox"/>	Calibration <input type="checkbox"/>
			Installation <input checked="" type="checkbox"/>	Breakdown <input type="checkbox"/>
			Re-installation <input type="checkbox"/>	

OBSERVATION / ACTION TAKEN **Installed & demonstrated to user. equipment working fine.**

Completion Remarks Pending Reason	Installation completed.	Call Attended Date	Call Closed Date	Status
		05/11/2021	05/11/2021	Open <input type="checkbox"/> Closed <input checked="" type="checkbox"/>

Quality of Service: Excellent Good Average Poor

Customer's Remarks / Feedback Whadani J Ponnalle	Engineer Comments / Remarks Dhara
Customer Name / Signature	Engineer Name / Signature

Mobile / Direct No. Mobile No. **7729995568**

REGIONAL OFFICES

VIZAG - 96666 55312
 BENGALURU - 88844 40068
 CHENNAI - 9381206940

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Eq. Id: B9/MS/125 ; Location: Inactivation - 1



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 Website: www.smartlabtech.net

QSR.No.SLPL/SCR/SR/01

SERVICE REPORT

Service Report No.: 5271		Contact Person: <i>F. Sukeumar</i>	
Customer Name & Address <i>MS IIL</i> <i>Gachibowli, hyd.</i>		Designation: <i>Manager</i>	
Purchase Order No. & Date:		Department: <i>HEI Production. E9 Block</i>	
Login ID No. & Date:		Tel No.: <i>1702</i>	Fax No.:
Engineer Name: <i>MS. Ishay</i>		Email ID: <i>Fsukeumar@indimmune.com</i>	
Visit No. I / II / III / IV / V		Invoice No. & Date:	
Start Time:		Date of Installation: <i>05/11/2021</i>	
End Time:			

Make & Model	Serial No.	Problem	TYPE OF VISIT			
<i>VCP</i>	<i>602792</i>	<i>Installation</i>	Warranty	<input type="checkbox"/>	Courtesy	<input type="checkbox"/>
<i>MSL 50.</i>			Consignment Verification	<input type="checkbox"/>	AMC	<input type="checkbox"/>
<i>F203A0512</i>			Chargeable	<input type="checkbox"/>	Calibration	<input type="checkbox"/>
			Installation	<input checked="" type="checkbox"/>	Breakdown	<input type="checkbox"/>
			Re-installation	<input type="checkbox"/>		

OBSERVATION / ACTION TAKEN
Installed & demonstrated to user. equipment working fine. now it's ready to use.

Completion Remarks Pending Reason	<i>Installation completed.</i>	Call Attended Date	Call Closed Date	Status	
		<i>05/11/2021</i>	<i>05/11/2021</i>	Open <input type="checkbox"/>	Closed <input checked="" type="checkbox"/>

Quality of Service	Excellent <input checked="" type="checkbox"/>	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Poor <input type="checkbox"/>
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Customer's Remarks / Feedback <i>Bhadru J</i> <i>Ravice</i>	Engineer Comments / Remarks <i>[Signature]</i>
Customer Name / Signature	Engineer Name / Signature
Mobile / Direct No. <i>1702</i>	Mobile No. <i>77 29 91 556 8.</i>

REGIONAL OFFICES

VIZAG - 96666 55312
 BENGALURU - 88844 40068
 CHENNAI - 9381206940

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Eq. Id: B9/MS/126 ; Location: Inactivation - 1

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 Website: www.smartlabtech.net

QSR.No.SLPL/SCR/SR/01

SERVICE REPORT

Service Report No.: 5270	Contact Person: P. Suktumar
Customer Name & Address M/S IIL. Gachibowli, hyd.	Designation: Manager
	Department: HRD - Production - B9 Block
	Tel No.: 1702 Fax No.:
	Email ID: Psuktumar@indimms.com
Purchase Order No. & Date:	Invoice No. & Date:
Login ID No. & Date:	Visit Date: 05.11.21 Date of Installation: 05.11.21
Engineer Name: MD. J Shary	Visit No. I / II / III / IV / V
	Start Time: End Time:

Make & Model	Serial No.	Problem	TYPE OF VISIT	
Velp	603268	Installation	Warranty <input type="checkbox"/>	Courtesy <input type="checkbox"/>
MS6 50-			Consignment Verification <input type="checkbox"/>	AMC <input type="checkbox"/>
F20340512			Chargeable <input type="checkbox"/>	Calibration <input type="checkbox"/>
			Installation <input checked="" type="checkbox"/>	Breakdown <input type="checkbox"/>
			Re-installation <input type="checkbox"/>	

OBSERVATION / ACTION TAKEN
Installed and demonstrated to user. equipment working fine. now it's ready to use.

Completion Remarks Pending Reason	Installation completed	Call Attended Date 05/11/2021	Call Closed Date 05/11/2021	Status Open <input type="checkbox"/> Closed <input checked="" type="checkbox"/>
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Quality of Service	Excellent <input type="checkbox"/>	Good <input checked="" type="checkbox"/>	Average <input type="checkbox"/>	Poor <input type="checkbox"/>
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Customer's Remarks / Feedback Shadun S Pratik	Engineer Comments / Remarks [Signature]
Customer Name / Signature	Engineer Name / Signature

Mobile / Direct No. 1702	Mobile No. 9129995168
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REGIONAL OFFICES

VIZAG - 96666 55312
 BENGALURU - 88844 40068
 CHENNAI - 9381206940

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 Website: www.smartlabtech.net

QSR.No.SLPL/SCR/SR/01

SERVICE REPORT

Service Report No.: 5276		Contact Person: <i>P. Sukuemar</i>	
Customer Name & Address		Designation: <i>Manager</i>	
<i>M/S IIL</i> <i>Gachibowli, hyd.</i>		Department: <i>HBI Production, B9-Block</i>	
		Tel No.: <i>1702</i>	Fax No.:
Purchase Order No. & Date:		Invoice No. & Date:	
Login ID No. & Date:		Visit Date: <i>05/11/2021</i> Date of Installation: <i>05/11/2021</i>	
Engineer Name: <i>MD. Ishaq</i>	Visit No. I/II/III/IV/V	Start Time:	End Time:

Make & Model	Serial No.	Problem	TYPE OF VISIT	
<i>VELP</i>	<i>603769</i>	<i>Installation</i>	Warranty <input type="checkbox"/>	Courtesy <input checked="" type="checkbox"/>
<i>MSL-50</i>			Consignment Verification <input type="checkbox"/>	AMC <input type="checkbox"/>
<i>E203A0512</i>			Chargeable <input type="checkbox"/>	Calibration <input type="checkbox"/>
			Installation <input checked="" type="checkbox"/>	Breakdown <input type="checkbox"/>
			Re-installation <input type="checkbox"/>	

OBSERVATION / ACTION TAKEN *Installed & demonstrated to user. equipment working fine. now it's ready to use.*

Completion Remarks Pending Reason	<i>Installation completed.</i>	Call Attended Date	Call Closed Date	Status	
		<i>05/11/2021</i>	<i>05/11/2021</i>	Open <input type="checkbox"/>	Closed <input checked="" type="checkbox"/>

Quality of Service: Excellent Good Average Poor

Customer's Remarks / Feedback <i>Binadru I</i> <i>Patil</i>	Engineer Comments / Remarks <i>Ishaq</i>
Customer Name / Signature	Engineer Name / Signature
Mobile / Direct No. <i>1702</i>	Mobile No. <i>7729995568</i>

REGIONAL OFFICES

VIZAG - 96666 55312
 BENGALURU - 88844 40068
 CHENNAI - 9381206940

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Eq. Id: B9/MS/128; Location: Inactivation-1

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 Website: www.smartlabtech.net

QSR.No.SLPL/SCR/SR/01

SERVICE REPORT

Service Report No.: 5278		Contact Person: <i>P.Sukumar</i>	
Customer Name & Address		Designation: <i>Manager</i>	
<i>M/S JIL. Grachibuntli, hyd.</i>		Department: <i>HBT-Production, Ba Block</i>	
		Tel No.: <i>1702</i>	Fax No.:
Purchase Order No. & Date:		Email ID: <i>psukumar@indimmune.com</i>	
Login ID No. & Date:		Invoice No. & Date:	
		Visit Date: <i>05/11/2021</i> Date of Installation: <i>05/11/2021</i>	
Engineer Name: <i>MD. Ishayy</i>	Visit No. I/II/III/IV/V	Start Time:	End Time:
Make & Model	Serial No.	Problem	TYPE OF VISIT
<i>Velp.</i>	<i>605766</i>	<i>Installation.</i>	Warranty <input type="checkbox"/> Courtesy <input type="checkbox"/>
<i>MSE-50.</i>			Consignment Verification <input type="checkbox"/> AMC <input type="checkbox"/>
<i>F20340512</i>			Chargeable <input type="checkbox"/> Calibration <input type="checkbox"/>
			Installation <input checked="" type="checkbox"/> Breakdown <input type="checkbox"/>
			Re-installation <input type="checkbox"/>
OBSERVATION / ACTION TAKEN <i>Installed & demonstrated to user. equipment working fine. now it's ready to use.</i>			
Completion Remarks	<i>Installation completed</i>	Call Attended Date	Call Closed Date
Pending Reason		<i>05/11/2021</i>	<i>05/11/2021</i>
Quality of Service		Status	
Excellent <input checked="" type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Poor <input type="checkbox"/>		Open <input type="checkbox"/> Closed <input checked="" type="checkbox"/>	
Customer's Remarks / Feedback		Engineer Comments / Remarks	
<i>Bhargavi Bricit</i>		<i>Ishayy</i>	
Customer Name / Signature		Engineer Name / Signature	
Mobile / Direct No.		Mobile No. <i>7729995568</i>	

REGIONAL OFFICES

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 CHENNAI - 9381206940

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Eq. Id: B9/MS/129 ; Location: Inactivation-1

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Website: www.smartlabtech.net

QSR.No.SLPL/SCR/SR/01

SERVICE REPORT

Service Report No.: 5277		Contact Person: P. Sukumar	
Customer Name & Address M/S IIL Grachibowli, hyd.		Designation: Manager	
Purchase Order No. & Date:		Department: HBI-Production, B9-Block	
		Tel No.: 1702	Fax No.:
Login ID No. & Date:		Email ID: psukumar@indimmune.com	
Invoice No. & Date:		Visit Date: 05/11/2021 Date of Installation: 05/11/2021	
Engineer Name: MD. Ishaq	Visit No. I/II/III/IV/V	Start Time:	End Time:
Make & Model VELP MCL-50 F203A0512	Serial No. 603265	Problem Installation	TYPE OF VISIT Warranty <input type="checkbox"/> Courtesy <input type="checkbox"/> Consignment Verification <input type="checkbox"/> AMC <input type="checkbox"/> Chargeable <input type="checkbox"/> Calibration <input type="checkbox"/> Installation <input checked="" type="checkbox"/> Breakdown <input type="checkbox"/> Re-installation <input type="checkbox"/>
OBSERVATION / ACTION TAKEN Installed & demonstrated to user. equipment working fine. now it's ready to use.			
Completion Remarks Pending Reason	Installation completed.	Call Attended Date 05/11/2021	Call Closed Date 05/11/2021
Quality of Service		Status	
Excellent <input checked="" type="checkbox"/>		Open <input type="checkbox"/> Closed <input checked="" type="checkbox"/>	
Good <input type="checkbox"/>		Average <input type="checkbox"/>	
Poor <input type="checkbox"/>			
Customer's Remarks / Feedback Thanks I Naile		Engineer Comments / Remarks [Signature]	
Customer Name / Signature		Engineer Name / Signature	
Mobile / Direct No. 1702		Mobile No. 994995568	

REGIONAL OFFICES

VIZAG - 96666 55312
BENGALURU - 88844 40068
CHENNAI - 9381206940

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Eq. Id: B9/MS/130 ; Location: Inactivation-1



Smart Labtech Pvt. Ltd.

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 Website: www.smartlabtech.net

QSR.No.SLPL/SCR/SR/01

SERVICE REPORT

Service Report No.: 5273	Contact Person: <i>P. Subhakar</i>
Customer Name & Address <i>M/S IIL Gachibowli, Hyd.</i>	Designation: <i>Manager</i>
Purchase Order No. & Date:	Department: <i>HEJ-Production - Bq. Block</i>
	Tel No.: <i>1702</i> Fax No.:
Login ID No. & Date:	Email ID: <i>Psubhakar@indimune.com</i>
Invoice No. & Date:	Visit Date: <i>05/11/21</i> Date of Installation: <i>05/11/21</i>
Engineer Name: <i>MD. Ishaq</i>	Visit No. I/II/III/IV/V Start Time: End Time:

Make & Model	Serial No.	Problem	TYPE OF VISIT	
<i>Velp</i>	<i>603264</i>	<i>Installation</i>	Warranty <input type="checkbox"/>	Courtesy <input type="checkbox"/>
<i>NSL-50</i>			Consignment Verification <input type="checkbox"/>	AMC <input type="checkbox"/>
<i>F203A00512</i>			Chargeable <input type="checkbox"/>	Calibration <input type="checkbox"/>
			Installation <input checked="" type="checkbox"/>	Breakdown <input type="checkbox"/>
			Re-installation <input type="checkbox"/>	

OBSERVATION / ACTION TAKEN
Installed & calibrated the velp equipment working fine. Now it's ready to use

Completion Remarks Pending Reason	<i>Installation completed.</i>	Call Attended Date	Call Closed Date	Status
		<i>05/11/21</i>	<i>05/11/21</i>	Open <input type="checkbox"/> Closed <input checked="" type="checkbox"/>

Quality of Service: Excellent Good Average Poor

Customer's Remarks / Feedback <i>Bhadani J</i>	Engineer Comments / Remarks <i>Subhakar</i>
Customer Name / Signature <i>P. Naik</i>	Engineer Name / Signature
Mobile / Direct No.	Mobile No. <i>7729995568</i>

REGIONAL OFFICES

VIZAG - 96666 55312
 BENGALURU - 88844 40068
 CHENNAI - 9381206940

Please register your complaints with
OUR CUSTOMER CARE MOBILE: +91 9848 444 907
 Email: customercare@smartlabtech.net

Eq. Id: BA/MS/131; Location: Inactivation-1



Smart Labtech Pvt. Ltd.

Plot # 75B, SV Co-Op. Industrial Estate, Phase-II, Balanagar, Hyderabad - 500 037, TS, INDIA.
 Phone: +91 40 2377 4310, 2377 4311, Fax: +91 40 2377 4309
 E-mail: info@smartlabtech.net, service@smartlabtech.net, customercare@smartlabtech.net
 Website: www.smartlabtech.net

QSR.No.SLPL/SCR/SR/01

SERVICE REPORT

Service Report No.: 5272		Contact Person: F. SURESH	
Customer Name & Address MS IIL Graclibawall. Hyd.		Designation: Manager	
Purchase Order No. & Date:		Department: HBI-Production. B9 Block	
		Tel No.: 1502	Fax No.:
Login ID No. & Date:		Email ID: Perukumar@indivimune.com	
Invoice No. & Date:		Visit Date: 05/11/2021 Date of Installation: 05/11/2021	
Engineer Name: MD. Ishaq	Visit No. I/II/III/IV/V	Start Time:	End Time:
Make & Model	Serial No.	Problem	TYPE OF VISIT
Velp	602788	Installation	Warranty <input type="checkbox"/> Courtesy <input type="checkbox"/>
MSL-50			Consignment Verification <input type="checkbox"/> AMC <input type="checkbox"/>
F20340512			Chargeable <input type="checkbox"/> Calibration <input type="checkbox"/>
			Installation <input checked="" type="checkbox"/> Breakdown <input type="checkbox"/>
			Re-installation <input type="checkbox"/>
OBSERVATION / ACTION TAKEN Installed & demonstrated to user. Equipment working fine. Now it's ready to use.			
Completion Remarks Pending Reason	Installation completed.	Call Attended Date 05/11/2021	Call Closed Date 05/11/2021
Quality of Service		Status	
Excellent <input checked="" type="checkbox"/>	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Poor <input type="checkbox"/>
Customer's Remarks / Feedback Bhadra J Perlaile		Engineer Comments / Remarks Perlaile	
Customer Name / Signature		Engineer Name / Signature	
Mobile / Direct No.		Mobile No. 2229995568	

REGIONAL OFFICES
 VIZAG - 96666 55312
 BENGALURU - 88844 40068
 CHENNAI - 9381206940

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 Email: customercare@smartlabtech.net

Eq. Id: B9/MS/132; Location: Tractivation-2



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 E-mail: info@smartlabtech.net, service@smartlabtech.net, customercare@smartlabtech.net
 Website: www.smartlabtech.net

QSR.No.SLPL/SCR/SR/01
5279

SERVICE REPORT

Service Report No.:	Contact Person: <i>P. Subraman</i>
Customer Name & Address:	Designation: <i>Manager</i>
<i>MIS I I L.</i> <i>Gachibowli, Hyd.</i>	Department: <i>HBI-Production, Bq. Clock</i>
	Tel No.: <i>1702</i> Fax No.:
	Email ID: <i>P. Subku</i>
Purchase Order No. & Date:	Invoice No. & Date:
Login ID No. & Date:	Visit Date: <i>05/11/21</i> Date of Installation: <i>05/11/21</i>

Engineer Name: <i>MD. Ishaq</i>	Visit No. I / II / III / IV / V	Start Time:	End Time:
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Make & Model	Serial No.	Problem	TYPE OF VISIT	
<i>Velp</i>	<i>603267</i>	<i>Installation</i>	Warranty <input type="checkbox"/>	Courtesy <input type="checkbox"/>
<i>MSL-50</i>			Consignment Verification <input type="checkbox"/>	AMC <input type="checkbox"/>
<i>F20340512</i>			Chargeable <input type="checkbox"/>	Calibration <input type="checkbox"/>
			Installation <input checked="" type="checkbox"/>	Breakdown <input type="checkbox"/>
			Re-installation <input type="checkbox"/>	

OBSERVATION / ACTION TAKEN *Installed & demonstrated to user. equipment working fine. now it's ready to use.*

Completion Remarks Pending Reason	<i>Installation completed</i>	Call Attended Date	Call Closed Date	Status	
		<i>05/11/2021</i>	<i>05/11/2021</i>	Open <input type="checkbox"/>	Closed <input checked="" type="checkbox"/>

Quality of Service	Excellent <input checked="" type="checkbox"/>	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Poor <input type="checkbox"/>
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Customer's Remarks / Feedback	Engineer Comments / Remarks
<i>Bhadra. J</i> <i>B. Naik</i>	<i>Ishaq</i>
Customer Name / Signature	Engineer Name / Signature
Mobile / Direct No. <i>1702</i>	Mobile No. <i>9929995568</i>

REGIONAL OFFICES

VIZAG - 96666 55312
 BENGALURU - 88844 40068
 CHENNAI - 9381206940

Please register your complaints with
OUR CUSTOMER CARE MOBILE: +91 9848 444 907
 Email: customercare@smartlabtech.net

Reg. Id: B9/MS/133; Location: Inactivation-2



Smart Labtech Pvt. Ltd.

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 Website: www.smartlabtech.net

QSR.No.SLPL/SCR/SR/01

SERVICE REPORT

Service Report No.: 5281	Contact Person: <i>P. SUKUMAR</i>
Customer Name & Address <i>MIS IIL</i> <i>Gachibowli, hyd.</i>	Designation: <i>Manager</i>
Purchase Order No. & Date:	Department: <i>HED - Production, B9 Block</i>
	Tel No.: <i>1702</i> Fax No.:
Login ID No. & Date:	Email ID: <i>psukumar@indimune.com</i>
Engineer Name: <i>P. D. Ishay</i>	Invoice No. & Date:
Visit No. I / II / III / IV / V	Visit Date: <i>05/11/21</i> Date of Installation: <i>05/11/2021</i>
Start Time:	End Time:

Make & Model	Serial No.	Problem	TYPE OF VISIT			
<i>Velp</i>	<i>598441</i>	<i>Installation</i>	Warranty <input type="checkbox"/>	Courtesy <input type="checkbox"/>	Consignment Verification <input type="checkbox"/>	AMC <input type="checkbox"/>
<i>MSL-50</i>			Chargeable <input type="checkbox"/>	Calibration <input type="checkbox"/>	Installation <input checked="" type="checkbox"/>	Breakdown <input type="checkbox"/>
<i>R20340512</i>			Re-installation <input type="checkbox"/>			

OBSERVATION / ACTION TAKEN
Installed & demonstrated to user. equipment working fine. now it's ready to use.

Completion Remarks Pending Reason	<i>Installation completed.</i>	Call Attended Date	Call Closed Date	Status	
		<i>05/11/21</i>	<i>05/11/21</i>	Open <input type="checkbox"/>	Closed <input checked="" type="checkbox"/>
Quality of Service	Excellent <input checked="" type="checkbox"/>	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Poor <input type="checkbox"/>	

Customer's Remarks / Feedback <i>Bhadra J</i> <i>P. S. I</i>	Engineer Comments / Remarks <i>[Signature]</i>
Customer Name / Signature	Engineer Name / Signature
Mobile / Direct No. <i>1702</i>	Mobile No. <i>7729995568</i>



VIZAG - 96666 55312
 BENGALURU - 88844 40068
 CHENNAI - 9381206940

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