

1600 Sunshine Drive, Clearwater, FL 33765  
 Tel (727) 573 – 1900, Fax (727) 573 – 1803

## Request for On-Site Services

When requesting on-site services please complete the following and return by fax to Phasetronics/Motortronics along with a copy of your purchase order to 800-548-4104.

|  | COMPANY REMITTING PAYMENT TO<br>PHASETRONICS / MOTORTRONICS | WORK SITE INFORMATION |
|--|---|-----------------------|
| Company Name   |   |                       |
| P.O. Number (REQUIRED)   |   |                       |
| Address  |   |                       |
| City   |   |                       |
| State  |   |                       |
| Zip  |   |                       |
| Person Requesting Service  |   |                       |
| Point of Contact   |   |                       |
| Phone Number   |   |                       |
| Fax Number   |   |                       |
| *Service Start Date & Time   |   |                       |
| Service End Date & Time  |   |                       |
| A formal report can be provided upon completion at a cost of \$350.<br>Do you require a formal report? |   |                       |

\*We will do our best to accommodate your requested times whenever possible.

|                            |  |
|----------------------------|--|
| Equipment Model            |  |
| Equipment Serial Number    |  |
| Original PO or Invoice No. |  |
| Application                |  |

Please describe in as much detail as possible the reason(s) on-site services are requested. Please include symptoms, fault codes, etc. that have been observed. Be sure to advise of any site specific requirements.:

Authorized Representative, required (must have authority to approve service request):

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Company: \_\_\_\_\_ Title: \_\_\_\_\_

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

\*Services are billable at our published rate, please request a copy. Delays in work that are not the fault of Phasetronics/Motortronics are billable at published rates.\*

### INTERNAL OFFICE USE ONLY:

Travel Approved By: \_\_\_\_\_ Dated: \_\_\_\_\_

Service Eng.: \_\_\_\_\_ Scheduled/Confirmed Dates of Travel: \_\_\_\_\_