

REQUEST FOR START-UP SERVICE

To Be Complete By Electrical Contractor or Requester

Please Email Completed Form to servicesupport@isolite.com

Serial #: _____ **Model #:** _____ **Qty:** _____

Job Site Name: _____ **Invoice #:** _____

Installed Address: _____

Distributor: _____ **P.O. #:** _____

Electrical Contractor: _____ **Tel:** _____

Person To Contact: _____ **Tel:** _____

Manufacturer's Rep: _____ **Tel:** _____

Owner Representative: _____

Date Service Is Requested: _____

The initial start-up date will be determined by Isolite in consideration to the date request, technician availability and geographical conditions. This date will be confirmed by the Isolite service department up to 48 hours before arriving at the job site.

TO ENSURE THE INSTALLATION IS COMPLETE AND READY FOR START-UP SERVICE PLEASE REVIEW AND CHECK THE FOLLOWING CONDITIONAL REQUIREMENTS:

- 1. Physical installation is complete, including the installation of batteries in their designated location according to the battery layout.
- 2. Electrical connections have been made (both input and output) to the system and all loads are hooked up and ready to have power applied.
- 3. Owner representative named above has been notified and will be present for instruction and training during start-up.

WE HEREBY ACKNOWLEDGE THE ABOVE REQUIREMENTS PRIOR TO START-UP AND ACCEPT AND HEREIN AUTHORIZE ANY ADDITIONAL EXPENSES (INCLUDING ADDITIONAL SITE VISITS) INCURRED SHOULD THE EQUIPMENT NOT BE FOUND COMPLETE AND READY FOR START-UP, AT THE DETERMINATION OF THE ISOLITE FIELD TECHNICIAN.

Signed: _____ **Position:** _____ **Date:** _____