

REQUEST FOR MAINTENANCE

To Be Completed By Electrical Contractor or Requester

Please Email Completed Form to servicesupport@isolite.com

**Indicates a Required Field*

Job Name*: _____ Serial Number*: _____ Qty*: _____
 Job Site Address*: _____ City*: _____ State*: _____ Zip*: _____
 Requester Full Name*: _____ Company Name*: _____
 Phone Number*: _____ Email Address*: _____

SCHEDULER INFORMATION

Same As Requester

Scheduler Full Name*: _____ Company Name*: _____
 Scheduler Phone Number*: _____ Scheduler Email Address*: _____
 Requested Maintenance Date & Time: _____

Additional Scheduling Contact: *Please Provide Name, Number & Email Address*

Additional Project Information:

To ensure the installation is complete and ready for start-up service please review and check the following conditional requirements:

1. What is the current state of the inverter(s)?

Normal Operation

Alarm/Fault Present

Bypassed/Not Operational

2. Have there been any faults or triggered alarms with the inverter's operation? If yes, please list.

No

Yes

3. During Maintenance service, individual Unit(s) may require up to 1 hour of down time. If a unit is not equipped with a bypass switch, emergency loads will be deenergized.

I acknowledge the potential for deenergization of emergency loads on the inverters during maintenance.

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

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