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Injection Machine Service Request Form

REQUIRED INFORMATION	*Customer Name *Date
	*Contact Name *Phone Number
	RFQ# or PO # *Email address
	*Machine Serial number
MACHINE PROBLEM	Date Problem began
	Machine operational Machine down (Urgent!) Service Call being requested
	*Enter a detailed description of the machine issue here
	Describe machine issue in detail starting with recent activities that led up to this request.
	Troubleshooting Information (Check all that apply) Cycle will not start, platen doesn't close Cycle completes but no pattern present Cycle doesn't complete(provide details above) Temperature doesn't match setpoint Cycle will not start, platen closes but nozzle not extended Cycle completes but poor quality pattern created Smart Machines with Operator Terminal "list active alarms" Wax or ceramic leak
	Preventative maintenance request Request Date
OTHER REQUEST	Maintenance contract request
	Training request-Operator, Technician, Maintenance, etc
	Process Optimization / application support
	Machine improvement (Provide detailed description below)
	Detailed comments here.

^{*} Required field