KEYENCE

CUSTOMER REPAIR REQUEST FORM

2019.09.04-Vers. 1.03

Mandatory Field Mandatory Field Mandatory Field Mandatory Field

Name: Company:

Address: City: Post code:

Email: Phone:

Technical contact person: Email:

Have you tried troubleshooting with Keyence tech support? ☐ No ☐ Yes ->Name:

Have you tried troubleshooting with with Keyence sales? ☐ No ☐ Yes ->Name:

1. **Repair Request Type** Calibration — Select from drop down menu
2. **Problem Frequency** — For example sporadically, continuously, once
3. **Item Information**

Keyence Model Name	Quantity	Serial#

4. **Symptoms Description(include any Error Codes)/Additional Information**

If the unit is judged as unrepairable after inspection, should it be discarded? ☐ Discard ☐ Return

Is a temporary replacement unit needed? ☐ Yes ☐ No
- We will contact you in case there is no replacement unit available

Is an express shipment for the temporary replacement unit needed? ☐ Yes ☐ No
-We will contact you regarding delivery time and costs

Sales Engineer or Technical support staff may contact you to ask for more information about the conditions below.

5. **Conditions of Problem**

Period of use: ☐ Immediately after first time connecting ☐ Within a month ☐ Within one year ☐ One year or more

Are there other products that display the same symptom? ☐ No ☐ Yes

6. **Conditions of Use**

Environment (Multi select OK): ☐ Water ☐ Hot Water ☐ Detergent ☐ Vibrations ☐ Dust ☐ Mist ☐ Cleaning agent ☐ Fluid/Debris spray around the machine ☐ Oil ☐ Clean environment

Ambient temperature: °C