

Pump Inspection Report
(To be completed upon return to Plastica)

Customer Account Number:	Customer Name:
Date:	RMA:
Sales Order Number:	

Section 1 - To be completed by Returns Department

Problem Reported:	
Call reported by:	Make: Argonaut
Date:	Model:
Serial Number:	
Notes:	

Section 2 – To be completed by Pump Department

Condition of Pump and Defects Found:	
Components Required for Repair:	
Engineer's Signature:	
Print Name: Date:	

Section 3 – To be completed by Production Department

Status after service:	✓ <input type="checkbox"/>	Complete	<input type="checkbox"/>	Under observation
	<input type="checkbox"/>	Incomplete	<input type="checkbox"/>	Working solution provided
	<input type="checkbox"/>	Pending for spares		
Production decision:				
Print Name: Date:				
Signature:				