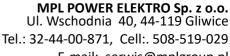


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FIELD FAILURE FORM							
	MPL CUS	TOMER INFORMATI	ORMATIONS				
Company name :							
Company address:							
Contact person:	ontact person:		Phone:		E-mail:		
	END	CUSTOMER INFORMATIONS (If different than MPL			Customer	r)	
Company name :							
Company address:							
Contact person:		Phone:			E-mail:		
Return address:			-				
Scope Type of Evidences					De	escription / Remark	
PRODUCT GENERAL INFORMATIONS							
1. Date of failure:							٦
2. Date of customer report:							=
3. Part No.:							=
4. Serial Number:							
5. Failure Symptom:		No Uout Uout of Range (please describe)					
6. DC LED signal status during fail:		LED doesn't turn on LED blinks					
7. Condition before fail:		First turn on then fail Operating then fail Other (please describe)					
OPERATING CONDITIONS							
8. Type of Input Voltage:		1 Phase 2 Phase	e 🗌 3 Phase 🗌 DC				
9. Operating Input Voltage:		□ 100-120VAC □ 200-240VAC □ 400-500VAC □ 0ther (please describe)					
10. Operating Input Condition:		Continous Operating Voltage					
11. Operating Ambient Temperature:		<25C					
12. Installation location:		Cabinet Stand Alone Other (please describe)					



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