FAULTY REPORT FORM

*Compulsory information required Contact Details: *(please refer to Privacy Statement at end of the page) **System Details:** Installation Company: Contact Number: End User Full Name: Address: Suburb: State and Postcode Contact Number: Email: Installation Date:* Date of the Fault:* Faulty Product:* Tax Invoice / Receipt * (e.g. Panel or Inverter) Inverter Brand and Panel Brand and Model:* Model:* Panel Quantity: Inverter Quantity:* System Size (DC): Inverter Output (AC): Is it Battery Connected? No. String(s): (Y/N) Panel Orientation: No. Panel per String(s): Preferred Installer: Company Name: Delivery Address: Contact Person and Number:

Fault Details:*		
Please follow below Checklist before sending out the form to us:		
Fault Description (error code or message):		
Claiming for (Tick One):	Credit	Replacement
Serial No. of the Product (s):*		
Items:	Checked (Y/N)	Values (if applicable)
PV Module/Array String Open Voltage (DC) PV Module/Array String Operating Voltage (DC) AC Voltage (at AC plug not commissioned)		
All DC Isolators ON		
All AC Isolators ON		
All AC Circuit Breakers ON		
Photos taken for below:* - Defective area(s) or Error Message - Product Label and Serial Numbers (all) - Switchboard with all switches - Serial Numbers of all Products Claiming - Inverter showing all wiring and setup		