



Fibar Group S.A.
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 Poland
 www.fibaro.com

SERVICE REPORT

Date sent

Date received

RMA number
nr /month/year

CUSTOMER

First and last name.....
 Company name ..
 Company Address ..
 Telephone number ..
 e-mail ..

PLACE OF PURCHASE (please attach invoice or receipt copy)

Company Name ..
 Address ..
 Purchase date ..

PRODUCT DETAILS

SERVICE DIAGNOSIS (filled by service team)

MODEL:

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SN:

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RECOMMENDATIONS (filled by service team)

ADDITIONAL EQUIPMENT SENT

AC adapter YES NO
 LAN cable YES NO

Other:

FAILURE DESCRIPTION

(details)

VISIBLE MECHANICAL DAMAGE
 (cracks, deformations etc.)

Fault details

Can't turn on	<input type="checkbox"/> Short circuit on terminals	<input type="checkbox"/> All diodes blinking
Can't turn off	<input type="checkbox"/> Can't communicate with HC	<input type="checkbox"/> All diodes black
Turning off	<input type="checkbox"/> Can't configure	<input type="checkbox"/> All diodes lit
Hanging	<input type="checkbox"/> Can't go to recovery mode	<input type="checkbox"/> Can't add to HC
Can't control out O1 O2	<input type="checkbox"/> Can't recover from backup	<input type="checkbox"/> Damaged casing

ADDITIONAL COMMENTS

INFORM ME ABOUT REPAIR COSTS

YES NO
 Top cost limit ..
 Send estimate cost e-mail address.....

INVOICE DATA

Company Name.....
 Street, number ..
 Post code, city ..
 VAT ..
 Telephone number ..

I authorize the service team to attempt lost data recovery YES NO

I have been informed that lost data may not be recovered. Moreover, during the service process some data can be lost, so it's my responsibility to copy all settings and data from my Home Center 2 by creating backup files regularly.

Lack of required documentation needed to verify the warranty process, or fault description can increase service duration, or be a reason for returning the item(s) without any action performed. Costs of return shall be borne by the customer.

.....
service member signature

.....
customer signature