



RMA#: \_\_\_\_\_

# ACDR RMA WARRANTY/REPAIR INSPECTION REQUEST FORM

Required Fields are marked with \* to avoid delay in processing your request please complete these fields. Please send by e-mail to: **x-fea-acdr\_rma@fujielectric.com** or fax to: 510-440-1063

\*Date: \_\_\_\_\_

1. \*Company Information

Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Contact Person: \_\_\_\_\_  
e-mail: \_\_\_\_\_

2. \*Return Address: \_\_\_\_\_

3. \*Shipping Carrier Account # (in case of out of warranty): \_\_\_\_\_

4. \*Inverter Type: \_\_\_\_\_ 5.\*Serial No: \_\_\_\_\_

6. Purchased From: \_\_\_\_\_

7. \*Date of Purchase: \_\_\_\_\_

8a.\*P.O. Number: \_\_\_\_\_ &/or 8b. \*Fuji Electric Invoice Number: \_\_\_\_\_

9.\*Date of Trouble: \_\_\_\_\_

10.\*Trouble Description \_\_\_\_\_

11.\*Trouble Condition: :Power Turned On :Accel : Decel. : Other \_\_\_\_\_

12. Frequency of Trouble: \_\_\_\_\_ 13. \*Alarm Display: \_\_\_\_\_

14.Charge LED: : On :Off 15. Operation Time: \_\_\_\_\_

16. Input Line Voltage L1-L2 \_\_\_\_\_ L2-L3 \_\_\_\_\_ L3-L1 \_\_\_\_\_

17. Motor Manufacturer: \_\_\_\_\_ HP \_\_\_\_\_ RPM \_\_\_\_\_ V \_\_\_\_\_ Amp \_\_\_\_\_

18. DCR Installation: :No :Yes

19. ACR Installation : No : Yes

20a. Ambient Temp.: \_\_\_\_\_ °F 20b. ACDR Installed in the Panel: :No :Yes

21. Contamination : : No : Yes / Description \_\_\_\_\_

22. Motor Filter Installed: : No : Reactor : Sine : dV/dT

23. Output Main Contactor: : No : Yes

24. \*Option Card: : No : Yes Yes, what type: \_\_\_\_\_

25. Control Terminals Used: \_\_\_\_\_

26. Note: \_\_\_\_\_

**Ship to Address:**

**Fuji Electric Corp. of America** 47520 Westinghouse Dr., Fremont, CA 94539 TEL 510-440-1060 FAX 510-440-1063

Note: RMA Number expires if product is not received within 30 days of issuance of RMA number