

In event of a product malfunction, please complete the error list and attach it to the product or send it to service@kessler-group.biz. An incomplete error list may lead to delays in the repair process.

Customer data of end customer:

Company	
Street	
ZIP Code / City	
Country	
Phone	
E-Mail	
Technician name	
Product removal date	
Machine name	
Machine serial number	
Component serial number	

Product data:

KESSSLER serial number (see type plate)	
Machine operating hours	
Product operating hours	
Number of clamping cycles	
Number of shift operations	<input type="checkbox"/> 1/Shift <input type="checkbox"/> 2/Shift <input type="checkbox"/> 3/Shift <input type="checkbox"/> 3+/Shift
Main operating speed range (rpm)	
Operating mainly with internal cool lubricant?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Customer's range of parts (material)	<input type="checkbox"/> Steel <input type="checkbox"/> Cast Iron <input type="checkbox"/> Plastics. <input type="checkbox"/> Aluminium <input type="checkbox"/> Others: _____
Tool balanced	<input type="checkbox"/> Yes <input type="checkbox"/> No
Initial product start-up	<input type="checkbox"/> At Facility (OEM) <input type="checkbox"/> At Customer Date: _____
Serial number change (replacement product)	Number: _____ Date: _____

Please check the applicable error descriptions:

Customer complaint <input type="checkbox"/> Yes <input type="checkbox"/> No	Is component checked at FK? <input type="checkbox"/> Yes <input type="checkbox"/> No
Disassembly complaint <input type="checkbox"/> Yes <input type="checkbox"/> No	Is it a component of the spindle? <input type="checkbox"/> Yes <input type="checkbox"/> No
Tool clamping system	Release unit <input type="checkbox"/> oil <input type="checkbox"/> air <input type="checkbox"/> oil/air
<input type="checkbox"/> drawing-in force spindle <input type="text"/>	<input type="checkbox"/> pressure drop per minute <input type="text"/>
<input type="checkbox"/> rated drawing-in force before delivery <input type="text"/>	<input type="checkbox"/> operating pressure / max. hydraulic pressure <input type="text"/>
<input type="checkbox"/> rated drawing-in force during the incoming test <input type="text"/>	Rotary union
<input type="checkbox"/> number of strokes / load changes <input type="text"/>	<input type="checkbox"/> number of load changes <input type="text"/>
<input type="checkbox"/> number of tool changes <input type="text"/>	<input type="checkbox"/> used medium <input type="text"/>
Clamping set	<input type="checkbox"/> used filter for internal tool coolant (IKZ) <input type="text"/>
<input type="checkbox"/> number of load changes <input type="text"/>	<input type="checkbox"/> flow rate / maximum pressure <input type="text"/>
State of lubrication <input type="checkbox"/> good <input type="checkbox"/> bad	
Degree of contamination <input type="checkbox"/> low <input type="checkbox"/> high	

Detailed failure description / provided components / other:
