

Service Report/
Request No.

ENTURI DOOR SERVICE REPORT

remaxTM
DOORS

CUSTOMER:	
ADDRESS:	
SITE CONTACT:	

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DOOR MAKE: Enturi EN35 / EN55	DATE OF SERVICE:
CYCLE COUNTER:	SITE No. / LOCATION:
SERIAL (PRODUCTION) NUMBER:	

	SCHEDULE	ASSESSMENT				COMMENTS
		A	B	C	D	
1.	GFA Bluetooth dongle read-out					
2.	Head Bracket Inspection; Rails, Folding panels, Box Rods - Damage, bending, correct attachment to the floor. Clean if external conditions cause dirt to get into the tracks.					
3.	Lube Tracks and Rollers – Head Bracket tracks, leg tracks, all orange rollers. Make sure rollers and tracks are running smooth. Check for noisy operation.					
4.	Check Fastening points – rails to wall, motor fixing points, and bracing fixing points					
5.	Bearing rollers/Top and drop arms/end caps - Correct attachment, wear and tear					
6.	Return pulleys - Bearings, smooth running, damage to pulleys, attachment points					
7.	Cable - Check for loose wires, fraying, cracks, cuts, fluff formation, rupture, kinks, twists and attachment points at the drum and on the underside of the foot plates. Check tension.					
8.	Seals - Check for damage and for correct sealing of the lintel beam and side seals.					
9.	Motor - Attachment points, spline attachment to the shaft. Check for correct functioning and correct end contact settings. Check all electrical accessories, e.g. the slack cable switch.					
10.	Check Fall safety device, cable slack device and hand chain operator.					
11.	Limits – Check correct sealing at floor. Check cables are tight when closed. Check tension (white roller).					
12.	Level – Check level with laser, adjust if required.					
13.	Door leaf - Attachment of hinges and parkers between panels.					
14.	Check Light Curtain/PE Beam operation (if fitted)					
15.	Check activations. Adjust sensitivity if required.					Activation type:
16.	Run-test door. Check operation					

ASSESSMENT KEY: A= In good order B= Worn but serviceable C= Attention req'd - next service D= Urgent attention req'd

General Observation: _____

DATE:	TIME:	Start:	Finish:	Travel:	Total service time:
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TECHNICIAN NAME: _____

TECHNICIAN SIGNATURE: _____

Acknowledgement:

Client/operator acknowledges that this equipment has been serviced and adjusted to suit required operations. Any changes in settings or operation after this date will be at the expense of the client/operator, except for any works carried out under our standard warranty.

CLIENT NAME: _____

CLIENT SIGNATURE: _____