SKIPPER Electronics AS

SKIPPER DATA BULLETIN		*Number*	SDBGEN_02
For System	Service	*Date*	23.9.09
Serial from / to		*Author*	PC

Standard Forms

The following forms may be used as is, or the information integrated into other forms. These are also available on the www.skipper.no , including this information will ensure an efficient flow through the SKIPPER service system.

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Installation report

(Required to get full warranty)

Phase 0: Installation	
WO Nr:	
Original Order number for parts:	
Date	

Installer* Name company name: email address:		For*: Vessel name/ Build Nr/ IMO Nr	
Part Nr **Display** (GDS101C-SA , DL850N27-SA etc) **Electronic unit** (e.g. DL850T27-SB, JB60N2-SA…) **Sensor** (e.g. EML224S-SA, ETN050T) **Bottom parts** (e.g. ETNSLB, SD60-SB …) **Repeaters**		**Serial Nr** **Display** (DOU-.. SK… 10..) **Electronic unit** (DT-… SK…) **Sensor** **Bottom parts** **Repeaters**	

System Tested in water - Comments

Screen photos / attached

Status Screen [ ]   Diagnostics screen [ ]
Screen 8   Screen 9

Approved:

Sea test performed(All units)
Calibration Values (Speed log):
Angle:
Real Speed:
Measured Speed:

Approved:

System seen working and approved by
NAME:

Sign:

All parts must be filled in
Return this form to support@skipper.no or fill in on web www.skipper.no or fax +47 23302271

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# Support Question		*Phase 1: Diagnostic*	
		SKIPPERid:	To follow
		Date	

Request from: *Email* *Phone:*		**For**: *Vessel name:* *Vessel phone:*	

System:	SKIPPER part number:			
	Serial numbers:			
	Approx installation date:			
Warranty?	Yes / No			

Fault description:

Diagnostic guide available in service area of www.skipper.no

Actions already performed:

Conditions:
This form should be completely filled in and sent to support@skipper.no you will automatically be assigned a SKIPPERid: number which must be used for all subsequent correspondence.

Work order

A Phase 2 Work order, should always contain the following information
Customers Work order/purchase order number
SKIPPERId
Date
Billing instructions if not the work order itself
Vessel name
Next port (at least 4 days)
ETA, ETD
Agents details
Shipping deatails for spares
Warranty request?
Request details (problem details)
And also contain as much of the following information as possible
What is already attempted , previous service reports
Alternatively the following form can be used

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WORK ORDER for correction of SKIPPER Equipment

Phase 2: Service request from Customer

WO Nr:	
SKIPPERid	
Date	

Request from: Name company name: email address:			For: Vessel name: Vessel phone:		
Billing: SKIPPER and its network should invoice the following. (No entry means the WO request owner receives all invoices.)	Replacement parts:		**Next port:** ETA/ETD: Agent details:		
	Travel:		System:	SKIPPER part number:	
	Time:			Serial number:	
Warranty?	Yes / No				

Fault description:

Diagnostic guide available in service area of www.skipper.no

Actions already performed:

Parts needed:

Conditions:
Return materials: Any replacement parts will be sent and invoiced as instructed above, If within the warranty period, The faulty parts should be sent back to SKIPPER and upon approval will be credited to the original order. In addition any work hours on board ship will also be credited.

This form should be completely filled in and sent to request@skipper.no you will automatically be

Service reports

Service reports from the SKIPPER Network must include the following:

SKIPPERId
Date
Vessel name
Service company and contact
Serial number:
Part number(s):
Fault description
Work performed

Problem solved ?

Parts used:
Billing info:
   Hours used for
     Work on board
     Travel/waiting
   Other costs

Who has return parts (service engineer should arrange return whenever possible)
Return form filled out by service engineer onboard
The form should be signed by the vessels master or representative.
Alternatively the following form can be used:

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Service report for SKIPPER Equipment

Sections with * must be filled out.

Phase 3: Service report	
WO Nr*:	
SKIPPERid*	
Date*	

Service engineer*: Service company*:	**System type*:** **Serial number*:**

Email address:		**For**: *Vessel name*:* *Vessel phone:*	

Billing:	**Replacement parts used:** If from own stock				
	Travel*:				
	Time: *Normal hours*:* *Overtime hours*:* *Waiting hours*:*				
Warranty	Yes / No				

Fault description*:

Diagnostic guide available in service area of www.skipper.no

Actions performed*:

STATUS

System now working satisfactorily*   YES   NO

Faulty/unused parts taken from vessel for return* ☐
Faulty/unused parts left on vessel under Masters instructions (Vessel takes ownership/costs)* ☐
(In this case the RM form should be filled out by the technician before leaving the vessel)

Service approved*

<div style="text-align:center">Vessels representative   Service engineer</div>

Conditions: The service is performed as instructed. Invoicing of parts, waiting time and work are as per the SKIPPER warranty conditions available on www.skipper.no.
All sections marked with * must be filled out.

Returning faulty parts

Parts may be returned for warranty assessment or repair, in the case of repair a quote can be requested. In the case of warranty the RM form MUST be used. This will be supplied with each part and can also be downloaded from the web.

Returning faulty parts

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Return materials form

SKIPPERId*:

Work order No.****		Original Invoice no.		
Vessel name		Item nr in invoice (1 only)		
From: **Name** **Company** **Email***		**Part unopened:**		**(X) one***
		Part used for diagnostic only, works ok.		
		Warranty return of defective part for credit		
		Return for quote/repair		
		Return of defect exchange unit/part		
Unit type* (GDS101C-SA, DL850N-SA)		**Serial number***		
Part No. / Serial No.**				

If part is defective or used for test please describe fault/solution

Return address (if part is to be returned)

I /my company accepts liability for parts damaged due to poor packaging***

Signed*:   **Date***:

Return to: **SKIPPER Electronics A/S (Returns)** **Enebakkvn 150** **0680 Oslo** **Norway**	Contact: Tomasz Olejarz Tel +47 45398120 Tel +47 23302270 (option 2) Email: support@skipper.no

* Marked items must be filled in,   **** Each item must have an individual form, *** Conditions on rear.**
**** For any work to be performed (other than quote) a work order number must be given.

Return policy.

In the event of failure of a SKIPPER product, the service centre may purchase parts on a use or return basis:

This will not effect the warranty conditions, however warranty is limited to defect parts only.

In some cases it is wise for the service centre to purchase a number of parts as a failure may occur in one of a number of places. The extra parts may be returned on the following conditions:

The original customer will given a credit of :

- 100% SKIPPER invoiced cost - if the part is under warranty and is damaged, or is still sealed in the original packaging
- 85% (15% restocking/testing fee) - if the part is not sealed but is undamaged

AND otherwise complies with the following conditions :
- is returned within 6 months of SKIPPER invoice date
- has been sent in a suitable package for the part.
- is sent with a completed return material form (incl. SKIPPERId:)

If additional information is provided allowing less vigorous testing of the parts, the restocking fee may be reduced at SKIPPERs discretion.

All parts not covered above will remain the customers property and may be returned to the customer at the customers expense, upon request.

Any part sent in with no valid return material number will be stored for min. 3 months, if the owner has not produced adequate information regarding system serial number within this time the part will be disposed of, All warranty claims based on these parts will be then be refused.

Suitable packaging means.

For Circuit boards to be sent in individual ESD (Non-static pink or black bag) padded and packed to resist shock.

Sensors to be packed with adequate padding (at least 5 cm thick) around any moulded parts

Mechanical parts to be packed to resist shock and dents.

All parts to be labeled with RM number.