



# Work Instructions

## Field Service Report Form

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### Purpose and Scope

This document establishes policy and procedure for filling out a Capstone Field Service Report (FSR) when servicing products for Capstone Turbine Corporation. This document applies specifically to those who wish to become Capstone Authorized Service Providers.

### Policy Statement

Field Service Report (512298) must be completed prior to filing for a Returned Material Authorization (RMA) or invoicing Capstone for warranty repair work.

Note that several fields in the Field Service Report form contain an asterisk next to them. Capstone will not accept this form as a valid Field Service Report unless all of these fields are completed. Failure to do so will result in processing delays and non-payment of warranty work.

### Guidelines

All individuals wishing to receive an RMA for a failed component or wishing to receive payment for warranty service should fill out the FSR form.

Several fields marked on this form contain an asterisk indicating that data is required in order for the FSR form to be accepted by Capstone. If these fields are not completed, Capstone reserves the right to reject the FSR form and all associated documentation that may accompany the FSR form.

All fields must be printed in a legible manner so that Capstone can quickly process the requests for which the form was submitted.

Note: A sample of a completed Field Service Report form is included at the end of these Work Instructions.

### Procedures

Refer to the completed FSR sample at the end of this document as required.

**Incident Date** – Month, day, and year that the incident was first reported.

**Repair Date** – Date on which repairs were made to the system for correcting the incident.

**Date of Report** – Date on which this report was actually completed.

**Installation Site Name** – Name of site where the unit is installed. This should include company name and address (at least City, State and ZIP Code, if applicable).

**RMA Number** – Contains the number issued by Capstone for Returned Material Authorization associated with this field repair work.

**Warranty** – Person filling out this form should check the Yes box if the system being worked on is still within the Capstone warranty period. Refer to Capstone MicroTurbine Standard, One-Year Extended, and Two-Year Extended Warranty policies.

**System Serial Number** – Serial Number from the nameplate of the system on which service work is being performed.

**System Hours** – Number of warranty hours accumulated on the system as read from the Display Panel or through the Capstone Remote Monitoring System (CRMS).

**System Starts** - Number of warranty starts accumulated on system as read from the Display Panel or through the CRMS.

**Aborted Recharges** - Number of aborted recharges accumulated on the system as read from the Display Panel or through the CRMS. Note that this field is only required for a system with the Stand Alone option installed.

**Software Version** – Software version (x.xx) of the Main Code Set installed in system as read from the Display Panel or through the CRMS.

**Fuel Type** – The type of fuel being delivered to the MicroTurbine system. Typically, expect to see Natural Gas, Propane, Digester Gas, Sour Gas, Diesel, Kerosene, etc.

**Assisting Capstone Engineer** – Name of assisting Capstone Technical Support Engineer with whom contact was made to troubleshoot the problem. Leave blank when no assisting engineer was required.

**Description of Incident** – This should be a brief one- or two-sentence description of the incident as reported by the customer. Examples would be: “Unit does not power up when Battery Start button is pressed on the Display Panel,” or “System flames out when commanded to go from full power to idle”.

**Mode of Operation** – Check one of the boxes indicating the system mode of operation (Grid Connect, Stand Alone, HEV) when the incident occurred. Note that Dual Mode is not a selectable option.

**System State** – Check one of the boxes indicating the system state of operation (Power Up, Start, On-Load, Steady State, Off-Load, Shutdown) when the incident occurred.

**Power Level** – Write the number of kilowatts the system was producing when the incident occurred.

**Fault Codes** – Record the fault codes that are present on the system when the incident occurs. This information can be obtained from the first menu page and Incident Log menu pages on the Display Panel or from the CRMS.

**Troubleshooting Steps** – This section should contain a detailed list of procedures performed by the servicing engineer to evaluate the problem. Should include incident reports and fault traces. Note that procedures performed to rule out other components are also critical.

**Description of Incident Resolution** – A brief one- or two-sentence description is required to describe the conclusion arrived at by the servicing engineer and the repair work performed.

**Part Name** – List the name of the parts that were replaced.

**Removed** – Provide the Part Number, Serial Number, Component Hours, and Failure Analysis Report Required (Yes/No) of the specific components that were removed to perform the repair. The Serial Number field may be left blank if the part being replaced is not a serialized component. The Component Hours field should contain the estimated hours since the component was last replaced. In the Failure Analysis Report Required (Yes/No) column, select ‘Yes’ if a Failure Analysis Report is requested by the **User**.

**NOTES**

A re-stocking fee may be charged for Failure Analysis Reports issued on parts where no problem is found.

Failure Analysis Reports should not be requested if prior Capstone documentation describing a known problem has been issued.

**Installed** - Provide the Part Number and Serial Number of the specific components that were installed in place of the removed component. The Serial Number field may be left blank if the part replaced is not a serialized component.

**Troubleshooting Time** – Number of hours required for troubleshooting the problem and arriving at an incident resolution.

**Repair Time** – Number of hours required to repair failed components once an incident resolution was reached.

**Mileage** – Number of miles or kilometers of travel to and from the customer site.

**Travel Time** – Number of hours of travel to and from the customer site.

**Service Provider Name** – Print the name of person performing service operation.

**Service Provider Company** – Print the name of company with which repairperson is affiliated.

**Signature** – Contains a hand-authorized signature of the person completing the service work.

**Phone** – Telephone number of the person performing service operation.

**Fax** – Fax number of the person performing service operation.

**Date** – Month, day, and year in which this form was signed.

**Technical Support Engineer Signature** – Leave this field blank. This is for Capstone internal use only.

**Capstone Claim Number** – Leave this field blank. This is for Capstone internal use only.

## Responsibility

It is the responsibility of Capstone to make these procedures available to the Authorized Service Providers so they can successfully complete the task.

It is the responsibility of Capstone to provide one-month notice in advance of the effectivity of this policy.

It is the responsibility of the Authorized Service Providers to read this procedure, understand its contents, and effectively complete the Field Service Report form.

If necessary, you may contact Capstone as follows:

### Capstone Technical Support

Toll Free Telephone: (877) 282-8966

Service Telephone: (818) 407-3600

Facsimile: (818) 734-1080

E-mail: [service@capstoneturbine.com](mailto:service@capstoneturbine.com)

### Capstone Technical Support (Japan)

Service Telephone: (818) 407-3700

Facsimile: (818) 734-1080

E-mail: [servicejapan@capstoneturbine.com](mailto:servicejapan@capstoneturbine.com)