

CERTIFICATION OF WORK

(To be completed by the Contractor and saved in the Contractor's CMMS)

FACID: NY023 Date of Visit: 04/12/2023 Work Order Date: 12/01/2022  
Building: B200 CSS: 91000 WO: 20210  
1. GEN SERVE Service Order: ☐  
Contractor Personnel on site: Corrective Maintenance: ☐  
2. RODON INC.  
Contractor Personnel on site:

Service Order Work Performed:

Unit: \_\_\_\_\_  
Manufacturer: \_\_\_\_\_  
Model: \_\_\_\_\_  
Serial: \_\_\_\_\_

Description:

Emergency Generator must be serviced and repaired

Repairs

Replace batteries and cables  
Replace ECM controller  
Replace engine necessary parts.  
Troubleshoot various ECM fault codes with Detroit technician  
Replace engine sensors and filters  
Test the generator.

To be signed by the Contractor:

ARIAN KODRA  
Print Name:

04.13.2023  
Date:

Arian Kodra  
Digitally signed by Arian Kodra  
Date: 2023.04.13 21:47:58  
GMT  
Digital Signature:

Signature: \_\_\_\_\_

To be signed by Facility Manager:

I certify that the above named individuals representing the Contractor arrived on site and to the best of my knowledge, completed the work listed:

PeterComito AFOS  
Print Name/Rank:

04/14/23  
Date:

  
Digital Signature:

Signature: \_\_\_\_\_

**CERTIFICATION OF WORK**

(To be completed by the Contractor and saved in the Contractor's ChMMS)

FACID: NY023  
Building: B200  
1. Gen Serve  
Contractor Personnel on site:  
2. Rodon inc.  
Contractor Personnel on site:

Date of Visit: 04/12/2023  
CSS: 00000EXT.  
Service Order: ☐  
Corrective Maintenance: ☐

Work Order Date: 03/28/2023  
WO: \_\_\_\_\_

**Service Order Work Performed:**

Unit: \_\_\_\_\_  
Manufacturer: \_\_\_\_\_  
Model: \_\_\_\_\_  
Serial: \_\_\_\_\_

**Description:**

Replace battery charger for generator

**Repairs**

- Replace batteries and cables
- Replace battery charger
- Test new charger

To be signed by the Contractor:

ARIAN KODRA  
Print Name:

04.13.2023  
Date:  
Arian Kodra  
Digitally signed by Arian Kodra  
Date: 2023.04.13 21:54:59  
48707  
Digital Signature:

Signature: \_\_\_\_\_

To be signed by Facility Manager:

I certify that the above named individuals representing the Contractor arrived on site and to the best of my knowledge, completed the work listed:

Peter Comito AFOS  
Print Name/Rank:

04/14/23  
Date:  
  
Digital Signature:

Signature: \_\_\_\_\_

