

# SERVICE REPORT

No: 13857

Customer Name: <i>Martin Coet</i>	Gen Set Utilization:	
Site Location: <i>yard</i>	Date of Visit:	
Nearest Landmark:	TIME START:	TIME END:

GenSet No: <i>5012236</i>	KVA: <i>1825</i>	Engine Make	Last Service Record
Current Running Hours: <i>44345</i>	<input type="radio"/> Cummins	<input type="radio"/> Perkins	Running Hours:
Average Running Hours:	<input type="radio"/> Deutz	<input type="radio"/> MTU	Date: <i>27/09/2021</i>
Engine Serial No:	<input checked="" type="radio"/> Others: <i>CATS</i>		Technician: <i>Dong/Ali</i>

**Generator Parameter**

Battery Voltage: <i>27.1</i>	Line 1 (R)		Line 2 (Y)		Line 3 (B)	
RPM: <i>1500</i>   Hz: <i>50</i>   Kw:	Voltage	Current Amp	Voltage	Current Amp	Voltage	Current Amp
Coolant Temperature: <i>83</i>	<i>400</i>	<i>2410</i>	<i>400</i>	<i>2422</i>	<i>400</i>	<i>2420</i>
Oil Pressure: <i>428 11PS</i>						

**INSPECTION CHECKLIST** Please mark the box  if **Normal** and  if **NOT Normal**.

1 Test battery alternator output <input checked="" type="checkbox"/>	9 Inspect intake system air cleaner <input checked="" type="checkbox"/>
2 Check battery connection and fluid level <input checked="" type="checkbox"/>	10 Inspect actuator linkage (lube as needed) <input checked="" type="checkbox"/>
3 Test circuit breaker operation <input checked="" type="checkbox"/>	11 Inspect front and rear seal on genset <input checked="" type="checkbox"/>
4 Verify all meters and gauges <input checked="" type="checkbox"/>	12 Unusual noises <input checked="" type="checkbox"/>
5 Inspect equipment panels for integrity and damages <input checked="" type="checkbox"/>	13 Check coolant level and add as necessary <input checked="" type="checkbox"/>
6 Inspect radiator mounting <input checked="" type="checkbox"/>	14 Check engine oil level and leaks <input checked="" type="checkbox"/>
7 Inspect all drive belts – tension and alignment <input checked="" type="checkbox"/>	15 Inspect engine mounting <input checked="" type="checkbox"/>
8 Inspect fuel lines and hoses <input checked="" type="checkbox"/>	16 Inspect external painting condition <input checked="" type="checkbox"/>

**Services** Please mark  if **DONE**.

<input type="checkbox"/> Change Oil
<input type="checkbox"/> Replace Oil Filter
<input type="checkbox"/> By Pass Oil Filter
<input type="checkbox"/> Replace Fuel Filters #1
<input type="checkbox"/> Replace Fuel Filters #2
<input type="checkbox"/> Raccor Filters
<input type="checkbox"/> Replace Air Filters
<input type="checkbox"/> Replace Water Separator

**List of Parts Used**

No.	Item Description	Part No.	Quantity
1.	<i>Fuel Filter</i>	<i>FF05337</i>	<i>3ps</i>
2.	<i>Oil</i>	<i>LE03485</i>	<i>3ps</i>
3.	<i>Raccor</i>	<i>2020</i>	<i>3ps</i>
4.	<i>Engine Oil</i>		<i>400mls.</i>
5.			
6.			
7.			

**Remarks:**

*Load test done.*

<p><b>Service Attended By</b></p> <p>Name: <i>Dong</i>   Mobile No.: _____</p> <p>Signature: _____   Current Date: _____</p>	<p><b>Customer Representative</b></p> <p>Name: _____</p> <p>Signature: _____</p> <p>Current Date: _____</p>
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VR No.	ORA	ORB	
Time Departed:	Odo:	Time Arrived:	Odo: