SERVICE REPORT

SUPPLIER, FORKLIFT (PARTS AND SERVICE) TRACTION BATTERY & CHARGER (SALES AND SERVICE)

DUNGHEINRICH Linde KOMATSU B NICHIYU TOYOTA TCM HYSTER ETC



Office / Workshop 1

Komp, Pergudangan Rira Green Park Blok E6 Jl. Industri No. 9A Desa Pasir Gombong Kec. Cikarang Utara Kabupaten Beksi 17530 Telp. 021 89321221

Workshop 2 Jl. Amir Hamzah/Tembusan, Jl. Citarik Rt. 001/Rw. 006 Kamp. Pegadungan, Kel. Sertajaya, Cikarang Timur - Bekasi

PT. ENSEYAL PUTRA MEGATRADING TO

LOGISTICSUKATIET

NAME IN BLOCK LETTERS

PLEASE SUBMIT QUOTATION

CLIENT : PT. ENSENDL JU ADDRESS: CAB. SUR	***************************************	ОТН	ER	SERVICE REF	PORT NO.
Model:					
1. BOLTED CONNECTIONS 2. CABIN & MOUNTING 3. CABIN DOORS (B) DRIVE UNIT 1. GEAR BOK 2. OIL LEVELEAKAGE (C) WHEELS 1. WEAR & DAMAGE 2. WHEEL BEARING 3. ROLLER GUIDE BOLTS (D) STEERING 1. FREE PLAY 2. CHAIN & SPROCET 3. STEERING ANGLE LIMITER (E) BRAKE 1. OIL LEVEL 2. MOTOR BRAKE LINNING 3. AIR CAP (MOTOR)	7. TRA' 8. SWI' 9. HYD 10. EME (G) ELECT 1. CARB 2. MOU 3. TERM 4. BLOW (H) BAT 1. ELECT 2. VOLIT. 3. TERM 4. BATTI 2 3 (I) ELECT 1. FUSE 2. UNIT 3. CABL	VOUT MOTOR HOUSING TERY TRO LYTE LEVEL AGES. O. MINAL, CABLES, PLUGS ERY LOCK TRICAL SYSTEM	12. IND (J) LIFII 1 2 3 1. MAS 2. CAR 3. POR 4. CHA 5. TOO 6. GEA 7. BEAI 8. END 9. LUBI (K) FUI 1 2 3 (K) FUI 1. TRV 2. LIFT	SORE HO GENERATOR BELT ICATOR LAMPS NG SYSTEM IT BOLT RIAGE ASSEMBLY KS IN & ROLLES THED RACT R WHEELS RINGS STOOP RICATION NGTIONAL TEST ELLING ING ARY FUNCTION	1 2 3
(F) HYDRAULIC 1. OIL LEVEL STRANER 2. HOSE PIPING CONECTION 3. DYD, PUMP, CONTROL VAVES 4. SOLENOID VALVES, RELIEF VALVES 5. MAIN LIFT CYL Report of any other work carried out:	5. TRIP 6. HORI 7. CONT 8. RELA' 9. ELEC	N RACTORS & CONTACTIES YS TRONIC BOARDS		Cal 1. Good Condition Cal 2. Bad Condition Cal 3. Correction Condi	
Based on above rep	ort we used	Qty	We Recommend	led you te order	
Description	Part No.	/ 3	BT KABEC	BATRAY	
ON THIS CONSTITUTE ANINSTRUCTION FOR WORKS TO BE CARRED OUT WHERE AN OFFICIAL MAY NOT FOLLOW SERVICE TECHNICIAN The Client was informed about the found CLIENTS SIGNATURE & STAMP					

The Client was informed about the found defect and the donger resulting there form

TO:

WORKING HOURS:

DATE:

SERVICE PERFORMED BY

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