## Company Logo

## **Lift Trucks Ltd**

---114 Captain Springs Road, PO Box 13033, Onehunga, Auckland, NZ 1643

Ph: (09) 6342177 | Email: admin@liftrucks.co.nz

JOB & CUSTO	MER DETAILS			
Job No.	Fleet No.	Order No	<u>o.</u>	
Customer Name Customer Address Site Contact		Contact Ph	none	
MACHINE DETA Make Hours SERVICE REPO	Model  ORT / FAULT DESC	RIPTION	Serial No.	
TIME RECORD Day	Date	Total Hours	Van KM	
PARTS & MATI	FRIALS USED	Quanti	ty	
FURTHER WOF	RK REQUIRED / RE	MARKS		
SIGN-OFF & AC Client Name: Date: Technician Name: Date:	CKNOWLEDGEMEN	Signature: Signature:		

I acknowledge that the above work has been completed satisfactorily and agree that the parts & labour are chargeable.