



KOJO AUTO SERVICE CENTER



LAGOS:

1, Moshalashi Street,
Off Western Avenue,
By Ipori Bridge Alaka Surulere, Lagos.
Tel: 08077692625, 08077692662,
08077692633

ABUJA:

Plot 1209 Shehu Yar'Adua Way
Mabushi Near VIO, Abuja FCT.
Tel: 08077692630, 08067779150,
09-2911234

BENIN:

45, Agbor Road, Ikpoba Hill,
Benin City, Edo State.
Tel: 08077692641, 08077692644

PORT-HARCOURT:

Plot 117, Trans-Amadi Layout
Port Harcourt, Rivers State.
Tel: 08077692621, 08077692631,
07037823937

AWKA:

Plot C5 and C6 Agu-Akwa
Layout Akwa Anambra State
Tel: 08077692640, 08077692610

JOB INSTRUCTION

Customer Name/ID:	MR. TONY UGWU / KJEE6FF04	Date:	27th Jun, 2022
Organization:		Reg. No:	RBC 824 BS
Vin/Chasis No:	NMTKHMBX4JR035172	Odometer Reading:	
Phone Number:	08169621087	E-mail:	
Vehicle Make:	TOYOTA CHR	Model Number:	ZGX10L-BHXNPA
Address:			

Item Description	Quantity
CAMSHAFT SENSOR BANK 1	1
CAMSHAFT SENSOR BANK 2	1
HEAD LIGHT (RHS)	1
A/C PRESSURE SWITCH	1
RESERVOIR TANK	1
IGNITION COILS	2
ENGINE FUSE BOX (RHS)SET	1
ENGINE WIRE (RHS) SET	1
A/C AMPLIFIER	1
FRONT WIPER BLADE (SET)	1
WIPER WASHER TANK	1
WIPER WASHER HOSE	1
WIPER ENGINE COVER	1
FRONT FENDER LINING (RHS)	1
HOOD MAT	1
PINS	10
FRONT WINDSHIELD	1
ADHESIVE & GLUE	1
PAINTING MATERIALS (COMPLETE FRONT)	1

		Additional Job Completionn : <input type="checkbox"/> Value : <input type="checkbox"/> Project Estimategw/Explanation: <input type="checkbox"/> Car Was Needed?: <input type="checkbox"/> Replaced Part Keep: <input type="checkbox"/>	
1 <input type="checkbox"/> Cleaness (Exterior/Interior): <input type="checkbox"/> <input type="checkbox"/> Courtesy Items Removal: <input type="checkbox"/> <input type="checkbox"/> Outer Mirror Position / Seat Position: <input type="checkbox"/> <input type="checkbox"/> Clock Adjustment / Radio Sitting: <input type="checkbox"/> <input type="checkbox"/> Job Completion Notificxation: <input type="checkbox"/>	2 Signed 1 Date: _____ Time: _____ Signed 2 Date: _____ Time: _____	Job Details Explanation : <input type="checkbox"/> Fee Explanation : <input type="checkbox"/> Result Confirmation with Customer: <input type="checkbox"/> Walk-Around Check : <input type="checkbox"/>	Fixed: <input type="checkbox"/> Level Up: <input type="checkbox"/> No Fixed: <input type="checkbox"/> PSFU(Plan) <input type="checkbox"/>
Change of Delivery Time: Additional Jobs /Job Stoppage/Others Completion Changed: _____ Other Findings :		Job Time: Job Start: Date _____ Time _____ Job Completion: Date: _____ Time: _____ Actual Hours Clocked: _____ Technician Name: _____ Quality Control Staff: _____	

Job Completion Notification: Date: _____ Time: _____	Delivered to Owner / Family / Other (_____)
P.S.F.U. (Plan): Date: _____ Time: _____	Contact Info: Telephone No: _____ (Home/Business/Mobile) Email: _____
P.S.F.U (Actual): Date: _____ Time: _____	Customer: Owner / Family / Other (_____)
P.S.F.U (GJ) : <input type="checkbox"/> <input type="checkbox"/> Fixed <input type="checkbox"/> <input type="checkbox"/> Followup Status (Follow up Again Date: _____ Time: _____ <input type="checkbox"/> <input type="checkbox"/> Not Fixed (Appointment Date/Time) Date: _____ Time: _____	Staff Name: _____ Confirmed By: _____ Supplied By: _____ Issued By: _____ Order By: ABDULAZEEZ ADAVIRUKU YUSUFF