



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 ERIC / KJ286249	Date: 22nd Jul, 2022
Organization:	Reg. No: ABJ 982 LP
Vin/Chasis No: SB1BL76L40E042155	Odometer Reading: 78,541KM
Phone Number: 08035989365	E-mail:
Vehicle Make: TOYOTA AVENSIS	Model Number: ZRT272L-AEPEKW
Address: NO. 5 DANUBE MAITAMA, ABUJA.	

Item Description	Quantity
ENGINE OIL	5
OIL FILTER	1
FRONT BRAKE PAD	1
REAR BRAKE PAD	1
BRIGSTONE TYRES 215/60R16	4
FIXING OF TYRES	4
REMOTE KEY BATTERY	2
SIDE MIRROR LIGHT (RHS)	1
REAR BUMPER REFLECTOR (LHS)	1
COMPLETE BODY WORK AND PAINTING MATERIAL	1
WHEEL BALANCING AND ALIGNMENT	1

		Additional Job Completionn : <input type="checkbox"/> Value : <input type="checkbox"/> Project Estimatew/Explanationn: <input type="checkbox"/> Car Was Needed? : <input type="checkbox"/> Replaced Part Keep: <input type="checkbox"/>		
1 <input type="checkbox"/> Cleanness (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 Notification: <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"/>	Delivery: Dtae: _____ Time: _____ Customer: _____
Change of Delivery Time: Additional Jobs /Job Stoppage/Others Completion Changed: _____		Job Time: Job Start: Date _____ Time _____ Job Completion: Date: _____ Time: _____		
Other Findings :		Actual Hours Clock:	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>P.S.F.U (GJ) :</p> <p><input type="checkbox"/> <input type="checkbox"/> Fixed</p> <p><input type="checkbox"/> <input type="checkbox"/> Followup Status (Follow up Again</p> <p>Date: _____ Time: _____</p> <p><input type="checkbox"/> <input type="checkbox"/> Not Fixed (Appointment Date/Time)</p> <p>Date: _____ Time: _____</p>	<p>Staff Name: _____</p> <p>Confirmed By: _____</p> <p>Supplied By: _____</p> <p>Issued By: _____</p> <p>Order By: ABDULAZEEZ ADAVIRUKU YUSUFF</p>
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