

# **KOJO AUTO SERVICE CENTER**



#### LAGOS:

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

**Item Description** 

**ENGINE OIL** 

### 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:

Quantity

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: CATHOLIC CARITAS FOUNDATION OF NIGERIA / KJ377582	Date: 09th May, 2022
Organization:	<b>Reg. No</b> : 32J 262 FG
Vin/Chasis No: JTEMU5JR7M5924892	Odometer Reading: 18201Km
Phone Number: 8100094449	E-mail:
Vehicle Make: Toyota 4Runner	Model Number: GRN2852-GKAGKA
Address: ASOKORO, ABUJA	

Additional Job Completions   Value	OIL FILTER 1					
Cleanness (Exterior/Interior):   Courtesy terms Removale:   Clock Adjustment, Radio Stitting:   Date:   Time:   Signed 2   Date:   Time:   Signed 2   Date:   Time:   Signed 2   Date:   Time:   Date:   Tim			Value : □ Project Estimatew/Explanationr: □ Car Was Needed? : □			
Additional Jobs /Job Stoppage/Others  Completion Changed:	☐ Cleanness (Exterior/Interior): ☐ ☐ Courtesy Items Removal: ☐ ☐ Outer Mirror Position / Seat Position: ☐ ☐ Clock Adjustment / Radio Sitting: ☐	Date: Time:  Signed 2  Date:	Fee Explanation :  Result Confirmation with  Customer:	Level Up: □ No Fixed: □		
Completion Changed: Time: Ouality Control Staff:  Other Findings:	Change of Delivery Time:		Job Time:			
Other Findings:  Actual Hours Clocked:  Job Completion Notification: Date: Time: Delivered to Owner / Family / Other ( )  P.S.F.U. (Plan):	Additional Jobs /Job Stoppage/Others		Job Start: Date Time			
Clocked:   Clocked:	Completion Changed:		Job Completion: Date: Time:			
P.S.F.U. (Plan):  Contact Info: Telephone No: (Home/Business/Mobile)  Email:  P.S.F.U (Actual):  Customer: Owner / Family / Other ()  Date: Time  P.S.F.U (GJ):  Fixed Followup Status (Follow up Again  Confirmed By:  Date: Time: Supplied By:  Indicate the state of	Other Findings :			Technician Name:	Quality Control Staff:	
Telephone No:	Job Completion Notification: Date: Time:		Delivered to Owner / Family / Other ()			
Date: Time			Telephone No:(Home/Business/Mobile)			
P.S.F.U (GJ):  Fixed  Followup Status (Follow up Again  Date: Time: Supplied By: Issued By: Issued By:			Customer: Owner / Family / Other ()			
□ Fixed □ Followup Status (Follow up Again  Date: Time: Supplied By: Issued By: Issued By:						
□ Followup Status (Follow up Again  Date: Time: Supplied By: Issued By: Issued By:			Staff Name:			
□ Not Fixed (Appointment Date/Time)  Issued By:			Confirmed By:			
	□ Not Fixed (Appointment Date/Time)		Issued By:			
Date: Time:	Date: Time:					