

# **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:	RINGARDAS NIG LIMITED / KJ239187	Date:	08th Jul, 2022		
Organization:	RINGARDAS NIGERIA LIMITED	Reg. No:	FKJ 472 HH		
Vin/Chasis No:	AHTKX8CDX02261497	Odometer Reading:	17,821KM		
Phone Number:	08169621087	E-mail:	Anthony.ugwu@ascanigeria.com		
Vehicle Make:	TOYOTA HILUX	Model Number:	TGN126L-DNMSKN		
Address: 49, MAMMAN NASIR, STREET, ASOKORO, ABUJA					

OIL FILTER		1			
		Additional Job Completionn : □ Value : □ Project Estimatew/Explanationr: □ Car Was Needed? : □ Replaced Part Keep: □			
□ Cleanness (Exterior/Interior): □ Date □ Courtesy Items Removal: □ Time □ Outer Mirror Position / Seat Position: □ Clock Adjustment / Radio Sitting: □ Job Completion Notificxation: □ Date	e: e: ned 2	Job Details Explanation :  Fee Explanation :  Result Confirmation with  Customer:  Walk-Around Check :	Fixed: □ Level Up: □ No Fixed: □ PSFU(Plan) □	Delivery: Dtae:  Time:  Customer:	
Change of Delivery Time:		Job Time:			
Additional Jobs /Job Stoppage/Others		Job Start: Date Time			
Completion Changed:		Job Completion: Date: Time:			
Other Findings:		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):		Customer: Owner / Family / Other ()			
Date: Time	Olaff Name of				
P.S.F.U (GJ):		Staff Name:			
□ Followup Status (Follow up Again		Confirmed By:			
Date: Time:  □ Not Fixed (Appointment Date/Time)	Supplied By: Issued By: Order By: SAMUEL YUSUF FUNDA				
Date:Time:					