

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

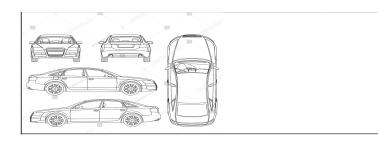
AWKA:

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

JOB INSTRUCTION

Customer Name/ID: ENGR. HAIM AND KEM HALLE / KJ334959	Date: 29th Jun, 2022	
Organization:	Reg. No: BWR 820 BG	
Vin/Chasis No: MROHX8CD6K0929531	Odometer Reading: 63991KM	
Phone Number: 08080466558 / 08033777247	E-mail:	
Vehicle Make: Toyota Hilux	Model Number: TGN26L-PRMDKN	
Address: ABUJA		

Item Description	Quantity
FRONT WINDSHIELD	1
HOOD	1
FRONT BUMPER COMPLETE IRON	1
FRONT GRILL	1
BUMPER GRILL	1
HEAD LIGHT (SET)	1
HEAD LIGHT CHROME (SET)	1
HILUX LOGO	1
REPAIR OF FRONT CHASIS CUT	1
AIRFLOW CASE	1
HEAD LIGHT BULBS	2
RADIATOR RESERVOIR	1
HOOD CHROME	1
PINS	20
DOOR FANCY CAP	1
STEERING AIRBAG	1
DASHBOARD AIRBAG	1
DOWN STEERING AIRBAG & COVER	1
ADHESIVE AND GLUE	1
BOOT COVER HOOK	1
FRONT FENDER LINING (RHS)	1
TOP DASH BOARD	1
WHEEL BALANCING & ALIGNMENT	1
DOOR STICKER	1
COMPLETE BODY WORK AND PAINTING MATERIALS	1



- Additional Job Completionn : $\hfill\Box$
 - . Value : □
- Project Estimatew/Explanationr:
 - Car Was Needed? :
 - Replaced Part Keep:

1 2 Cleanness (Exterior/Interior):	Signed 1 Date:	_	Level Up: □□	Delivery: Dtae:		
□ □ Courtesy Items Removal: □□	Time:	Fee Explanation :	PSFU(Plan)□□	Time:		
□ □ Outer Mirror Position / Seat Position: □□	Date: Time:	Result Confirmation with Customer:		Customer:		
□ □ Clock Adjustment / Radio Sitting: □□	1	□ Walk-Around Check :				
☐ Job Completion Notificxation: ☐ ☐	1					
Change of Delivery Time:	•	Job Time:	_	•		
Additional Jobs /Job Stoppage/Others		Job Start: Date	Job Start: Date Time			
Completion Changed:		Job Completion: Date	Job Completion: Date: Time:			
Other Findings:		Actual Hours Clocked:	Technician Name:	Quality Control Staff:		
Job Completion Notification: Date: Time:		Delivered to Owner / F	Delivered to Owner / Family / Other ()			
P.S.F.U. (Plan):		Contact Info:	Contact Info: Telephone No:			
Date: Time:			(Home/Business/Mobile)			
		Email:	Email:			
P.S.F.U (Actual):		Customer: Owner / Fa	Customer: Owner / Family / Other ()			
Date: Time						
P.S.F.U (GJ) :		Staff Name:				
□□ Fixed		O firm D				
□□ Followup Status (Follow up Again		Confirmed By:				
Date: Time:		Supplied By:				
□□ Not Fixed (Appointment Date/Time)			ssued By: Order By: OGHALE GIFT USIAKPENEBRO			
Date: Time:						