



# 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

<b>Customer Name/ID:</b> NATIONAL ASSMBLY SERVICE COMMISSION ( NA / KJ142377	<b>Date:</b> 23rd Mar, 2022
<b>Organization:</b> NASS	<b>Reg. No:</b> MGT 30 FL
<b>Vin/Chasis No:</b> JTF5X22P006157574	<b>Odometer Reading:</b> 133953KM
<b>Phone Number:</b> 08030677916	<b>E-mail:</b>
<b>Vehicle Make:</b> Toyota Hiace	<b>Model Number:</b> TRH223L-LEMDK
<b>Address:</b> NATIONAL ASSEMBLY SERVICE COMMISSION ABUJA	

Item Description	Quantity
ENGINE OIL	7
OIL FILTER	1
FRONT SHOCK ABSORBERS (SET)	1
FRONT STABILIZER LINKAGE	1
FRONT SHOCK ABSORBERS DAMPER	1
REAR SHOCK ABSORBERS DAMPER	1
COMPLETE UPPER ARM	1
REAR ARM BALL JOINT	1
WHEEL BALANCING AND ALIGNMENT	1
REAR DRUM	1
BRAKE LINING	1
FRONT BRAKE PAD (SET)	1
REAR SHOCK ABSORBERS	1
REAR BRAKE PIPE LHS	1
BRAKE MASTER CYLINDER	1
REAR BRAKE CYLINDER	1
SERVICING OF BRAKE CALLIPER	1
CRANK SHAFT OIL SEAL	1
FRONT WHEEL BEARING (SET)	1
COMPLETE BODY WORK AND PAINTING MATERIALS	1

		Additional Job Completion: <input type="checkbox"/> Value: <input type="checkbox"/> Project Estimate/Explanation: <input type="checkbox"/> Car Was Needed?: <input type="checkbox"/> Replaced Part Keep: <input type="checkbox"/>	
1 <input type="checkbox"/> Cleanliness (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"/>
<b>Change of Delivery Time:</b> Additional Jobs /Job Stoppage/Others Completion Changed: _____		<b>Job Time:</b> Job Start: Date _____ Time _____ 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):  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		