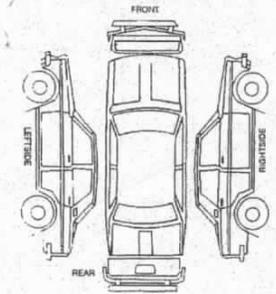




JOB REQUISITION FOR BREAKDOWN / TOWING SERVICE

Job Requisition		
<p>1. Date: <u>26/4/16</u> Time Received: <u>0030am</u></p> <p>2. <input type="checkbox"/> New <input type="checkbox"/> SPARK Kakis Name of Customer: <u>Mr. Tan</u> Contact No.: <u>90231916 / 9686400</u> Vehicle No.: <u>SMB6248E</u> Make/Model/Colour: <u>H/HW</u> Email: _____</p>	<p>3. Vehicle Type: <u>45R</u> <input type="checkbox"/> Private <input checked="" type="checkbox"/> Taxi (CTPL/CCPL) <input checked="" type="checkbox"/> Fleet <input type="checkbox"/> STK (Boon Lay)</p> <p>5. Nature of Service: <input type="checkbox"/> Jumpstart <input type="checkbox"/> Recovery <input type="checkbox"/> Change Tyre / Battery</p>	<p>4. Type of Towing: <input checked="" type="checkbox"/> Normal Tow <input type="checkbox"/> Towing Dolly <input type="checkbox"/> Flat Bed <input type="checkbox"/> Crane-up</p> <p>6. Parts Replaced/Remarks: _____ _____</p>
<p>7. Location: <u>181 Orchard Rd Tanjong</u></p> <p>9. Preferred Workshop: <input type="checkbox"/> Braddell <input checked="" type="checkbox"/> Loyang <input type="checkbox"/> Pandan <input type="checkbox"/> Sin Ming <input type="checkbox"/> Sungei Kadut <input type="checkbox"/> Ubi <input type="checkbox"/> Senoko <input type="checkbox"/> Komoco (UBI / Leng Kee) <input type="checkbox"/> Cycle & Carriage (PD) <input type="checkbox"/> Others: _____</p>	<p>8. Vehicle Tow - In Workshop: <input type="checkbox"/> Smoky Exhaust <input type="checkbox"/> Wheel Jammed <input type="checkbox"/> Overheating <input type="checkbox"/> Steering Faulty <input type="checkbox"/> Brake Faulty <input type="checkbox"/> Alternator Faulty <input type="checkbox"/> Starting Problem <input type="checkbox"/> Loss Power <input checked="" type="checkbox"/> Accident <input type="checkbox"/> Engine Stalled <input type="checkbox"/> Return Taxi</p>	
<p>10. Odometer Reading: <u>27848km</u></p> <p>Fuel Level: <input type="checkbox"/> F <input type="checkbox"/> 1/4 <input type="checkbox"/> 1/2 <input type="checkbox"/> 3/4 <input type="checkbox"/> E</p>	<p>11. Radio / CD Player <input type="checkbox"/> OK <input type="checkbox"/> Faulty <input type="checkbox"/> Not tested</p>	 <p># : Cracked X : Dented / : Scatched O : Missing</p> <p>_____ Signature of Customer</p>
Job Attended		
<p>12. Tow Truck / Recovery Van: <input type="checkbox"/> VRS <input type="checkbox"/> QA <input checked="" type="checkbox"/> GAO <input type="checkbox"/> TZ <input type="checkbox"/> YISHUN <input type="checkbox"/> OTHERS TOWING</p> <p>Name of Driver: <u>Mr. Tan</u> Vehicle No.: <u>12345</u> Time Dispatch: <u>0030am</u> Time of Arrival: <u>0055am</u> Time Completed: <u>0130am</u></p>		
Cash Invoice Details (if applicable)		
<p>13. Cash Invoice No.: _____</p>		
Customer Acknowledgement		
<p>a. I have been advised to remove all valuable items in my vehicle, including Global Positioning System (GPS), audio compact disk, thumbdrive, carpark coupons, cash cards, spectacles, pen, etc.</p> <p>b. I understand that any items left behind are at my own risk and SPARK Car Care™ will not be held liable for such losses.</p> <p>c. Surcharge: Towing fee will be levied if the customer decides neither to tow nor proceed with the repairs in SPARK Car Care™.</p>		
<p><u>26/4/16</u> Date</p>	<p><u>0055am</u> Time</p>	<p>_____ Signature of Customer</p>
14. WORKSHOP		
<p>_____ Name of Attending Staff/Guard</p>	<p>_____ Date & Time of Arrival</p>	<p>_____ Signature of Attending Staff/Guard</p>

COMFORTDELGRO ENGINEERING

A member of COMFORTDELGRO

ComfortDelGro Engineering Pte Ltd

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 383 Sin Ming Drive Singapore 575717 7 Sungei Kadut Way Singapore 728791
 45 Pandan Road Singapore 509286 6 Defu Avenue 1 Singapore 539537
 32 Hill Road Singapore 908649

Date/Time: 26.04.2018 17:23 Page : 1

Team: ARC Repair TP(CLSO)1

JOB CARD Sales Order:

JC NO: 305153746

CUSTOMER /MS COMFORT TRANSPORTATION PTE LTD CUSTOMER NO. 7010045 ADDRESS 383 SIN MING DRIVE Singapore SINGAPORE 575717 (R) 65508755 (O) (P) COUNT CARD NO.	REGN NO. SHB6245R	MILEAGE
	MAKE HYUNDAI	FUEL E.....1/2.....F
	MODEL I-40	DATE/TIME IN 25.04.2018 23:45
	YR OF MANU. 14.04.2016	TARGET DATE
	CHASSIS CODE KMHLB41UMGU087175	COMPLETION DATE/TIME:

JOB DESCRIPTION

Accident Date: 25.04.2018
 NATURE: 3P 25.04.18

S/NO	LABOR CODE	DESCRIPTION
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CHECKED & PASSED OUT BY: _____

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Exit Pass

Vehicle No.: SHB6245R
 Description: LIMTS

Vehicle No.: SHB6245R

Signature of Service Advisor

Signature/Date

Name of Service Advisor

Date

Returned to Service Reception upon collection

To be kept by Security Guard