



VEHICLE CHECK-LIST FORM
AutoFix
MEMBER OF AutoRent

For Fleet / Workshop Use Only

JC No: _____

S.No: 129

Date: 12/20/2020

Time: 04:33 pm

Year: 2017 Chassis No: GU73848

Registration No: PL7

Km: 45864543

VEHICLE COMPLAIN / JOB REQUESTED

1. vhfgh

2. hfg

3. hfg

4. fghfgh

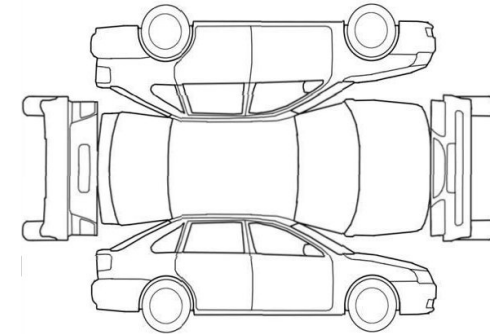
5. fghgf

6. hghfdgfdgfd

Remarks: _____

Body Damage Report

Circle dents and scratches



Customer Name: Achyut Acharya
Customer Number: 971586582477
Customer Email: a.acharya@servicemycar.ae
Sign & Date: [Signature]

Petrol Quater Half Full Empty

CHECKLIST

- CIG LIGHTER
- WIPERS
- ASH TRAY
- WHEEL CAPS
- SPARE WHEEL
- JACK
- JACK ROD
- WHEEL SPANNER
- FLOOR MATS
- ANTENNA
- AUDIO SYSTEM
- REGN CARD
- PETROL CARD
- TRAINING BOARD
- TRIANGLE
- SALIK TAG

Tyre Check

Fr. RH	mm	<input type="checkbox"/> Good <input type="checkbox"/> Bad
Fr. LH	mm	<input type="checkbox"/> Good <input type="checkbox"/> Bad
Rr. RH	mm	<input type="checkbox"/> Good <input type="checkbox"/> Bad
Rr. LH	mm	<input type="checkbox"/> GoodBigAuto <input type="checkbox"/> Bad

Service Advisor:

Name: sdf sdf
Sign: [Signature]
Date: fsdf

Save as pdf
Save & Send

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