



VEHICLE CHECK-LIST FORM
AutoFix
MEMBER OF AutoRent

For Fleet / Workshop Use Only

JC No: _____

S.No: 131

Date: 12/21/2020

Time: 04:52 pm

Year: 2020 Chassis No: 54654654 Registration No: 12
Km: 64554654

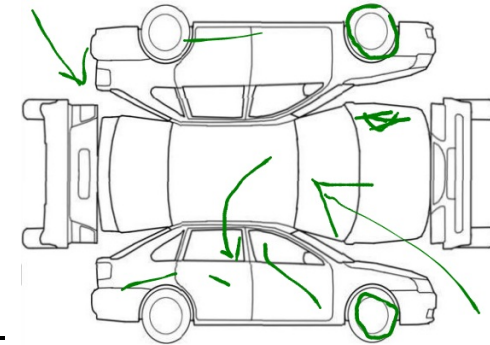
VEHICLE COMPLAIN / JOB REQUESTED

- 1. ghfghfgh
- 2. fghfg
- 3. fgh
- 4. fgh
- 5. hfghfgh
- 6. fghfgh

Remarks: fghfgh
fghfghfgh

Body Damage Report

Circle dents and scratches



Customer Name: sashit shrestha
Customer Number: 971581059810
Customer Email: sam68stha@gmail.com
Sign & Date:

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

Service Advisor:

Name: fghfghfghfgh

Sign: _____

SAVE AS PDF

SAVE & SEND