Work order

MOTORCYCLE WORKSHOP

Workshop _____ Order no. _____ Check-in _____

CUSTOMER

Name _____

Mobile _____

Tax no. _____

Email _____

MOTORCYCLE

Number plate _____

Make and model _____

Colour _____

Year _____

Mileage _____

PROBLEM REPORTED BY THE CUSTOMER

DIAGNOSIS

TASKS AND PARTS

Type	Description	Ref.	Qty / hours	Price	Total
P / L					
P / L					
P / L					
P / L					
P / L					
P / L					
P / L					
P / L					
P / L					

STATUS

☐ Received ☐ Diagnosing ☐ On hold ☐ Repairing
☐ Completed ☐ Delivered

On hold for what? _____

Mechanic _____

AMOUNTS

Subtotal _____

VAT _____

Total _____

NOTES AND RECOMMENDATIONS

Customer approval _____ Collected on _____ Customer signature _____

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