





Work Order

Meets NATEF Task: (A6-A-1) Complete work order. (P-1)

Name _____ Date _____ Time on Task _____

Make/Model/Year _____ VIN _____ Evaluation: 4 3 2 1

Fill in the customer and vehicle information, plus the customer concerns and related service history.

 UAS Automotive 1415 Any Street City, State 99999			
Customer Information Name _____ Daytime _____ Address _____ Evening _____ City _____ State ____ Zip _____		Vehicle Information Year _____ Model _____ Color _____ Mileage _____ VIN _____	
Materials _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____	Customer Concern _____ _____ _____ _____		
	Related Service History _____ _____ _____		
	Labor Performed _____ _____ _____		
	Root Cause of Problem _____ _____ _____	Totals Materials _____ Labor _____ Misc. _____ Sub Total _____ Tax _____ TOTAL _____	
	Customer Authorization X _____		