



Customer Service Work Order

DATE: _____

WORK ORDER#: _____

DEALER: _____ CUSTOMER: _____

ADDRESS: _____ ADDRESS: _____

CONTACT: _____ EMAIL: _____

PHONE: _____ HOME: _____ CELL 1: _____

EMAIL: _____ WORK: _____ CELL 2: _____

RP#: _____ NS#: _____ MFG DATE: _____

INITIALS*	ITEM#	DISCREPANCY
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

*My initials above acknowledge I am fully satisfied with the work completed. My signature below acknowledges that the Service Representative

X _____ X _____
 NORTHSTAR REPRESENTATIVE DATE CUSTOMER DATE

TIME IN: _____ AM / PM TIME OUT: _____ AM / PM