



20-Mar-2025

**MR. JAKE AARON CHUA YAP**

UNIT 74A, TOMAS ARGUELLES ST., BRGY. SANTOL QUEZON CITY

TEL: 0917-5249738

Sir/ Madam,

This is to bill you on the service job done to your unit for the following months.

Details of the charges are stated below and a copy of the Service Job Report is attached for your references:

| DATE ATTENDED           | SJR #       | QUANTITY/MODEL   | SERVICE JOB DONE  | AMOUNT            |
|-------------------------|-------------|------------------|-------------------|-------------------|
| 04-Jul-24               | HO-00211980 | (1) KWD-BL59BSS  | PARTS REPLACEMENT | 2,300.00          |
| 04-Jul-24               | HO-00211983 | (1) KAG-260RS    | GENERAL CLEANING  | 800.00            |
| 04-Jul-24               | HO-00211984 | (1) KAG-260RS    | GENERAL CLEANING  | 800.00            |
| 04-Jul-24               | HO-00211987 | (1) KAG-200RSINV | GENERAL CLEANING  | 800.00            |
| 04-Jul-24               | HO-00211988 | (1) KAG-145RSINV | GENERAL CLEANING  | 800.00            |
| 18-Mar-25               | HO-00228380 | (1) KWD-BL59BSS  | DELIVER OF PARTS  | 750.00            |
| <b>TOTAL</b>            |             |                  |                   | <b>P 6,250.00</b> |
| <b>LESS: DISCOUNT</b>   |             |                  |                   | <b>(835.00)</b>   |
| <b>TOTAL AMOUNT DUE</b> |             |                  |                   | <b>P 5,415.00</b> |

**Notes:**

\* If check payment, please prepare check payable to **Kolin Philippines International Inc.**

**Account #: 011808000428 - BDO - KALAYAAN**

\* In case thru Bank Deposit under BDO Account, kindly indicate **(1) SJR#** as Reference No. on the deposit slip  
Kindly send proof of payment to **viber 0917-8078607** or E-mail to: **kmi\_asst@kolinphil.com.ph**

For any clarifications please feel free to call the Undersigned on this telephone number **8852-6473**.

Prepared by:

  
**Janellen S. Lim**  
KMI - Assistant

Noted by:

  
**Mart Nathaniel R. Flores**  
KMI - Supervisor

Received by:

Signature over printed name

 **Kolin Philippines Int'l., Inc.**

Plant and Head Office:

Blk 3 Lt 5 Main Drive, FCIE Compound,  
Brgy. Langkaan I, Dasmariñas, Cavite

Tel.: (632) 8749-2118

Fax (046) 402-0793

[www.kolinphil.com.ph](http://www.kolinphil.com.ph) / [kolinphilippines](http://kolinphilippines)

Operation Office:

1854 Sta. Rita St., Guadalupe Nuevo,  
Makati City

Tel.: (632) 8851-2711, 12 or 15

Fax: (632) 8852-2170

Sales Dept. Fax: (632) 8852-4791



# Kolin Philippines Int'l., Inc.

1854 Sta. Rita St., Guadalupe Nuevo, Makati City  
Tel. No.: 8852-8868 / Mobile: 0917-811-8982 / Email: service@kolinphil.com.ph  
Website: www.kolinphil.com.ph

## SERVICE JOB REPORT

|  |  |  |  |                 |  |              |  |
|--|--|--|--|-----------------|--|--------------|--|
| Customer                               |  | Chua Yap, Jake Aaron   |  | Date            |  | 07-04-2024   |  |
| Address                                |  | Unit 74A, Tomas Arcuelles St., Brgy. Santol (Entry Point Bayani St. Silencio...<br>SL), QUEZON CITY, Metro Manila... |  | Start Time      |  | 08:26 am     |  |
| Telephone No.                          |  | 365-4582   |  | Mobile No.      |  | 0917-5249738 |  |
| Contact Person                         |  | Ms. Ellen Jean   |  | Tel. No.        |  | 365-4562     |  |
| Warranty Code                          |  |  |  | Room Size       |  |              |  |
| Model                                  |  | KYD-BL59BSS  |  | Call Origin     |  | IO           |  |
| S/N (I)                                |  |  |  | S/N (O)         |  |              |  |
| Dealer                                 |  | KM   |  | DOP             |  | 01/19/2023   |  |
| Installer                              |  |  |  | Complaint       |  | Others       |  |
| Location                               |  | Before   |  | After           |  |              |  |
| Mode Setting (Cool)                    |  |  |  | No. of Visit    |  | 1st action   |  |
| WAC   Setting Temp(16°C-RE)/(10/12-ME) |  |  |  | Tentative Sched |  | 07/04/2024   |  |
| SAC/PAC   Setting Temp (17°)           |  |  |  | Findings        |  | Dead Set     |  |
| Discharge Temperature (High)           |  |  |  | Recommendation  |  |              |  |
| Intake Temperature (High)              |  |  |  |                 |  |              |  |
| Ampere                                 |  |  |  |                 |  |              |  |
| Wattage (Inverter)                     |  |  |  |                 |  |              |  |
| Voltage                                |  |  |  |                 |  |              |  |
| SAC/PAC   Pressure (PSI)               |  |  |  |                 |  |              |  |

| Part Code  | Description                         | Qty           | Unit Price | Amount      |
|--|-------------------------------------|---------------|------------|-------------|
|  | PCB board                           | 1             | 1,500      | P1,500.00   |
|  | WATER DISPENSER                     |               |            |             |
|  | Discount                            |               |            |             |
|  | 1,200.00 - Parts - 20%              |               |            |             |
|  | 720.00 - Labor - 10%                |               |            |             |
|  | P1,920.00                           |               |            |             |
|  | LIQUIDATION                         |               |            |             |
|  | P1,440.00                           |               |            |             |
| SR No.   |                                     | Labor         |            | P 400.00    |
| Repair Done  | Replaced PCB part & observe unit OK | Handling      |            |             |
| Repair Code  |                                     | Others        |            |             |
| Date Attended  | 7-4-24                              | Date Finished | 7-4-24     | Total       |
| Time Attended  | 9:55 AM                             | Time Finished | 2:25 PM    | Amount Paid |
| This serves as temporary receipt when properly filled up by authorized representative. |                                     | Check No.     |            | Balance     |
| Bank / Branch  |                                     |               |            |             |

|  |  |  |  |
|--|--|--|--|
| Serviced by: Kevin Serran, Manuel Rapsan |  | By signing below, I authorize or give consent to Kolin Philippines International, Inc. and its ASC to collect, store and process my personal information for availing service as required by Data Privacy Act of 2012 and other applicable laws and regulations. |  |
| Vidal Alben Arjona Jr.                   |  | I hereby agree to the above repair charges incurred/to be incurred to my unit and to the terms and conditions stated at the back, and that I received the unit in good working condition.  |  |
| Technician(s)                            |  | Created by: ALVIN DE RIVERA  | Conformed by: Customer (Signature over printed name) |

No. **HO-00211983**  
Previous SJR No.

|  |   |            |                |  |  |                 |                          |               |                                     |
|--|---|------------|----------------|--|--|-----------------|--------------------------|---------------|-------------------------------------|
| Customer   | Chua Yap, Jake Aaron  |            |                |  | Date   | 07-04-2024      |                          |               |                                     |
| Address  | Unit 74A, Tomas Arguelles St., Brgy. Santol (Entry Point Bayani St. Silencio...<br>St.), QUEZON CITY, Metro Manila... |            |                |  | Start Time   | 08:28 am        |                          |               |                                     |
| Telephone No.  | 365-4562  |            | Mobile No.     | 0917-5249738   |  | Relayed by      | Jake Chua Yap            |               |                                     |
| Contact Person   | Ms. Ellen Jean  | Mobile No. |                |  | Tel. No.   | 365-4562        |                          | Warranty Type | C                                   |
| Warranty Code  |   |            |                |  | Room Size  |                 |                          | Job Class     | GC LVL 1                            |
| Model  | KAG-260RS   |            |                |  | Call Origin  | IO              |                          | Job Type      | FD                                  |
| S/N (I)  | Hide on Wall  |            | S/N (O)        | Room#1   |  | Permit?         | <input type="checkbox"/> | Parking?      | <input checked="" type="checkbox"/> |
| Dealer   |   |            | DOP            |  |  | Appointment?    | <input type="checkbox"/> | O.R.?         | <input type="checkbox"/>            |
| Installer  |   |            | Complaint      | For GC   |  |                 |                          |               |                                     |
| Location   | Room#1  | Before     | After          | Notes: Validate actual model and serial number, update SJR as needed |  |                 |                          |               |                                     |
| Mode Setting (Cool)  |   |            | No. of Visit   | 1st action   |  | Tentative Sched | 07/04/2024               |               |                                     |
| WAC   Setting Temp(16°C-RE)/(10/12-ME)   |   |            | Findings       |  |  |                 |                          |               |                                     |
| SAC/PAC   Setting Temp (17°)   |   |            |                |  |  |                 |                          |               |                                     |
| Discharge Temperature (High)   |   |            |                |  |  |                 |                          |               |                                     |
| Intake Temperature (High)  |   |            |                |  |  |                 |                          |               |                                     |
| Ampere   |   |            | Recommendation |  |  |                 |                          |               |                                     |
| Wattage (Inverter)   |   |            |                |  |  |                 |                          |               |                                     |
| Voltage  |   |            |                |  |  |                 |                          |               |                                     |
| SAC/PAC   Pressure (PSI)   |   |            |                |  |  |                 |                          |               |                                     |
| Part Code  | Description   |            |                |  | Qty  | Unit Price      |                          | Amount        |                                     |
| ROOM 1 MASTER  |   |            |                |  |  |                 |                          |               |                                     |
| (Signature)  |   |            |                |  |  |                 |                          |               |                                     |
| SR No.   |   |            |                |  | Labor  |                 |                          |               |                                     |
| Repair Done  | Rendered for Cleaning   |            |                |  | Handling   |                 |                          |               |                                     |
| Repair Code  |   |            |                |  | Others   |                 |                          |               |                                     |
| Date Attended  | 7-4-24  |            | Date Finished  | 7-4-24   |  | Total           | P800.00                  |               |                                     |
| Time Attended  | 9:55 AM   |            | Time Finished  | 2:25 PM  |  | Amount Paid     | For Collection           |               |                                     |
| This serves as temporary receipt when properly filled up by authorized representative. |   |            |                |  | Check No.  | Bank / Branch   |                          |               |                                     |
| Serviced by: Kevin Sano, Manuel Raposo   |   |            |                |  | By signing below, I authorize or give consent to Kolin Philippines International, Inc. and its ASC to collect, store and process my personal information for availing service as required by Data Privacy Act of 2012 and other applicable laws and regulations. |                 |                          |               |                                     |
| Vidal Alban  |   |            |                |  | I hereby agree to the above repair charges incurred/to be incurred to my unit and to the terms and conditions stated at the back, and that I received the unit in good working condition.  |                 |                          |               |                                     |
| Arjay PJ   |   |            |                |  | Created by: ALVIN DE RIVERA CSR  |                 |                          |               |                                     |
| Technician(s)  |   |            |                |  | Conformed by: (Signature over printed name)  |                 |                          |               |                                     |

No.  
Previous SJR No.

HO-00211984

|   |  |            |                |              |  |   |                           |               |               |
|---|--|------------|----------------|--------------|--|---|---------------------------|---------------|---------------|
| Customer  | Chua Yap, Jake Aaron   |            |                |              | Date   | 07-04-2024  |                           |               |               |
| Address   | Unit 74A, Tomas Arguelles St., Brgy. Santol (Entry Point Bayani St. Silencio...<br>SL), QUEZON CITY, Metro Manila... |            |                |              | Start Time   | 08:31 am  |                           |               |               |
| Telephone No.   | 365-4562   |            | Mobile No.     | 0917-5249738 |  | Relayed by  | Jake Chua Yap             |               |               |
| Contact Person  | Ms. Ellen Jean   | Mobile No. | ...            |              | Tel. No.   | 365-4562  |                           | Warranty Type | C             |
| Warranty Code   |  |            |                |              | Room Size  |   |                           | Job Class     | GC LVL 1      |
| Model   | KAG-260RS 2.5 HP REGULAR   |            |                |              | Call Origin  | IO  |                           | Job Type      | FD            |
| S/N (I)   | Faded KAG-   |            | S/N (O)        | Unit#3       |  | Permit?   | Parking?                  | Appointment?  | O.R.? Ladder? |
| Dealer  |  |            | DOP            |              |  | Notes: *Validate actual model and serial number, update SJR as needed |                           |               |               |
| Installer   |  |            | Complaint      | For GC       |  |   |                           |               |               |
| Location  | Unit#3 2nd Floor   | Before     | After          |              |  |   |                           |               |               |
| Mode Setting (Cool)   |  |            | No. of Visit   | 1st action   |  | Tentative Sched   | 07/04/2024                |               |               |
| WAC   Setting Temp(16°C-RE)/(10/12-ME)  |  |            | Findings       |              |  |   |                           |               |               |
| SAC/PAC   Setting Temp (17°)  |  |            |                |              |  |   |                           |               |               |
| Discharge Temperature (High)  |  |            |                |              |  |   |                           |               |               |
| Intake Temperature (High)   |  |            |                |              |  |   |                           |               |               |
| Ampere  |  |            | Recommendation |              |  |   |                           |               |               |
| Wattage (Inverter)  |  |            |                |              |  |   |                           |               |               |
| Voltage   |  |            |                |              |  |   |                           |               |               |
| SAC/PAC   Pressure (PSI)  |  |            |                |              |  |   |                           |               |               |
| Part Code   | Description  |            |                |              | Qty  | Unit Price  |                           | Amount        |               |
| <div># 3 JAKE</div> <div>DATE: 7/4/24</div> <div>CLEAR</div> <div>7/4/24</div> <div>7/4</div> |  |            |                |              |  |   |                           |               |               |
| SR No.  |  |            |                |              | Labor  |   |                           |               |               |
| Repair Done   | Rendered Gen Cleaning  |            |                |              | Handling   |   |                           |               |               |
| Repair Code   |  |            |                |              | Others   |   |                           |               |               |
| Date Attended   | 7-4-24   |            | Date Finished  | 7-4-24       |  | Total   | 800.00                    |               |               |
| Time Attended   | 9:55 AM  |            | Time Finished  | 2:25 PM      |  | Amount Paid   | For Collection            |               |               |
| This serves as temporary receipt when properly filled up by authorized representative.        |  |            |                |              | Check No.  | Bank / Branch   |                           |               |               |
| Serviced by: Kevin Sener, Manual Repair   |  |            |                |              | By signing below, I authorize or give consent to Kolin Philippines International, Inc. and its ASC to collect, store and process my personal information for availing service as required by Data Privacy Act of 2012 and other applicable laws and regulations. |   |                           |               |               |
| Vidal Alben Arjay PJ  |  |            |                |              | I hereby agree to the above repair charges incurred/to be incurred to my unit and to the terms and conditions stated at the back, and that I received the unit in good working condition.  |   |                           |               |               |
| Technician(s)   |  |            |                |              | Created by: ALVIN DE RIVERA CSR  |   | Conformed by: [Signature] |               |               |
|   |  |            |                |              | Customer (Signature over printed name)   |   |                           |               |               |

# K Kolin Philippines Int'l., Inc.

1854 Sta. Rita St., Guadalupe Nuevo, Makati City  
Tel. No.: 8852-6868 / Mobile: 0917-811-8982 / Email: service@kolinphil.com.ph  
Website: www.kolinphil.com.ph

## SERVICE JOB REPORT

No.   
 Previous SJR No.

HO-00211987

|  |   |            |  |                    |   |                 |  |          |                                     |
|--|---|------------|--|--------------------|---|-----------------|--|----------|-------------------------------------|
| Customer   | Chua Yap, Jake Aaron  |            |  |                    | Date  | 07-04-2024      |  |          |                                     |
| Address  | Unit 74A, Tomas Arguelles St., Brgy. Santol (Entry Point Bayani St. Silencio...<br>St.), QUEZON CITY, Metro Manila... |            |  |                    | Start Time  | 08:35 am        |  |          |                                     |
| Telephone No.  | 365-4562  |            | Mobile No.   | 0917-5249738       |   | Relayed by      | Jake Chua Yap  |          |                                     |
| Contact Person   | Ms. Ellen Jean  | Mobile No. |  | Tel. No.           | 365-4562  |                 | Warranty Type  | C        |                                     |
| Warranty Code  |   |            |  | Room Size          |   |                 | Job Class  | GC LVL 1 |                                     |
| Model  | KAG-200RSINV  |            |  | Call Origin        | IO  |                 | Job Type   | FD       |                                     |
| S/N (I)  | 19031910-26515  |            | S/N (O)  | (REPLACEMENT UNIT) |   | Permit?         | <input type="checkbox"/>                                       | Parking? | <input checked="" type="checkbox"/> |
| Dealer   | KMI   |            | DOP  | 12/07/2020         |   | Notes           | *Validate actual model and serial number, update SJR as needed |          |                                     |
| Installer  |   |            | Complaint  | For GC             |   |                 |  |          |                                     |
| Location   | 1ST FLOOR BEDROOM   |            | Before   | After              |   |                 |  |          |                                     |
| Mode Setting (Cool)  |   |            | No. of Visit   | 1st action         |   | Tentative Sched | 07/04/2024   |          |                                     |
| WAC   Setting Temp(16°C-RE)/(10/12-ME)   |   |            | Findings   |                    |   |                 |  |          |                                     |
| SAC/PAC   Setting Temp (17°)   |   |            |  |                    |   |                 |  |          |                                     |
| Discharge Temperature (High)   |   |            |  |                    |   |                 |  |          |                                     |
| Intake Temperature (High)  |   |            |  |                    |   |                 |  |          |                                     |
| Ampere   |   |            | Recommendation   |                    |   |                 |  |          |                                     |
| Wattage (Inverter)   |   |            |  |                    |   |                 |  |          |                                     |
| Voltage  |   |            |  |                    |   |                 |  |          |                                     |
| SAC/PAC   Pressure (PSI)   |   |            |  |                    |   |                 |  |          |                                     |
| Part Code  | Description   |            |  |                    | Qty   | Unit Price      | Amount   |          |                                     |
| GUEST ROOM 2HP I   |   |            |  |                    |   |                 |  |          |                                     |
| <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="border: 1px solid black; border-radius: 50%; padding: 10px; text-align: center;">             DATE: 7/4/24<br/>             CLEARED BY: [Signature]<br/>             10% discount           </div> <div style="text-align: right;">             9720.00<br/>             [Signature]<br/>             7/5           </div> </div> |   |            |  |                    |   |                 |  |          |                                     |
| SR No.   |   |            |  |                    | Labor   |                 |  |          |                                     |
| Repair Done  | Rendered Gun Cleaning   |            |  |                    | Handling  |                 |  |          |                                     |
| Repair Code  |   |            |  |                    | Others  |                 |  |          |                                     |
| Date Attended  | 7-4-24  |            | Date Finished  | 7-4-24             |   | Amount Paid     | 800.00   |          |                                     |
| Time Attended  | 9:55 AM   |            | Time Finished  | 2:25 PM            |   | Balance         | For Collection   |          |                                     |
| This serves as temporary receipt when properly filled up by authorized representative.   |   |            |  |                    | Check No.   | Bank / Branch   |  |          |                                     |
| Serviced by: Kevin Sana, Manuel Raposo   |   |            | By signing below, I authorize or give consent to Kolin Philippines International, Inc. and its ASC to collect, store and process my personal information for availing service as required by Data Privacy Act of 2012 and other applicable laws and regulations. |                    |   |                 |  |          |                                     |
| Vidal Alben Arjay  |   |            | I hereby agree to the above repair charges incurred/to be incurred to my unit and to the terms and conditions stated at the back, and that I received the unit in good working condition.  |                    |   |                 |  |          |                                     |
| Technician(s)  |   |            | Created by: ALVIN DE RIVERA CSR  |                    | Conformed by: [Signature]<br>Customer (Signature over printed name) |                 |  |          |                                     |



## SERVICE JOB REPORT

No. \_\_\_\_\_  
Previous SJR No. \_\_\_\_\_

HO-00211988

[illegible]

Green Service