KINGSGATE AUTOMOTIVE LTD. FRONT WHEEL DRIVE ANALYSIS

CUSTOMER DIAGNOSTIC SURVEY FORM

CUSTOMER NAME:_____ DATE:_____

REPAIR ORDER#:_____ LICENSE #:_____

SERVICE ADVISOR:_____ VIN#:_____

IT HAPPENS WHEN.....

VEHICLE OPERATION

- ☐ Vehicle is not moving. (engine running)
- ☐ Vehicle is moving during the following operation (s)
  - ☐ Light to medium acceleration
  - ☐ Hard acceleration
  - ☐ Deceleration (coast in gear)
  - ☐ Deceleration (coast out of gear)
  - ☐ Cruising (constant highway speed)
  - ☐ Braking
  - ☐ Turning
  - ☐ With vehicle occupants (or heavy load)

SPEED OF VEHICLE

Describe the speed at which the problem occurs:
Vehicle speed _____ km / h

Engine Speed
☐ Idle ☐ Medium ☐ High

ROAD TEST

Describe the speed at which the problem occurs
Vehicle speed _____ km / h

Vehicle RPMs _____

Road test indicated the following:

- ☐ Engine check
- ☐ Engine accessory check
- ☐ Wheel and Tire check
- ☐ Engine mount check
- ☐ Drive train check
- ☐ Body check
- ☐ Other

_____
_____
_____
_____

DEFINE THE PROBLEM.....

THE PROBLEM STARED

- ☐ Suddenly at _____ (odometer)
- ☐ Gradually at _____ (odometer)
- ☐ Just started _____ (odometer)
- ☐ Since the vehicle was new
- ☐ After abnormal occurrence (i.e. pot holes, curb impact)

THE PROBLEM OCCURS

☐ Rarely ☐ Sometimes ☐ Always

NOISE / VIBRATION

Are there any unusual noises? ☐ Yes ☐ No

Is there any vibration? ☐ Yes ☐ No

If yes, please describe the noise and or vibration and where it seems to be coming form. (Some of the noises may be accompanied by vibration.)

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CUSTOMER SIGNATURE: _____