

WE WANT TO FIX IT RIGHT!

REPAIR NEEDS ANALYSIS

Are You A New Customer? Yes No

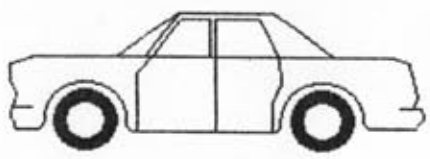
Name:				Home phone:	
Address:				Work phone:	
City:		State:	Zip:		Mobile phone:
Year:	Make:		Model:	Color:	Mileage:
VIN #:			ID #:		

MAINTENANCE SERVICES _____ Mile Service <input type="checkbox"/> Lube / Oil / Filter <input type="checkbox"/> Rear axle service <input type="checkbox"/> Transmission service <input type="checkbox"/> Pack wheel bearings	<input type="checkbox"/> Front brakes inspection <input type="checkbox"/> Rear brakes inspection <input type="checkbox"/> Rotate four tires <input type="checkbox"/> Balance four tires <input type="checkbox"/> Wheel alignment <input type="checkbox"/> Exhaust and suspension inspect <input type="checkbox"/> Coolant check <input type="checkbox"/> Cooling system flush	<input type="checkbox"/> Spark plug service <input type="checkbox"/> Emission service <input type="checkbox"/> Injector service <input type="checkbox"/> Air filter service <input type="checkbox"/> PCV valve service <input type="checkbox"/> Fuel system inspection <input type="checkbox"/> Fuel filter service <input type="checkbox"/> Air conditioning performance test
WIND NOISE / WATER LEAK <input type="checkbox"/> Driver's front <input type="checkbox"/> Driver's side <input type="checkbox"/> Driver's rear <input type="checkbox"/> Passenger's front <input type="checkbox"/> Passenger's side <input type="checkbox"/> Passenger's rear	What? _____ _____ _____ _____	Where? _____ When? _____ Who? _____ How long? _____ Worked on before? _____
BRAKES <input type="checkbox"/> Noisy <input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> Vehicle pulls right / left <input type="checkbox"/> Vibrations or shuddering <input type="checkbox"/> Brake pedal low <input type="checkbox"/> Parking brake problem	What? _____ _____ _____ _____	Where? _____ When? _____ Who? _____ How long? _____ Worked on before? _____
ELECTRICAL / ACCESSORY <input type="checkbox"/> Light(s) not working <input type="checkbox"/> Fuel gauge inaccurate / inoperable <input type="checkbox"/> Speedometer inaccurate / inoperable <input type="checkbox"/> Gauges / warning lights malfunction <input type="checkbox"/> Windshield wiper operation <input type="checkbox"/> Windshield washer operation <input type="checkbox"/> Radio / cassette / CD player problem	What? _____ _____ _____ _____	Where? _____ When? _____ Who? _____ How long? _____ Worked on before? _____
ENGINE <input type="checkbox"/> Difficult / slow to start when engine is... <input type="checkbox"/> Stalls when engine is..... <input type="checkbox"/> Rough idling when engine is..... <input type="checkbox"/> Fast idling when engine is..... <input type="checkbox"/> Hesitation / stumbling when engine is... <input type="checkbox"/> Weak acceleration when engine is..... <input type="checkbox"/> Continues to run with key turned off <input type="checkbox"/> Other	<input type="checkbox"/> Hot <input type="checkbox"/> Cold <input type="checkbox"/> Hot <input type="checkbox"/> Cold <input type="checkbox"/> Hot <input type="checkbox"/> Cold <input type="checkbox"/> Hot <input type="checkbox"/> Cold <input type="checkbox"/> Hot <input type="checkbox"/> Cold <input type="checkbox"/> Hot <input type="checkbox"/> Cold	Where? _____ When? _____ Who? _____ How long? _____ Worked on before? _____

AIR CONDITIONING / HEATING <input type="checkbox"/> No heating at all <input type="checkbox"/> Inadequate heating <input type="checkbox"/> No defrosting <input type="checkbox"/> Inadequate defrosting <input type="checkbox"/> No air conditioning <input type="checkbox"/> Inadequate air conditioning <input type="checkbox"/> Fan noisy	What? _____ _____ _____ _____	Where? _____ When? _____ Who? _____ How long? _____ Worked on before? _____
INTERIOR <input type="checkbox"/> Interior soiled / dirty at delivery <input type="checkbox"/> Seat cover problem <input type="checkbox"/> Seat hard to adjust; loose in track <input type="checkbox"/> Carpet wrinkled / loose <input type="checkbox"/> Door panel material wrinkled, etc. <input type="checkbox"/> Glove box door improper fit <input type="checkbox"/> Instrument panel problems <input type="checkbox"/> Headliner problem <input type="checkbox"/> Door lock problems <input type="checkbox"/> Window problems	What? _____ _____ _____ _____	Where? _____ When? _____ Who? _____ How long? _____ Worked on before? _____
STEERING AND HANDLING <input type="checkbox"/> Steering wheel vibrates at idle <input type="checkbox"/> Steering wheel vibrates below 35 MPH <input type="checkbox"/> Steering wheel vibrates above 35 MPH <input type="checkbox"/> Steering noisy <input type="checkbox"/> Constant pull to one side <input type="checkbox"/> Vehicle vibrates below 35 MPH <input type="checkbox"/> Vehicle vibrates above 35 MPH	What? _____ _____ _____ _____	Where? _____ When? _____ Who? _____ How long? _____ Worked on before? _____
SQUEAKS AND RATTLES <input type="checkbox"/> Instrument panel / glove box door <input type="checkbox"/> Window / door <input type="checkbox"/> Seats <input type="checkbox"/> Steering wheel / column <input type="checkbox"/> Driver's side <input type="checkbox"/> Passenger side <input type="checkbox"/> Vehicle exterior	What? _____ _____ _____ _____	Where? _____ When? _____ Who? _____ How long? _____ Worked on before? _____
TRANSMISSION AND DIFFERENTIAL <input type="checkbox"/> AUTOMATIC <input type="checkbox"/> MANUAL <input type="checkbox"/> Shifts rough <input type="checkbox"/> Will not upshift <input type="checkbox"/> Will not downshift <input type="checkbox"/> Misses shift slips <input type="checkbox"/> Clunks going in gear <input type="checkbox"/> Grinds when shifting <input type="checkbox"/> Difficult to shift <input type="checkbox"/> Slips / whines	What? _____ _____ _____ _____	Where? _____ When? _____ Who? _____ How long? _____ Worked on before? _____

Noted damage to vehicle:
 LFF RFF Hood
 LRQ RRQ Trunk
 Door Lenses Glass

Circle exact area of problem. Any mark in this area indicates damage to vehicle prior to work being started



Driver Side



Front



Passenger Side



Rear