

Name: _____

Vehicle: _____

Mileage: _____

Diagnostic Worksheet

Driveability Symptom

- Service Engine Light
- Hard Start / No Start (Crank)
- Won't Crank
- Engine Dies
- Engine misses or shakes
- Engine hesitates or stumbles
- Idle high
- Idle low
- Engine bucks or jerks
- Engine runs after key is off
- Sluggish, loss of power
- Other _____

Squeaks, Rattles, Noise Symptom

Please indicate on the drawing where the noise is coming from.

Sounds Like:

- | | |
|--------------------------------------|-----------------------------------|
| <input type="checkbox"/> Knock | <input type="checkbox"/> Scraping |
| <input type="checkbox"/> Squeak | <input type="checkbox"/> Roar |
| <input type="checkbox"/> Hard Metal | <input type="checkbox"/> Ticking |
| <input type="checkbox"/> Tinny | |
| <input type="checkbox"/> Other _____ | |

Suspension, Brakes, Steering

- | | |
|-----------------------------------|--|
| <input type="checkbox"/> Pull Rt. | <input type="checkbox"/> Bottoms out |
| <input type="checkbox"/> Pull Lt. | <input type="checkbox"/> Hard to steer |
| <input type="checkbox"/> Wanders | <input type="checkbox"/> Vibration |

How Often does the Symptom occur?

- Always
 - Every Hour
 - Every few minutes
 - Once or twice a month
 - Only during? _____
-
- Getting Better
 - Getting worse
 - Since _____

Happens when engine is?

- | | |
|-------------------------------|---------------------------------|
| <input type="checkbox"/> Cold | <input type="checkbox"/> Warm |
| <input type="checkbox"/> Hot | <input type="checkbox"/> Always |

Weather Condition: _____

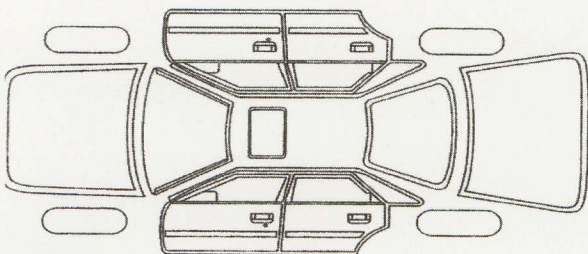
Temperature:

- | | |
|-----------------------------------|----------------------------------|
| <input type="checkbox"/> 32-60 | <input type="checkbox"/> Raining |
| <input type="checkbox"/> 60-80 | <input type="checkbox"/> Dry |
| <input type="checkbox"/> 80-100 | |
| <input type="checkbox"/> Over 100 | |

Drive Condition?

- | | |
|---|---------------------------------------|
| <input type="checkbox"/> Light Throttle | <input type="checkbox"/> Deceleration |
| <input type="checkbox"/> Heavy Throttle | <input type="checkbox"/> Idle/Stopped |
| <input type="checkbox"/> Starting | <input type="checkbox"/> MPH _____ |
| <input type="checkbox"/> Sm. Bumps | <input type="checkbox"/> RPM _____ |
| <input type="checkbox"/> Lg. Bumps | <input type="checkbox"/> Steady Speed |
| <input type="checkbox"/> Rt. Turns | <input type="checkbox"/> Highway |
| <input type="checkbox"/> Lt. Turns | <input type="checkbox"/> City |
| <input type="checkbox"/> Backing up | <input type="checkbox"/> Braking |
| <input type="checkbox"/> Uphill | <input type="checkbox"/> Shifting |
| <input type="checkbox"/> Downhill | |
| <input type="checkbox"/> Other _____ | |

Additional notes: _____



Date: _____