

Print this form, fill out applicable sections, and bring with you when you drop off your vehicle.

Customer Diagnostic Evaluation Form

YEAR: _____ MAKE: _____ MODEL: _____

Name: _____ Email: _____

Address: _____ Phone: _____

_____ Alt. Phone: _____

Symptom:

- Hard starting (or not starting) but cranks properly
- Excessive cranking time before starting
- Starts normally but engine stalls or will not run
- Rough (unsteady) idle speed
- Idle speed is too high
- Engine hesitates or stalls on acceleration
- Engine stalls on deceleration or quick stop
- Engine pings or knocks
- Engine runs on after key is turned off
- Engine backfires (popping noise)
- Speed changes without touching accelerator
- Poor gas mileage (_____ MPG)
- Other: _____

When Does Drivability Problem Occur?

Engine temperature gauge at:

- Cold Warm-up (fast idle)
- Normal Hot
- At all temperatures

Weather conditions:

- Hot days
- Cool or cold days
- Humid or rainy days

Driving Conditions:

- Other: _____

How Often Does Problem Occur?

- Rarely Sometimes Always
- Accelerating Light Medium Hard
- Decelerating
- Cruising
- Braking
- Occurs at the vehicle speed of _____ MPH
- Occurs at the engine speed of _____ RPM

When Did Drivability Problem Start?

- Suddenly occurred
Mileage _____
- Gradually occurred
Mileage _____
- Just started

- Since car was new

What Type of Fuel is Used?

- Regular Unleaded
 - Premium Unleaded Diesel
- Brand of fuel used: _____

Other Services Requested and Notes:

