

Check List for Interview

AUTOMATIC TRANSMISSION (DIAGNOSTICS)

2. Check List for Interview

A: CHECK

Check the following items when a problem has occurred.

NOTE:

Use copies of this page for interviewing customers.

Customer's name			
Date of purchase			
Date of repair			
Transmission model	Transmission	V.I.N.	
Odometer reading	km (miles)		
Frequency	<input type="checkbox"/> Continuous <input type="checkbox"/> Intermittent (times a day)		
Weather	<input type="checkbox"/> Fine <input type="checkbox"/> Cloudy <input type="checkbox"/> Rainy <input type="checkbox"/> Snowy <input type="checkbox"/> Other ()		
Place	<input type="checkbox"/> Highland <input type="checkbox"/> Suburbs <input type="checkbox"/> Inner city <input type="checkbox"/> Uphill <input type="checkbox"/> Rough road <input type="checkbox"/> Other ()		
Ambient air temperature	<input type="checkbox"/> Hot <input type="checkbox"/> Warm <input type="checkbox"/> Cool <input type="checkbox"/> Cold		
Vehicle speed	km/h (MPH)		
AT OIL TEMP light	<input type="checkbox"/> Blinks continuously <input type="checkbox"/> Does not blink		
Select lever position	<input type="checkbox"/> P <input type="checkbox"/> R <input type="checkbox"/> N <input type="checkbox"/> D <input type="checkbox"/> SPORT mode		
Driving condition	<input type="checkbox"/> Not affected <input type="checkbox"/> At racing <input type="checkbox"/> While decelerating	<input type="checkbox"/> At starting <input type="checkbox"/> While accelerating <input type="checkbox"/> While turning (<input type="checkbox"/> RH/ <input type="checkbox"/> LH)	<input type="checkbox"/> While idling <input type="checkbox"/> When cruising
SPORT mode	<input type="checkbox"/> ON <input type="checkbox"/> OFF		
Symptoms	<input type="checkbox"/> No up-shift <input type="checkbox"/> No down-shift <input type="checkbox"/> No kick down <input type="checkbox"/> Vehicle does not move (<input type="checkbox"/> Any position <input type="checkbox"/> Particular position) <input type="checkbox"/> Lock-up malfunction <input type="checkbox"/> Noise or vibration <input type="checkbox"/> Shift shock or slip <input type="checkbox"/> Select lever does not move <input type="checkbox"/> Other ()		