DIAGNOSTIC FORM FOR:

NOISE, VIBRATION OR HARSHNESS

British American AUTO CARE, INC.
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Customer Name: _____

Date: _____ **RO#:** _____

Please check all applicable boxes and fully describe the condition that applies to your vehicle.

1. THIS IS THE PROBLEM

☐ Vehicle is making a noise

The noise sounds like:

☐ Bump ☐ Clunk
☐ Rattle ☐ Squeak
☐ Boom ☐ Drone
☐ Whine ☐ Growl
☐ Other, describe _____

☐ Vehicle has a vibration

The vibration might sound like:

☐ Buzz ☐ Rattle
☐ Growl ☐ Resonating
☐ Other, describe_____

☐ Vehicle harshness

The vehicle is:

☐ Buzz ☐ Hum
☐ Growl ☐ Boom
☐ Drone ☐ Other, please describe

☐ **Spend 1 hour diagnosing the problem, and make sure vehicle is safe.**

☐ **Spend up to 3 hours diagnosing the problem.**

2. IT OCCURS AS FOLLOWS

Heard or felt from _____ part of the car

☐ **Front** ☐ Right ☐ Left
☐ **Rear** ☐ Right ☐ Left
☐ Inside of car ☐ Outside of car
☐ Under the car

It occurs at:

☐ Idle ☐ Light Acceleration
☐ Medium Acceleration ☐ Heavy Acceleration
_____ MPH

It happens:

☐ All the time
☐ Once a day
☐ Once a week
☐ Once a month
☐ The last time the problem occurred _____
☐ Other, please describe_____

The engine was:

☐ Cold ☐ Hot ☐ Normal operating temperature

The outside temperature was:

☐ Cold ☐ Sunny
☐ Warm ☐ Dry
☐ Hot ☐ Raining
☐ Other, describe _____

AC on? ☐Yes ☐No
Towing a trailer? ☐Yes ☐No
Windows down? ☐Yes ☐No
Other _____
Is the problem getting worse? ☐Yes ☐No

Additional Information: