

AUTOMATIC TRANSMISSION
Customer Diagnostic Survey Form

Customer Name _____ Date _____
Repair Order # _____ License # _____
Service Advisor _____ VIN _____

IT HAPPENS WHEN...

GEAR SELECTOR

Describe the position of the gear selector (check all that apply)

- P (park)
- R (reverse)
- N (neutral)
- D (drive 1-4 gear)
- D (drive 1-2 gear)
- D1 (drive 1st gear only)

Between what gear position(s) does the problem occur? (check all that apply)

- 1 and 2 2 and 3 3 and 4(overdrive)

THE PROBLEM OCCURS WHEN...

- Light to medium acceleration
- Hard acceleration
- Deceleration (foot off accelerator)
- Breaking
- 2 WD on
- 4 WD on

Engine speed _____ (RPM)
 Idle Medium High

Engine Temperature
 Cold Warm Hot

Outside Temperature
 Cold Warm Hot

How long does the vehicle have to be operating before the condition occurs? _____ mins _____ hrs

THE PROBLEM BEGAN OCCURING..

- Suddenly at _____ (odometer)
- Gradually at _____ (odometer)
- Just started at _____ (odometer)
- Since the vehicle was new

Has the transmission been previously repaired?
 Yes No

DEFINE THE PROBLEM...

TRANSMISSION

Does the transmission/transaxle shift properly?
 Yes No

Describe how the problem "feels." (Check all that apply)

- Slow, mushy or early shift
- Rough, harsh or delayed shift
- Slippage (engine speed increases at initial takeoff or when shifting)
- No upshift
- No downshift
- Will not shift at all

Does the engine start when the selector lever is not in "P" (park) or "N" (neutral)?

- Yes No

THE PROBLEM OCCURS...

- Rarely
- Sometimes
- Always

UNUSUAL NOISES

Are there any unusual noises? Yes No

If yes, please describe the noise and where it seems to be coming from.

SPEED OF VEHICLE

Describe the speed at which the problem occurs:

Vehicle speed _____ (km/h)

Is the vehicle used for towing? Yes No

Size / Wt. of trailer _____

Customer Signature _____