**Noise and Vibration Diagnosis**

**Meets ASE Tasks:** (A3-D-5) P-2,(A4-A-1) P-1, (A4-D-5) P-2 Diagnose wheel/tire vibration, shimmy, and noise; determine needed action.

**Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_ Time on Task \_\_\_\_\_\_\_\_\_\_**

**Make/Model/Year \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ VIN \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Evaluation: 4 3 2 1**

**\_\_\_\_\_ 1.** Check service information for the specified (if any) methods and procedures to follow

 when diagnosing noise and/or vibration concerns.

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**\_\_\_\_\_ 2.** Test drive the vehicle and verify the concerns. Check all that apply:

 \_\_\_ Noise \_\_\_ Vibration \_\_\_ Both

**\_\_\_\_\_ 3.** If there is a vibration, what frequency and at what speed is the vibration?

 Frequency \_\_\_\_\_\_\_\_\_ Vehicle speed \_\_\_\_\_\_\_\_\_

 Frequency \_\_\_\_\_\_\_\_\_ Vehicle speed \_\_\_\_\_\_\_\_\_

 Frequency \_\_\_\_\_\_\_\_\_ Vehicle speed \_\_\_\_\_\_\_\_\_

 Frequency \_\_\_\_\_\_\_\_\_ Vehicle speed \_\_\_\_\_\_\_\_\_

**\_\_\_\_\_ 4.** If a noise, check for witness marks and describe this location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**\_\_\_\_\_ 5.** Based on the test results and visual inspection, what is the needed action?

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