Lubrication Service

Meets ASE Task: (Not specified by ASE)

Name:_____ Date:_____ Time on Task:_____

Make/Model/Year:_____ VIN:_____

Evaluation (Enter number from 4, 3, 2, 1) :_____

☐ **1.** Check service information for the specified suspension and steering lubrication recommendations and procedures. _____

_____

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